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## INVOLUNTARY "WHITENESS": THE ACCULTURATION OF BLACK DOCTORAL FEMALE STUDENTS IN THE FIELD OF CLINICAL PSYCHOLOGY

### A Dissertation

Presented to the Faculty of

Antioch University Seattle

Seattle, WA

In Partial Fulfilment

Of the Requirements of the Degree

Doctor of Psychology

By
Carmela A. Maxell–Harrison

July 2019

## INVOLUNTARY "WHITENESS": THE ACCULTURATION OF BLACK DOCTORAL FEMALE STUDENTS IN THE FIELD OF CLINICAL PSYCHOLOGY

This dissertation, by Carmela A. Maxell-Harrison, has been approved by the Committee Members signed below who recommend that it be accepted by the faculty of the Antioch University Seattle at Seattle, WA in partial fulfillment of requirements for the degree of

#### DOCTOR OF PSYCHOLOGY

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#### **ABSTRACT**

INVOLUNTARY "WHITENESS": THE ACCULTURATION OF BLACK

DOCTORAL FEMALE STUDENTS IN THE FIELD OF CLINICAL PSYCHOLOGY

Carmela A. Maxell-Harrison

Antioch University Seattle

Seattle, WA

This dissertation is based on qualitative research that documents the experiences of Black women matriculating through clinical psychology doctoral programs in predominantly white institutions (PWIs) and the perceived psychological effects of becoming a psychologist in a stigmatized field. Additionally, the historical and collective traumas that are continually experienced by this group and their coping mechanisms are explored and highlighted. More specifically, as existing research has revealed, Black women in doctoral programs in general experience a series of responses to racialized and gendered discriminatory practices leading them to withdraw from their programs or invoke coping mechanisms that may be counterintuitive to their culture and upbringing. Of specific interest is how this is played out in the field of clinical psychology, as there is little to no research looking into the experiences of Black women specifically trying to obtain doctorates in this sub–field. This dissertation is available in open access at AURA, http://aura.antioch.edu/ and Ohio Link ETD Center,

https://etd.ohiolink.edu/etd.

Keywords: Black Women, Clinical Psychology, Doctoral Student, Intersectionality

### **Dedication**

This research is dedicated to the little Black girl out there who is questioning her abilities, questioning her intelligence, questioning her worth, questioning her very existence. You are wanted, you are needed, you are praised. Now, live your destiny and fulfill your calling—you wonderful work of art. You are ordained by God to be GREAT—now go and be.

#### **Acknowledgments**

All Honor, Glory, and Praise is given to My Lord—the Way, the Truth, the Life. To God the Father, God the Son, and God the Holy Ghost. To Whom I give all thanks for putting me in the right place, at the right time, to complete such a work that is meaningful and will transcend all that I have imagined.

To my family:

My parents, siblings, husband (Scott), and children (Kylee, Konrad, George, and Logan) – You keep and have kept me humble and grounded through a turbulent process, and while words could describe my thoughts, they fail to encapsulate the entirety of my gratitude. Every laugh, every tear, every quiet and reflective moment has helped to shape the essence of my very being, and I hope that this work serves as a tangible token of thanks for your undying and unending support.

#### To Daisy Williams:

Your friendship and your time and your love have kept me on track and your joie de vivre has encouraged me to stay positive during a process that could have broken me. Your continued inspiration and foreshadowing of the future for me and what I am to become drives me to be the best mother, friend, sister, wife, being – than I ever thought imaginable.

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You have been an immeasurable support throughout my time here and I cannot thank you enough for all that you are to me.

Best Friends, until we hit the grave...and beyond.

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#### **Chapter I: Introduction**

It has been documented that Black women in America have a difficult time fending off feelings and experiences of isolation, feelings of invisibility, and inferiority (Abrams, 2012) and exhibit unique responses to prejudice resulting in complex emotional and psychological responses (Remedios & Snyder, 2015). Further, "Despite Black women's multiple identities, mainstream psychology overlooked critical aspects of Black womanhood in both its theoretical and empirical analyses" (Abrams, 2012). Black, Spence, and Omari (2004) highlighted W.E.B. DuBois's thoughts about blacks being judged by "another culture's measuring stick—and coming out on the short end" (p. 40). Simply put, the defining factors of the "Black experience" are commonly diminished by the narrow lenses of other groups, and the limited means that they offer to explain an untenable set of circumstances. Thomas (2004) cited that most literature either exclusively considered gender or race as factors when addressing the Black woman's experience (p. 287). As I will explore further in the review of literature, the Black woman's struggle cannot be adequately defined by just what is observable or even disclosed, rather, it requires "a perpetual process of strategic elaboration" (Foucault, 1980) with the recognition that both gender and race have aided in the silencing, misinterpretation, and invalidation of the Black woman's voice.

To understand the complexity of the experiences of Black women in academia, it has been acknowledged that an interdisciplinary and catholic approach should be used to piecemeal experiences and circumstances that are not otherwise succinctly addressed in any one piece of literature (Thomas, 2004). She stated, "As a result of Black women's place in American society, this population has a unique perspective on womanhood, Blackness, and even personhood unknown to any other oppressed groups, including Black men, White women, and other non-

Black women" (Thomas, 2004, p. 287). Higgenbotham (1992) recognized that many feminist theories initially highlighted "...the conceptual implications of binary oppositions such as male versus female or equality versus difference—all issues defined with relevance to gender and with potential for intellectual and social transformations" (p. 251). Further, Higgenbotham (1992) acknowledged that theories surrounding women's rights failed to address race as a concept that penetrates the fiber of the experience of being a woman, and more notably, an African-American woman. Rather, she denoted that the experience of "womanhood" was conceptualized by white feminists as a homogenous experience and described their perfunctory recognition of race as "lip service" while continuing to further their analysis of their own experiences (Higgenbotham, 1992, p. 251).

As far as career development and the advancement of Black women into various fields, Hackett and Byars (1996) recognized how the powers of race, ethnicity, and sexism affect this group's ability to progress and what other influences (i.e., historical, cultural, social) affect performance. They highlighted the problem of a non-existent model of the career development of racial and ethnic minorities, and more specifically ethnic minority women (p. 322). Utilizing a conceptual analysis with Bandura's (1986) Social Cognitive Theory, the study explores self-efficacy and the intersection of gender and ethnic influences on functioning in one's career. They stated, "Despite the problems and gaps in the literature regarding ethnicity and career self-efficacy, the extant research does indicate that career and self-efficacy significantly predict the academic and career choice of people of color (e.g., Bores-Rangel, Church, Szendre, & Reeves, 1990; Church, Teresa, Rosebrook, & Szendre, 1992; Hackett, Betz, Casa, & Rocha-Singh, 1992; Lauver & Jones, 1991; Noble, Hackett, & Chen, 1992; Post-Kammer & Smith, 1956; Williams & Leonard, 1988", (p. 323). The researchers conclusively believed that not only self-interest, but

previous successes, values, beliefs, and experiences with certain careers help determine one's level of self-efficacy in the field.

Of interest is the Black woman's participation in the field of psychology. Piggybacking on the insight provided by Hackett & Byars (1996), the interest in this setting would not be as elusive to this group due to negative, historically documented experiences with this field. Thomas (2004) acknowledged the difficulties that Black women in America have had to face as a sociopolitical group, as feebly defined by psychology. Thomas (2004) asserts that understanding the complexities of the Black woman's experience cannot be defined adequately by race or gender (p. 287). Rather, certain aspects can be compared to Black men, and others to white women. To date, there is limited research that has been done that has focused on the experiences of Black women becoming psychologists in predominantly white educational settings. There has been, however, a documented increase in the number of blacks entering the field of psychology and obtaining doctoral degrees in the field, while the number of individuals overall in the field has been declining (APA, 2004). This project aims to highlight and deconstruct the socioemotional, educational, experiences of Black ("African American") women matriculating through doctoral programs in clinical psychology. As this particular group is increasingly entering the educational system at numbers far above what is expected, systemic barriers that have deterred this group's success in mainstream education are becoming evident.

Many studies have acknowledged the difficulties that Black students face at predominantly white institutions (PWIs), not only from underrepresentation, but the perception and experiences of racial environments which can trigger feelings of depression, anxiety, alienation, and other problems with mental health (Lawson, 2013; Pillay, 2005). Additionally, studies have highlighted that the first couple of years of a graduate program for Black students is

a crucial time in whether or not they remain in the program or leave prematurely (see Bethea, 2005; Tinto, 1993). To date, there is a scant amount of literature recognizing the experiences of Black women entering and completing doctoral programs in clinical psychology. Even in a closely-related sub-field of counseling psychology, Bhat, Pillay, and Hudson (2012) revealed that there are no studies specific to the focus of African-Americas in counselor education (p. 2). They reported that only two pieces of literature addressed doctoral students in general education counseling (p. 2; see also Hughes & Kleist, 2005; Protivnak & Foss, 2009). Similarly, there are no known studies delving into the experiences of Black women in clinical psychology doctoral programs.

#### **Purpose of the Study**

The purpose of this study is to examine the socioemotional, educational, and psychological experiences of Black women matriculating through doctoral programs in clinical psychology at different stages of the process. This research aims to explore the unique experiences of Black women obtaining their doctoral degrees in psychology, as they contend with the variables of race and gender, outside of limited social resources at predominantly white institutions (PWIs). Specifically, because of the unique ties that Black women have to the medical and mental health communities (i.e., it is crucial to understand how their own experiences are shaped by their circumstances as Black women). Because of documented experiences of racism and racial microaggressions in educational settings, Black women often are misrepresented or minimized as less intelligent and less capable than their white counterparts. This study assumes that black women would face far greater challenges, negative experiences, and the need to create safe spaces at these PWIs due to lack of social resources than their white counterparts. In contrast to their place in the hierarchy in Black society as the head of the Black

family, which fundamentally differs from the nuclear white family, the economical disadvantages and social discrepancies can be seen when black woman matriculates through one of the highest educational degrees one can pursue in one of the most controversial fields for this group (Ricketts, 2007). This research aims to serve as a means for other Black women who may be interested in diving into a field where they were traditionally not wanted or welcomed and make informed decisions about the turbulence that may ensue.

#### **Personal Relationship to the Topic**

As a self-identified Black scholar, woman, and doctoral student in the field of clinical psychology, my experiences have been both limited and enlightened by my attendance in PWIs for graduate studies. While I have a master's degree in Clinical Psychology from a PWI, I have found that my relationship with psychology has evolved into a greater understanding of the divergence of racial groups in mental health care. Additionally, I have witnessed, experienced, and am currently living through what I find to be a unique iteration of being a Black female in this field.

More so, I have come to find that the numbers are pretty representative of who is enrolled in programs in clinical psychology. To date, I represent one-third of the Black population in my current doctoral program across all cohorts. There is limited communication between me and the other Black students, as well as with the other students of color due to where we all are in the process. This research is not only of personal interest to me but poses several questions and concerns regarding the field's reported desire to embrace more ethnic minorities.

My experience in higher education, and particularly in a doctoral program in clinical psychology, has afforded me the opportunity to access privileged knowledge and connections with some of the top experts in the field while also underscoring the challenges in the mental

health model's subscription to expanding one-size-fits-all models of therapeutic intervention and assessment. While cultural sensitivity and acknowledgement of the disparities between individuals of color and the dominant culture are evidently accepted, very little has been done—outside of unctuous engagement and ineffectual conversations about the need to be more culturally inclusive.

Indeed, while there has been a gender shift in the field with woman being dominant, there are still low and at times negligible numbers of ethnic minorities in the field. As will be mentioned later in this text, the support systems for Black women attending PWIs are either superficial or non-existent at times rendering a harrowing, uneasy series of experiences. The lack of Black support, and support for ethnic minorities in general for doctoral students attending these institutions presents either the stance that these groups are undervalued or misunderstood.

#### **Chapter II: Literature Review**

African-American women have been victimized by race, gender, and class oppression. But portraying Black women solely as passive, unfortunate recipients of racial and sexual abuse stifles notions that Black women can actively work to change our circumstances and bring about changes in our lives. Similarly, presenting African-American women solely as heroic figures who easily engage in resisting oppression on all fronts minimizes the very real costs of oppression and can foster the perception that Black women need to help because we can't take it.

—Patricia Hill Collins in *Black Feminist Thought*, 1990

#### Who Are You calling BLACK?!—The Formation of Black Identity in America

Higgenbotham (1992) highlighted the importance of understanding race as the reflection of power in a society, and as a means to identify those shifts in power. Namely, "Race came to life primarily as the signifier of the master/slave relation and thus emerged superimposed upon class and property relations" (pp. 256–257). The socially constructed impression of race in America is most easily identifiable in publications addressing slavery and segregation. For example, the notable familial instability for blacks resulting in more frequently mother-centered households is correlated with slavery and racial oppression and dismantling the bonds between women, men, and children (Ricketts, 2007). Ricketts (2007) further suggests that blacks' inability to cope with separation from family members, exoneration from slavery and flight to the North, and the uprooting of the traditional family system yielded disorganization, "resulting in spiraling rates of crime, juvenile delinquency, and so on" (p. 32). I mention this not to suggest that the actions of blacks are only the result of such oppression and the destruction of the Black family structure, but rather offer that there is an inextricably undeniable reality and set of characteristics that embody the "Black experience" that is often ignored, under-addressed, or overgeneralized in traditional literature that has transcended generations.

To set the stage to understand the experience of Blacks in America, and their struggles to identify as accepted members of an unaccepting society, one must turn their attention to a case

that highlights the very essence of what it meant to be Black in this country. Hudgins v. Wright (i.e., 11 Va. 1 Hen. & Mun., 134, 806), showcased one of many battles that blacks had to engage in to claim freedom—a concept often taken for granted by the majority. In this case, several mixed slaves petitioned for their freedom in a racially hostile Virginian society, regardless of the high level of education that its members had. The argument, as it had been presented by Hudgins, was that these slaves were entitled their freedom because of their lineage—i.e., being direct descendants of a free Indian woman. The case provided a rather empirical definition of race, where physically observable characteristics like having a "flat nose" or "woolly head of hair" describe individuals of African descent (Haney & Lopez, 1994). Lopez (1994) recounts that a Black individual's slave status followed the maternal line, stating, "A person born to a slave woman was a slave, and a person born to a free woman was free" (p. 1). The grandmother, mother, and daughter could not prove that they had descended from a free woman, and their complexions did not meet the stereotypical descriptions of blacks in the 1800s, the court (i.e., Judge Tucker) had to assign a race to these individuals. Because one of the long, straight hair of one of these women, they were declared free and their fates were decided by outward complexion.

Lopez (1994) emphasized that the notion of race in America has not shifted much since then. It is still a pervasive socially constructed mechanism by which the fate of many individuals, commonly oppressed, is decided and permeates many layers of the fabric of societal functioning. Further, he indicates that society perpetuates the stereotype of what is considered "Black" in American society, as well as how individuals should be treated based on outward appearance through legal and social avenues. He stated:

By embalming in the form of legal presumptions and evidentiary burdens the prejudices

society attached to vestiges of African ancestry, *Hudgins* demonstrates that the law serves not only to reflect but to solidify social prejudice, making law a prime instrument in the construction and reinforcement of racial subordination. (Lopez, 1994, p. 3)

Lopez (1994) also calls attention to the quandary that encompasses race, which is still relevant at the present time: while there is an abundance of literature addressing the legal discourse of race, many still have trouble accurately defining it. For the purposes of this research, I will subscribe to Lopez's (1994) definition of race, which is "...a vast group of people loosely bound together by historically contingent, socially significant elements of their morphology and/or ancestry" (p. 193). While it is not an exhaustive definition, it does encompass the contemporary, basic tenets of race that are of particular interest to this study with the understanding that race has historically (and in many ways currently) subscribes to what is observable. He further goes on to recognize the commonly talked-about binary social groups (i.e., Black and white) and acknowledges them as such, while emphasizing that they are not "generically distinct branches of humankind" (p. 193). So then, as it relates to my topic of interest, race is considered an overarching umbrella of tenets that comprise the human experience, rather than something that is solely made to differentiate individuals within a certain group. However, to speak about the unique experiences of Black woman, and more particularly Black women in doctoral programs in psychology is to highlight how race has been employed to a division not only between them and their white counterparts, but those of opposite gender within the same racial group (i.e., Black men). Higgenbotham's (1992) explication of race takes on three "interrelated strategies" of analysis. Inciting the works and thoughts of Foucault (1980), she stated, "First of all, we must define the construction and "technologies" of race as well as those of gender and sexuality. Second, we must expose the role of race as a metalanguage by

calling attention to its powerful, all-encompassing effect on the construction and representation of other social and power relations, namely, gender, class, and sexuality. Third, we must recognize race as providing sites of dialogic exchange and contestation, since race has constituted a discursive tool for both oppression and liberation" (Higgenbotham, 1992, p. 252). For a more comprehensive definition of race, attention must be given to the volatility of the construct—as the meaning of the term shifts according to political and social circumstances, as well as the fusion of thought between "Black intellectuals, white feminist scholars, and other theorists such as white male philosophers and linguists" (Higgenbotham, 1992, p. 253). Indeed, to understand the "Black experience" and define race according to the Black individual is to delve into "overlapping discourses", which are unstable and not easily interpretable (p. 255).

The term "Black" also carried with it a burden for individuals depending on their shade and appearance. In Hall's (1995) dissemination about the culture of blacks and responses to oppression and prejudice, he highlighted some of the actions taken by blacks to be accepted into mainstream culture. He spoke about "bleaching"—the whitening of one's skin to assimilate more physically with the dominant culture. Because of the belief that whites were superior to blacks, a sense of internalized oppression was fostered throughout the Black community that carried through to current generations from slavery (Byrd & Tharps, 2002; Russell, Wilson, & Hall, 1992). According to Eyerman (2002), the white notion that blacks were less than human and did not deserve human rights and protections fostered a sense of identity shift in the Black community; blacks were mentally coerced into believing that being white was certainly better than being Black. To stimulate further tension within the Black community, blacks with lighter skin tones were afforded different privileges than their darker-skinned counterparts. Pinkney (2014) states: "Generally slaves with lighter skin, due to being descendants of other races, were

allotted coveted indoor assignments while dark-skinned slaved typically performed physically grueling work in the fields" (p. 1). Thus, discrimination between blacks was born and perpetuated to current times. "Times during and after slavery, light–skinned people were taught to believe they were better than their darker counterparts and vice-versa" (Pinkney, 2014). Additionally, features outside of the lightness/darkness of skin tone were considered in the valuation of blacks: "nappy hair" was unwanted and ugly, while silky, smooth hair was desired (Byrd & Tharps, 2002). This stymied connections between darker and lighter Blacks and created a politically-derived set of identities for this community. Eurocentrism set the standard for beauty in the Black female community, setting many at an immediate disadvantage for what they could not easily control. Hall's (1995) review of bleaching highlighted more than Black preparations of beauty creams and tinctures to lighten one's skin tone, but also the manifestation of attempting to live up to standard of aesthetics that was promulgated from the power differential between whites and blacks.

Hall (1995) notes, "The bleaching syndrome is germane to American assimilation and its obsession with skin color" (p. 175). Not only was the change in skin color a means to live up to the standard of beauty, but assimilation was a tactic for mental and psychological survival.

Though, Hall (1995) suggested that while light skin was seen as ideal, a conundrum was created for blacks because "that internalization resulted in psychic conflict because skin color if immediately and undeniably verifiable on sight" (p. 176). What was viewed as attractive was unattainable except by superficial means, and both directly and inadvertently initiated and perpetuated a sense of self-hatred and feelings of being inadequate.

Other non-aesthetic responses to oppression and racism are documented by Clance and Imes (1978) and Cokely, McClain, Enciso, and Martinez (2013) regarding the "Imposter

Syndrome." Regarding academic success, Clance and Imes (1978) describe this as an "internal experience of intellectual phonies," where individuals persistently believe that "they are really not bright and have fooled anyone who thinks otherwise" (p. 1). Despite their high level of education, accolades from colleagues and other scholars, and superior levels of functioning, these individuals do not have confidence in their skills and abilities and are of the belief that their underlying identity as an "imposter" will be found out and that favorable outcomes are often due to luck rather than intellect and ability (Parkman, 2016). While this syndrome can affect individuals across races and ethnic backgrounds, several studies have found that it disproportionately affects women of color (Austin, Clarke, Ross, & Tyler, 2009; Cokely, McClain, Enciso, & Martinez, 2013; Laursen, 2008).

As it pertains to doctoral education, yet and still more challenges have accompanied Black women's attainment. At the 2014 American College Personnel Association's "Reinvent" conference sponsored by the ACPA Standing Committee for Women, several factors were considered in what affects Black women's abilities to attain doctoral degrees in general. In their presentation entitled "Black Female Doctoral Students: Overcoming Challenges that Inhibit Degree Attainment", Drs. Cheryl D. White, Tonisha, B. Lane, Stacey N. Jackson, and Setina M. Jones set the agenda to highlight the barriers to doctoral degree attainment and to help cultivate networks for Black women who are aspiring to obtain their degrees. They cited that according to Jones, Wilder, and Osborne-Lampkin (2013), Black women are attaining doctoral degrees at the highest levels in recorded history (i.e., 2.1% in 1989 for full-time faculty, and 4% in 2009 for full-time faculty) (i.e., documented statistics as of Fall 2009). Black women also apparently have the largest faculty presence of women of color (i.e., 8.6%). Further, they have been outpacing Black men, parallel to the aforementioned college statistics for this group (i.e., 57%, 2009).

There was also a 6% increase of Black women doctoral recipients between 1997 and 2007 (i.e., 60 to 66%).

#### Is it Synonymous? Being Black Versus Being African-American in the United States

In the words of Tracie Reddick (1998), "A shared complexion does not guarantee racial solidarity." In the whilom text above, complexion has also been utilized as a means to obfuscate this group. It is important to point out the main differences between African-Americans and Blacks, as it pertains to this specific research. Anecdotal accounts of this phenomenon were shared by Reddick (1998) as business owners and individuals from Africa. Reddick (1998) shared the narrative of Anthony Eromosele Oigbokie, a Nigerian business owner who came to America in 1960 and experience of American racism. He stated, "Just because African-Americans wear kente clothe does not mean they embrace everything that is African," and "I caught a lot of hell from the frat boys," as he remembered his experiences at Tuskegee University, a historically Black college/university (HBCU) in Alabama. Further, he spoke candidly in this article about how Black Americans were quick to question his intelligence, disallow his use of the word "Black" when describing those in the United States, and highlighted the illusion that shared complexity equated to friendship. Kofi Glover, a Ghana native and political science professor at the University of South Florida acknowledged distinctive cultural histories between Africans and African-Americans (Reddick, 1998). Allen (2001) documented that Black women experience isolation, alienation, and perceptions of intellectual inferiority. Collins (2000) further denoted that Black women are treated like outsiders due to their statuses operating in predominantly white environments. What follows is a bracketed experience.

As a Black woman, I have often found that not only has my place in society has been dictated for me, but also the boxes in which I should choose to self-identify. While there is an

outward commonality in some of the behaviors, features, mannerisms, and nuances of those in the black community, there are distinct differences that I believe are necessary to note from personal experience that make distinguishable differences between who is "Black" versus who is African-American in the United States. The agenda to separate people of color seems less pronounced by the common eye when groups are lumped together by aesthetic features, but in my experience can serve as a means to further push groups apart.

#### Gender Politics and the Identity of the Black Woman

A noted problem with performance and feelings of equality in the classroom stems from the family make-up of the Black family. When looking at the advantages and disadvantages of being a Black woman in higher education, Ricketts (2007) noted the observable differences in African-American families versus their white counterparts. "The growth of Black female-headed families is a matter of grave concern because these families tend to be poorer than other families..." (p. 32). This can have impacts on the educational experience for Black women and their ability to cope and integrate into higher education. Ricketts (2007) highlighted that a common understanding of the increase of Black female-headed households stemmed from family instability due to slavery, and experiences of racial oppression and internalized prejudice. "Even before and especially since the earlier writings of Frazier, the sociological writings on the Black family were heavily laced with references to the destructive legacy of slavery, the missing male, and the matrifocal character of Black family life" (Furstenberg, Hershberg, & Modell, 1975, p. 213).

However, Ricketts (2007) contended that the reason for such disparities in the Black community regarding the number of female-headed households was actually a result conditions for the American families in the 1950s, with blacks becoming more urbanized. He cited that after

1970, White de-urbanized, with Blacks moving into cities "en masse" (p. 34). The volatility of the job market, "economic dislocation experienced by lower-class Black men...", high rates of incarceration for Black men, and premature death all contributed to the decisions that Black women (and women in general) had to make in terms of the family structure.

Internalized racism and oppression have been noted to contribute to the lack of blacks in general in several fields, as well as performance. The Black identity has been challenged and is not neatly placed into a box that can be unraveled peacefully or easily. Internalized oppression and racism stem from the notion that whites are superior to Black, dating from the time of slavery in the United States. Mistreatment of Blacks time and time again along with the historical and societal as contributed to the overall symptoms of depression and anxiety, as well as "infringement upon the female personhood" and the penetration of the Black woman's identity in society (Higgenbotham, 1992).

### **Crenshaw's Intersectionality Thoughts**

The literature has underscored some of the concerns with attempting to unravel the experiences and identities of Black women as they navigate through turbulent waters. Crenshaw (1989) asserted, "Because the intersectional experience is greater than the sum of racism and sexism, any analysis that does not take intersectionality into account cannot sufficiently address the particular manner in which Black women are subordinated" (p. 140). When examining the experiences of Black women, it is important to reiterate the importance of the intersection between race and gender and how it presents as a unique experience in human existence (Robinson, 2005). Crenshaw (1989) highlighted the still relevant concept that race and gender are still variables that are not addressed directly and the Black woman's experiences have been obfuscated and sundered into dichotomous categories. She asserted, "With Black women as the

starting point, it becomes more apparent how dominant conceptions of discrimination condition us to think about subordination as disadvantage occurring along a single categorical axis" (p. 140).

Crenshaw (1989) shed some light on the interplay between discrimination claims by Black women and their lived experiences in attempts to seek relief for their grievances. Crenshaw (1989) coined the term "intersectionality" to underscore the experiences of Black women in society as a parallel, and discrete trajectory from the mainstream. Citing Title VIII cases from the Civil Rights Act of 1964 pertaining to employer anti-discriminatory laws, she presented court rulings from concerned Black women in their professions. For example, she talked about *DeGraffenreid v. General Motors* (1976), in which a Black woman "brought suit against General Motors, alleging that the employer's seniority system perpetuated the effects of past discrimination against Black women" (p. 139). The court ruled against the plaintiff, asserting that they "...failed to cite any decisions which have stated that Black women are a special class to be protected from discrimination" (Crenshaw, 1989, p. 141).

The court stipulated that the women were "clearly entitled" to a remedy if, in fact, they were discriminated against. However, they declared that there could not be a remedy for a combination of sex and racial discrimination—only one or the other because the drafters of the statutes did not intend for this. Crenshaw (1989) stated, "Discrimination against a white female is thus the standard sex discrimination claim; claims that diverge from this standard appear to present some sort of hybrid claim. More significantly, because Black females" claims are seen as hybrid, they sometimes cannot represent those who may have "pure" claims of sex discrimination" (p. 139). While there was pushback from the plaintiffs indicating that the lack of consider the intersectional play between race and gender in their claim the court reasoned the

following: "The legislative history surrounding Title VII does not indicate that the goal of the statue was to create a new classification of 'Black women' who would have greater standing than, for example, a Black male. The prospect of the creation of new classes of protected minorities, governed only by the mathematical principles of permutation and combination, clearly raises the prospect of opening the hackneyed Pandora's box" (p. 142).

In the other cases mentioned, Crenshaw (1989) highlighted the court's preferential lenses for seeing each plaintiff's experiences from the guise of a single axis—either race or gender. For example, in *Moore v. Hughes Helicopter, Inc.* (1983), "The court's preferred articulation of "against females" is not necessarily more inclusive—it just appears to be so because the racial contours of the claim are not specified" (p. 144). Crenshaw (1989) offered that the identity of Black women becomes obscured when members of the dominant group (i.e., whites) adhere to the notion that relegates Black female identity and "...that it frequently conflates or ignores intra group differences" (Crenshaw, 1991, p. 1241). Crenshaw (1989) denoted,

This focus on the most privileged group members marginalized those who are multiply-burdened and obscures claims that cannot be understood as resulting from discrete sources of discrimination. I suggest further that this focus on otherwise-privileged group members creates a distorted analysis of racism and sexism because the operative conceptions of race and sex become grounded in experiences that actually represent only a subset of a much more complex phenomenon. (p. 140)

Further complicating the interconnection between race and gender is class. Crenshaw (1991) highlighted that these three variables linked together "...constitute the primary structural elements" of Black women and women of color (p. 1243). Not surprisingly, she also mentioned that the common correlation between these variables for Black women and women of color is

with poverty. When attempting to understand how these variables might relate to Black women's experiences in doctoral programs, the variable of class (i.e., socioeconomic status) becomes challenging to grapple with. For example, a study released through the Equality of Opportunity Project used data from people born between 1978 and 1983 looking at economic and educational outcomes for Blacks and Whites. The data showed that black-white gap in income is driven by male differences and not females. Black men were shown to earn "substantially less than white men", but the same was not true for Black females and their White counterparts (Chetty, Hendren, Jones, & Porter, 2018). According to the study, Black women actually earn 1% more than white women "conditional on parent income" (p. 4). Also, the study trumped the idea that Black women were making comparable income to white women because they worked longer hours to compensate. However, it is noted that Black women still have lower family incomes because lower marital rates and spousal incomes (Chetty, Hendren, Jones, & Porter, 2018).

Other notable mentions from this study concluded that Black women also "have higher college attendance rates than white *men*, conditional on parent income" (p. 4). Also, "The fact that Black women have incomes and wage rates comparable to white women conditional on parental income despite having much lower test scores suggests that tests do not accurately measure differences in ability (as relevant for earnings) by race, perhaps because of stereotype threat or racial biases in tests" (Chetty, Hendren, Jones, & Porter, 2018, p. 5; Steele & Aronson 1995; Jencks & Phillips 1998). This statement was reflected earlier in this paper when addressing some of the challenges that Black individuals in general face with educational disparities due to the quality of education they have and are receiving. Crenshaw (1991) eloquently stated, "Race and gender are two of the primary sites for the particular distribution of social resources that ends up with observable class differences" (p. 1243).

Regarding the traditional feminist agenda, Higgenbotham (1992) exclaimed that the new wave of feminists gave no more than lip service to the recognition of the distinctive affairs of Black women, "as they continue to analyze their own experience in ever more sophisticated forms" (p. 252). Rather than exploring the variable of race as an entity all in its own that contributes to the psychological stress of Black women, White feminists have constructed a definition of "womanness" that presents women as a homogenous assembly of people who struggle with executing the same agenda for equal rights. Spelman (1988) recognized that white women married their whiteness to their womanness and have traditionally concluded that "the gender identity of Black women is the same as their own" (Higgenbotham, 1992, p. 255). She stated, "In other words, the womanness underneath the Black woman's skin is a white woman's and deep down inside the Latina woman is an Anglo woman waiting to burst through" (Spelman, 1988). As for Afro-American scholars, Higgenbotham (1992) asserted that there has been more emphasis on race and cultural factors, with little recognition of how socioeconomic differences (i.e., class) and inter-race gender positions (i.e., between Black men and women) play a huge role in the complexity of defining the Black women, as there was little evidentiary and literary information to support anything but a "monolithic" Black community (p. 256). Simply put, while whites (and specifically white women) take a "big sister" approach and present womanhood as a unified experience, afro scholars present the Black experience similarly, inciting the "Voice of the Negro" and consolidating the "Black experience" between Black men and women (Higgenbotham, 1992, p. 256).

#### **Black Feminist Thought and Psychology**

During the Women's Convention in Akron, Ohio, a brave soul was so bold as to speak out against the injustices and prejudices against Black women being seen as less than their white counterparts. She stated,

Look at my arm! I have ploughed and planted and gathered into barns, and no man could head me—and ain't I am woman? I could work as much and eat as much as a man—when I could get it—and bear the lash as well! And ain't I am woman? I have born thirteen children, and seen most of 'em sold into slavery, and when I cried out with my mother's grief, none but Jesus heard me—and ain't I a woman?

(Sojourner Truth, 1851)

Crenshaw (1989) emphasized that lack of utility that traditional feminist theory had with Black women and that racial context is "seldom acknowledged" (p. 154). Further, she stated, "Not only are women of color in fact overlooked, but their exclusion is reinforced when white women speak for and as women" (Crenshaw, 1989, p. 154). She also highlighted the unique experiences of Black women in America, underscoring that they often have had to (and still have to) take on responsibilities "that are not traditionally feminine but, moreover, their assumption of these roles is sometimes interpreted within the Black community as either Black women's failure to live up to such norms or as another manifestation of racism's scourge upon the Black community" (p. 156). The aforementioned quote from women's rights activist and abolitionist Sojourner Truth encompassed the idiosyncratic happenings of slavery as a Black woman. This particular quote came in response to the notion than women, and more specifically when addressing White women, were adjudged as weaker than men. As touched on earlier, history has insinuated that the Black female is lesser than or that their experiences are synonymous and synchronous to that of all women, therefore not needing further review or special attention. So

then, out of the deficits and misunderstandings of the Black woman's experiences, the birth of the Black Feminist Movement occurred. While the literature addresses some of the challenging tenets of Black existence, it is important to mention that there are some distinct differences between Black men and women that affect their overall functioning—especially in a professional setting. Black Feminist Thought (1990) encompasses the Black woman's experiences and needs in society, as they are misrepresented and often under thought in the mainstream. The framework serves as a means to help understand and interpret the lived experiences of Black women in America (Collins, 2009). It notes that there are shared experiences between Black women as a result of their historical situations in the United States, but also acknowledges individual disparities within the group. "BFT also acknowledges the lived experience and empowers Black women to establish new definitions of self-identity. Black feminism is committed to social justice for Black women and other oppressed groups through critical discourse and action" (Patterson-Stephens et al., 2017, p. 9).

Collins (2000) highlights six major features of this theory, which all challenge the traditional feminist discourse. For one, it conceptualizes race, class, and gender as interlocking systems of oppression. It surmises that the Black woman's experience is reflective of these intersections and that a collective voice and sense of consciousness should be the foci of activism for this community. Secondly, it recognizes different in Black women's experiences from one another, rather just a collectively homogenous stance. However, those differences do not take away from the shared experiences that they have. Third, it proposes that changes in thinking will generate actionable steps to resist oppression through ongoing conversation about how to identify Black women. The fourth acknowledges Black women who are intellectuals, who value knowledge and the procurement of such that as beneficial. BFT underscores that the Black

woman's voice is crucial to the development of knowledge and delving in-depth into Black women's views in order to help develop a model for BFT. Subsequently, the fifth feature renders procurement of knowledge as an ongoing process due to social conditions being ever-changing. It is important for Black intellectuals to continue to generate pertinent knowledge based on the current, applicable social milieu. The last tenet addresses the connection to other social movements, and serves as a means to empower an oppressed group with the understanding that social change does not occur in a vacuum and that lifting up Black women will not and cannot occur in isolation but with a commitment to human solidarity incorporated (Collins, 2009).

More recently, literature is acknowledging the interplay between race and gender, as well as socioeconomic status, education, and other factors to encapsulate the Black woman's existence. Thomas (2004) highlighted the complex experiences of the minutia of the lives of Black women and how they have translated into experience outside of the normal discord. She described that the life experiences of Black women as not fitting "neatly within the traditional boundaries created within the field of psychology since its emergence as an independent intellectual and academic discipline, usually dated around 1874" (p. 286). In acknowledging the oppression and historically undervaluing of this group as non-dominant (i.e., non-white), she stated, "No other group has been victimized by hegemonic domination and located within the hierarchical power structure as Black women have been in American society" (Thomas, 2004, pp. 286–87). The cultural richness of Black women has also seemingly been stripped and streamlined into a set of stereotypes and identities that perpetuate the discourse of these individuals as inferior to their White counterparts. Further, Thomas (2004) highlighted that African-American women (as well as poor women and other women of color) have been left out mainstream psychological theory and research and that despite the subsequent call for

inclusiveness in feminist theory they have still been marginalized (Saris & Johnston-Robledo, 2000). To date, Black women and women of color are scarcely mentioned and integrated into the field as communities of importance and seems to influence the current trends of treatment, identity, and employment in various arenas.

The psychology of black women is a complex matter that conceptually needs to account for the unique historical and current experiences of these women as they are uncomfortably situated in American culture and gender. It seems that the literature continues to try and encompass black women (and men) as part of a bigger, homogenous culture which strips the local identity of this group and both intentionally and unintentionally places them at a crossroads in all aspects of life. The field of psychology has yet to purposefully reflect on the sociohistorical contributions of blacks (and Black women) to its own history, as well as adequately address the need for more revisionist thinking and application. The understanding and reporting of the socioemotional inequalities unfortunately afforded to Black women has been scant and underaddressed and limited by the confines of mainstream psychological thought. While it seems that efforts are being made to break the cycle of limited understanding by Black scholars and other scholars of color, their contributions have yet to infiltrate mainstream practice and applications in more meaningful and relevant ways.

Oftentimes, Black women's behaviors are misapprehended as aggressive, mis-advertised as beings with a chip on their shoulders or with a misplaced sense of cultural pride. Ironically, history provides much literature about the preservation of white culture and white pride in America; often seen as patriotic or preservationist, while Black pride and preservation is seen as terroristic, aggressive, and unpatriotic (e.g., The Black Lives Matters movement, Black Panthers). This presents as an inherent problem to the interpretation of Black culture and more

specifically, the Black woman, as her actions and decisions are questionable and countercultural, at best. In their study on the "Imposter Syndrome," Clance and Imes (1978) utilized a sample of 150 Black women, "who have earned PhDs in various specialties, who are respected professionals in their fields, or who are students recognized for their academic excellence", these women did not feel an "internal sense of success" (p. 1). Mead (1958) noted that a successful or independent woman "is viewed as a hostile and destructive force within society." Black feminists view this aggression is often also seen as a coping mechanism for Black women who have dealt with a series of life stressors that affect the very essences of their being. However, the truth behind the face is often mistaken for a Black woman's learning how to navigate the environment and that she has gotten over being a victim to her experiences. Simply put, "usually, when people talk about the 'strength' of Black women they are referring to the way in which they perceive Black women coping with oppression. They ignore the reality to be strong in the face of oppression is not the same as overcoming oppression, that endurance is not to be confused with transformation" (hooks, 1981, p. 6).

Carlin's (2014) study on the psychology of Black women and feminine identity highlighted the extant research regarding the heightened number of psychological disorders related to being a double minority (p. 13). She recognized that the anxiety that Black women experience is a result of "the lineage of historical abuse" and is evident, given their current psychological state (p. 13). She cited a study by Crowther and Neal-Barnette (2000) in which the they concluded that "African American women with panic disorder experienced isolated sleep paralysis, and that both groups had high levels of sexual victimization" (p. 129). In their study, they recruited n=50 Black, middle class women—some with panic disorders and some without. The participants underwent medical screenings and were assessed in the following areas:

"presence of isolated sleep paralysis, presence of other anxiety disorders, help-seeking behavior, and victimization" (Carlin, 2014, p. 14). They also concluded that the middle-class Black women thought that it was unnecessary for them to seek clinical help even with the knowledge that it may perpetuate their health problems and may be due to mistrust of the medical and mental health communities.

Anderson (1991) organized a series of stressors into three categories that affect blacks' functioning. The first level consisted of stressors embedded in the immediate environment and living circumstances that are race, gender, and socioeconomic related that are also essential to one's wellbeing (Carlin, 2014, p. 14). The second level consisted of isolated, life impacting events that bring about serious lifestyle changes, and the third were subtle issues/discomforts that are present in daily life (Carlin, 2014, p. 14). Anderson (1991) further denoted that Black women usually experience some difficulty in effectively managing their stress because of higher exposure to race-based stressors and negative feedback (p. 694). In addition to this, as previously mentioned, the negative experiences of Black women are often ranked into (usually) one of two categories that do not fully explain or account for the transgenerational and racial aspects of socialization. As hooks (1981) stated, "No other group in America has so had their identity socialized out of existence as have Black women. We are rarely recognized as a group separate and distinct of Black men, or as a present part of the large group 'women' in this culture. When Black people are talked about, sexism militates against acknowledgement of the interest of Black women; when women are talked about racism militates against a recognition of Black female interests. When Black people are talked about the focus tends to be on *Black* men; and when women are talked about the focus tends to be on white women" (p. 7).

#### Blacks in a White Environment: Doctoral Experiences at Predominantly White Institutions

In her dissertation, Baskerville (2016) highlighted some of the unique experiences of Black women pursuing doctoral degrees in liberal studies at PWIs. Her study aimed to identify these women's perceptions of their experience to showcase what they face in higher education. On top of the aforementioned variables relating to lack of mentorship, minority faculty, minority colleagues, and resources for Black students, Baskerville (2016) focused in on how the presented material in early childhood education, elementary, and middle school education (as well as high school) does not foster preparation for Black women to engage in educational pursuits with a coat of protections against the projected microaggressions and racial stigmas they will face (p. 1). While there may be introspective tendencies of this particular group to deal with the dissonance in predominantly white environments, the solutions that are often utilized may or may not mitigate the discomfort of the circumstances and may further ostracize Black women from a rewarding experience in post-secondary education. In terms of clinical psychology which is historically anchored by white males, it begs the question as to why Black women would want to pursue a career obtaining one of the highest degrees offered in a field where there has been a documented cultural mistrust and lack of repair by the medical community as it relates to this particular area.

While it would seem that most doctoral programs in clinical psychology are now fortified with a cultural/diversity component, the very practice of admissions and screening for eligibility, it does not seem conducive for the psychological success of Black women. Yet and still, there is still a seeming interest in completing doctoral studies in clinical psychology by Black women in this country for a myriad of reasons. Baskerville (2016) stated,

When attending a PWI, it is possible for African-American women to feel disconnected from their White counterparts and instructors, a finding also suggested by Feagin (1992).

When attending a PWI, some African American women may switch institutions in order to find colleagues with whom to feel connected. When feeling disconnected, students may form their own study groups. Some may experience the need to voice to their peers and instructors, their concerns about feeling disconnected, as well as complain about the material presented. In contrast, others may feel detached, due to participating in an online program and not having face-to-face contact. (p. 179)

## Admissions, Recruitment, and Retention in Doctoral Programs for Black Women

Joseph (2012) looked into the first two years of graduate programs for Black women, and crucial variables to success for this particular group. The first two years of an individual's graduate program is regarded as an important period for students as they transition into a different way of life (i.e., coming from HBCUs). Her study unraveled the importance of matching students with mentors and faculty members that are relatable and trustworthy to engage with during the daunting process, especially after leaving a much-supported racial and ethnic environment (i.e., HBCU) and trying to integrate into a PWI. A commitment to their discipline within STEM as well as other factors were paramount in retention.

Patterson-Stephens, Lane, and Vital (2017) also looked into the experiences of Black women in doctoral graduate programs and the barriers and facilitators of success. Their study focused on the importance of socialization during the doctoral experience, barriers to success, and what contributed to success during graduate studies. According to the Survey of Earned Doctorates Fact Sheet (2008), Black women showed a 6% increase in earning doctoral degrees (i.e., from 60 to 66%). Patterson et al. (2017) mention that this increase has occurred despite challenges with financing education, obtaining respect from faculty and peers, problems with networking and gaining departmental recognition, and having adequate mentoring during their

graduate career (p. 1; and Baumgartner & Johnson-Bailey, 2010; Johnson-Bailey, 2004; Patton, 2009). Despite the APA's claim that recruitment of persons of color takes priority in graduate admissions, and doctoral programs touting their desire to diversify student graduate populations, there is little empirical research to highlight contributors to success and failure for such groups, and most specifically with Black women in U.S. doctoral programs (Patterson-Stephens et al., 2017). What is known is that Black women encounter challenges throughout their graduate process that can invoke a need to self-preserve through employing a variety of coping mechanisms as a means to deal with gendered and racial oppression (Patterson-Stephens et al., 2017, p. 1). Additionally, Maton, Wimms, Grant, Rogers, & Vasquez (2011) highlighted the need across minority groups for mentoring to increase satisfaction during their graduate school experiences.

While the recruiting of ethnic minorities has been a verbal priority among institutions like the APA and other academic institutions, little has been revealed about admissions decisions and what is necessary above and beyond surface criteria (Karanxha, Agosto, & Bellara, 2014). In their study, Karanxha et al. (2014) looked into the disparities in numbers between whites and blacks in admittance to PhD programs. Their research revealed "racialized and gendered undertones with regards to perceived program fit and likelihood of career outcomes" (Patterson-Stephens et al., 2017, p. 2).

Referencing Thomas (2001), Patterson-Stephens, Lane, and Vital (2017) stated, "Other studies report that Black women balance a number of roles and responsibilities while pursuing their doctoral degrees such as taking care of family members and working full-time while in school" (p. 2). It has been noted that Black women have had to historically take care of the home at her own personal expense—without much choice, during times of slavery and segregation,

which has seemingly transcended into current times for different, yet valid reasons. Regarding educational pursuits, Patterson-Stephens, Lane, and Vital (2017) emphasized the research of Baumgartner and Johnson-Bailey, 2010; Johnson-Bailey, 2014; and Patton, 2009, stating, "Despite these challenges, Black women have steadily increased their doctoral degree attainment" (p. 2). Likened to the lip service that feminism has given to the unique nature of the Black woman's experience despite the increasing focus on the experiences of Black women in doctoral programs (Baumgartner & Johnson-Bailey, 2010; Dortch, 2016; Grant & Simmons, 2008; Patton, 2009), little has been done to investigate "elements that influence their persistence, retention, and degree attainment" (Patterson-Stephens, Lane, & Vital 2017, p. 2).

When addressing admission statistics to clinical psychology programs, Norcross (2000) highlighted that the acceptance rates are comparable to those for counseling psychology doctoral programs despite the fact that there are significantly more programs in clinical psychology. However, when qualitatively examining the data, more ethnic minorities are admitted to counseling psychology programs than clinical programs (Norcross, 2000).

According to the APA Commission on Ethnic Minority Recruitment, these percentages have been shown to reflect the growth of these groups in the field. Some highlights about ethnic minority recruitment and participation is highlighted below:

- Ethnic minority students are increasingly priming the APA student membership pipeline. Between 1998 and 2003, total student affiliate membership declined by 15.9%, whereas minority student affiliate membership increased by 28.7%.
- From 1997 to 2004, 20.3% of the increase in APA's membership was attributable to ethnic minorities.

- Between 1997 and 2004, there was a 41.2% increase in ethnic minority participation in APA governance.
- Since 1997, ethnic minority representation has increased at all levels of psychology's education pipeline, but it continued to be constricted at higher levels of the pipeline.
- Between 1996 and 2006, the representation of ethnic minority recipients of bachelor's degrees in psychology increased by 36%.
- Between 1996 and 2004, the number of ethnic minority recipients of master's degrees in psychology increased by 90.8%; in 2004, 27.2% of such degrees were awarded to ethnic minorities.
- Between 1996 and 2004, the number of ethnic minority doctoral recipients
  Increased by only 16.6%; in 2004, ethnic minorities received 20.1% of EdD and
  PhD degrees in psychology; in 2003, ethnic minorities constituted 19.9% of the
  new enrollees in PsyD programs. (APA Commission on Ethnic Minority
  Recruitment Retention and Training, 2005, p. XX).

In terms of Black women and psychology, Thomas (2004) presented a snapshot from the U.S. Department of Education regarding scant numbers of graduates that matriculated through higher education within a 24-year period. While larger numbers of Black women have graduated from 4-year institutions, an almost inconsequential population is reflected in doctoral studies in the field. Between 1976 and 2001, Black women an increase of 4,114 Black women earned bachelors in psychology (i.e., from 2,124 to 6,238), an increase from 300 to 1,450 Black women earned master's degrees in psychology, and an increase from 53 to 188 Black women obtained

doctorates in psychology. This highlighted a small, yet steady increase of Black women getting their doctorates in this field by a little over two percent.

The National Science Foundation (2009a, b, c) published statistics on the overall number of graduate students obtaining degrees in higher education (i.e., master's and beyond). Many of the individuals in these programs have not graduated due to higher risks of attrition. According to the American Psychological Association, as of December 2009, "...24% of psychology PhDs were awarded to minority graduates in 2008 for those were permanent residents, and that "In 2008, Clinical psychology remained the single largest field with 35% of all PhDs granted to US citizens and permanent residents (American Psychological Association, 2010). Clinical psychology claimed 57% of the PhDs earned by American Indians, 29% earned by students of Asian background, almost 27% of the PhDs granted to Black graduates and 43% of those granted to Hispanic students" (American Psychological Association, 2010). Data also shows n= 62 Black or African-American individuals obtained doctorates in clinical psychology, versus n= 881 White individuals in 2016 (i.e., total number of recipients across races= 1,114). Comparably, n=33 Black or African-American individuals obtained doctorates in counseling psychology, versus n=178 White individuals in 2016 (i.e., total number of recipients across races= 272). The numbers yield relatively similar percentages for both groups across sub-fields, but more Black individuals are enrolled and have received doctorates in counseling versus clinical psychology (National Science Foundation, 2018).

Barker (2011) stated that "[c]linical degrees comprised 35% of those granted to White students and 31% of those granted to students reporting multiple races." Further, "Of those with doctoral degrees, Blacks comprise only 3.5% of doctoral degree holders" (Cook & Cordova, 2006)" (Barker, 2011). With the common knowledge that obtaining a doctoral degree is not a

'walk in the park', the salience of racial disparities presents a deafening picture that recruitment and retention is rather difficult for this particular population. Multiple reasons have been highlighted throughout the literature pertaining to problems with retaining students of color in graduate programs, however, only a small number of articles delve into the specificities of the doctoral world of psychology for these students.

Barker (2011) claimed that despite such low representation of blacks in higher education, they have the highest level of enrollment compared to other underrepresented minority groups (Cook & Cordova, 2006). Disturbingly, they also have the highest rates of attrition (Nettles & Miller, 2006). One of the reasons indicated by the short stack of literature involving Black doctoral psychology students highlights problems with advising and educational supports, stating that "...there is a lack of in-depth research on the cross-race advising relationship from dual perspective" (Barker, 2011, pg. 388). Ironically, "Cultural dynamics of advising are becoming more salient as graduate schools and doctoral education become more diversified and diversity is seen as an asset in the greater workforce" (Barker, 2011, pg. 388; Woodrow Wilson National Fellowship Foundation, 2005).

# **Blacks in the Psychology Profession**

The introduction of blacks into the field of psychology has not been an easy one. While graduate schools have and are talking about inclusion, the history shows a very turbulent start for these individuals. Albee (1998) stated,

"Psychology graduate-training programs had been racist and sexist for years. Few Blacks were admitted to graduate school (Albee, 1969a, 1969b). Few women were enrolled (Albee, 1981). It took the women's movement and civil rights movement to begin to correct these injustices. A psychology faculty composed largely of senior WASP (White Anglo Saxon Protestant) males, with all the narrow-minded biases of this group, was increasingly challenged by new faculty and students to be more socially conscious and activist. Life was not easy for the new arrivals". (p. 192)

Albee's (1998) perspective showed that there was much contention in the field for the individuals entering into academia for psychology, and that training to become a clinician was riddled with problems that were above and beyond the stresses of graduate school.

The National Research Council cites that in 1970, women made up just over 20 percent of individuals receiving PhDs/doctorates in psychology. Later, in 2005, the American Psychological Association's Center for Psychology Workforce Analysis and Research documented that "nearly 72 percent of new PhD and PsyDs entering psychology were women" (Cynkar, 2007, p.46). Golding and Lippert (2016) highlighted some of the current trends relating to minorities in the field and explored some of the possible reasons for changes in status. Beginning with data from the 2010 U.S. Census, population demographics consist of 72% Whites, 13% African Americans, and 16% Hispanics—relative to 2000 Census statistics for each group, with 75%, 12% and 12.5% respectively (p. 1). The focus of their article was to bring light to the percentages within this specific groups that were obtaining degrees (i.e., undergraduate and graduate) in psychology. They also cited that between 2000 and 2011, there was a decline in the percentage of Whites obtaining undergraduate degrees in psychology (i.e., decrease from 72% to 62%), a 2% increase for undergraduate degrees in psychology for blacks (i.e., from 10% to 12%), and a 6% decrease for Hispanics (i.e., from 18% to 12%). When zooming in on the data for graduate degrees, and more specifically doctorates in psychology, the numbers become astoundingly small. Per Golding and Lippert (2016), "The percentage of African Americans and Hispanics show that the numbers of students earning and PhD from these two minority groups has not shown increases. It seems pretty clear that African Americans and Hispanics who earn an undergraduate degree in Psychology do not continue as Psychology graduate students working towards a PhD" (p. 1). For African Americans going after doctorates in clinical psychology

between years 2000 and 2014, there has been a documented decrease over this timespan from 5% to 4%. This is interesting, as there have been documented increases in other subfields of psychology (i.e., Cognitive, Developmental, Social, Industrial/Organizational for African Americans within the same timeframe; Golding & Lippert, 2016).

Golding and Lippert (2016) offer suggestions as to why there are such negligible numbers of blacks obtaining doctorates in psychology. One reason could be the lack of role models, whether in the home, in their medical setting or clinic, or even represented in the media. Another is the appeal of other lucrative professions with less of a temporal investment, as obtaining a doctorate in psychology can be a daunting, and elongated task without the intersections of racial factors. And lastly, the historical connotations attached to this field and the psychological/mental barriers and disadvantages that minority groups have to overcome to feel welcomed and accepted. As it relates then to the introduction of Black women in the field, there seem to be other distinct characteristics of the experience that may contribute to the numbers.

In 1995, the APA released a publication recognizing that the composition of psychology was changing, and that the field's changes reflected the influx of males into other professions and interests. More so, "Federal fluctuations in social science funding tightened money for research in the 1980s, and pressure to contain health-care expenditures caused a slight decline in salaries in psychology during that time, as well" (Cynkar, 2007, p. 46). This reflected the beginning of saturation of women in the field and the need for mental health services while experiencing a reduction in pay despite education and experience, as inferred by Dr. Dorothy Cantor, PsyD, who is the chair of the task force:

Women get blamed for any decline in the autonomy, status, and earning power or a profession because what people see is women come into it, and then the profession earns

less money and is less well-regarded...What really happens is that those facets starts to decline, men leave, and women come in to fill the vacuum. (Cynkar, 2007, p. 46)

As difficult as it already is for women to contend with their male counterparts in the workplace, the influx of women in the field of psychology has presented a new challenge to women of color, and more specifically Black women in this way. A couple of decades later, Nettles (1990) recognized how underrepresented persons of color were in obtaining doctorates and how blacks receive "the fewest teaching or research assistantships" (p. 494).

Newer data from the American Psychological Association Center for Workforce Studies (2018) show that as of 2013, blacks/African-American Americans make up about 12% of the psychology workforce, with 61% of whites still comprised a majority of the field as active psychologists (p. 9). Between 2007 to 2016, the number of active Black psychologists fluctuated from n=2,401 to 4,974 with the highest numbers being active in 2009 (American Psychological Association Center for Workforce Studies, 2018, p. 22).

Black women in the United States are now recognized as the most educated group in America, despite historical trends in education and the workforce. In the field of psychology, it has been noted that women obtaining doctorates (overall) are outnumbering men one to three (American Psychological Association, 2010). Concerning the field of psychology, Senior Director of Minority Affairs Bertha G. Holliday, PhD highlighted the APA's concern for the underrepresentation of ethnic minorities in the field of psychology, and specifically highlighted a study by Wispe et al. (1969) that looked at how underrepresented blacks were in both the profession and in mainstream psychology (American Psychological Association, 2010). She stated, "The underrepresentation of persons of color and the related need for ethnic minority recruitment, retention, and training strategies have been concerns of the American Psychological

Association (APA) for nearly 50 years." APA first entered the arena of ethnic minority affairs in 1963 when the APA Board of Directors, in response to a request from the Society for the Psychological Study of Social Issues (i.e., APA Division 9), established the Ad Hoc Committee on Equality of Opportunity in Psychology (CEOP), CEOP, charged to "explore the possible problems encountered in training and employment in psychology as a consequence of race", surveyed 398 Black psychologists and found that they were underrepresented in both the profession and APA, and were alienated from mainstream U.S. psychology (Wispe et al, 1969) (American Psychological Association, 2010, p. I).

While this has been surfaced, very little research and effort has been placed into looking into what is currently working for Black individuals in this field and, more specifically, Black women. Black women in particular are starting to obtain psychology degrees at exponential rates, there does not seem to be supports or attitudes reflective of their presence and needs, as well as reception in the ways that are parallel to the dominant culture. Additionally, there does not seem to be a mirroring of the percentages of Black women in the workforce. Sesko and Biernat (2010) examined that notion that Black women were being more unnoticed than their white counterparts in the workforce. Specifically, the researchers highlighted that Black women have the special task of overcoming disadvantages of being a member of two underrepresented groups (i.e., as women and as Blacks) being largely unheard and overlooked, not propelling forward enough, and experiencing the brunt of social isolation. Robinson-Wood, Balogun-Mwangi, Boadi, Fernandes, Matsumoto, Popat-Jain, and Zhang (2015) highlight the "disproportionately low" numbers of African-American women in the workforce. Their citation of the Bureau of Labor Statistics (2013) showed that in 2010, "Black women were 2.9% of university professors; 5.8% university administrators; and 5.4% of people employed in

management, professional, and related occupations" (p. 222). Additionally, they cited that previous studies and literature (i.e., Robinson-Wood, 2009; Sue et al., 2007; Yosso, Ceja, Smith, & Solorzano, 2009) propound that Black women at PWIs in higher education and other professional experiences experience a plethora of experiences ranging from personal to environmental shifts that contribute to "feelings of isolation, loneliness, and a sense of not belonging" (p. 222). Further detail on this study is cited later in this review.

Haizlip (2012) explored the underrepresentation of African-Americans in the field despite affirmative action efforts to recruit and retain Black faculty and students into such programs. He stated, "As the nation's African-American population significantly increases relative to Whites (71% as compared to 7%, respectively; U.S. Census Bureau, 2004), it becomes even more important to build a diverse counseling and psychology faculty that more closely resembles and represents the demographics of the nation (Holcomb-McCoy & Bradley, 2003; Johnson, Bradley, Knight, & Bradshaw, 2007)" (p. 214). However, he underlined that the numbers in psychology programs are not reflective of this increase (Haizlip, 2012, p. 214). As of 2016 U.S. Census data, there are approximately over 43 million African-Americans currently living in the United States, with Further, he questioned the field's "commitment to diversity", as "...silence, and the concomitant lack of scrutiny and/or complacency that it is implies, is no longer acceptable to the academic African-American community (Young & Laible, 2000)" (p. 214). Haizlip (2012) further highlighted that seemingly futile efforts have been made by black schools for the past couple of decades to call for "proactive measures and policies designed to recruit and retain faculty of color into counseling education" (pg. 214). Simultaneously, Johnson, Bradley, and Knight (2007) underline the discrepancies between having adequate and reflective numbers of African-Americans students in the field and the number of Black professors (Haizlip, 2012, p.

215). Further, Haizlip (2012) highlights that there are far and few numbers of programs that foster black doctoral students in psychology into future professorships.

#### Reported Impacts of Matriculating through Racial Systems

Nettles (1990) discussed the characteristics of a successful graduate experience for Hispanic, Black, and white students in doctoral programs. His literature review pointed out that graduate students and graduate degree recipients "perceive their relationships with faculty and mentors to be the single most important aspect of their satisfaction and their successful completion of graduate programs" (p. 497). Torres et al. (2010) stated, "Racial microaggressions which involve ascriptions of intelligence may be particularly salient for the current sample of high-achieving individuals given that this negative event occurs in an important domain of professional functioning and academic success" (p. 1093). In the 1969 study by Wispe et al., 398 Black psychologists were surveyed and found that they were underrepresented in both the field of psychology and the American Psychological Association (APA), as well as alienated from mainstream psychology. While there seems to have been some progress since then (e.g., The initiation and progression of Division 45 of the APA: Society for the Psychological Study of Ethnic Minority Issues), the multicultural guide for education, and more complex definitions of culture and culture in practice, there still seems to be a lack of representation and involvement by blacks in the field. However, there has been a significant increase in "ethnic minority" participation in the field, but the experiences of the increase have not been reflected much in the literature. However, a growing corpus of literature has highlighted some of the unique struggles of ethnic minorities in the field citing experiences of racial microaggressions and continued feelings of marginalization (Holliday & Holmes, 2017). Additionally, it has been noted that major funding and support for ethnic minorities have been stripped from this population.

According to Guthrie (1991),

Traditional academic psychology has strongly defended and literally brain-washed its students as to what a psychologist is, what psychology is all about, its subject matter, and its direction. All of this has occurred through years of less successful attempts at solving the riddles of human behavior. As a result, traditional academic psychology has evolved into a sterile, pedestrian science, which leans heavily upon statistical analyses to the point where calculating, cold, unemotional robots who can perform mathematical manipulations have become authorities. This is especially tragic when one stops to realize that the Black life cycle, from conception to death is strongly influenced by an interplay of environmental and physical factors which create a need for a psychology of African Americans. (p. 34)

Robinson-Wood, Balogun-Mwangi, Fernandes, Popat-Jain, Boadi, Matsumoto, and Zhang (2015) highlighted racial microaggressions specific to Black women in their phenomenological approach. While diversity is being seen in higher education, Robinson–Wood et al. (2015) cited that Black women are still particularly low in numbers in the professional workforce. They stated,

Previous studies with Black college students at predominantly white institutions (PWIs) posit that many high achieving Black women, in higher education and other professional settings, experience a range of environmental and interpersonal challenges that contribute to feelings of isolation, loneliness, and a sense of not belonging... (p. 225) Further,

The racism from microaggressions that students of color are exposed to is subtle yet mirrors the racism that exists in the 21st century. As institutions of higher education

become more diverse, there are more possibilities for subtle and often unconscious racial microaggressions to occur (Harwood, Hunt, Mendenhall, & Lewis, 2012). (Robinson-Wood et al., 2015, p. 225)

Torres et al., (2010) focused on microaggressions as they are experienced by highlyachieving blacks. Using a mixed-methods approach, they first identified microaggressions reported by N=97 blacks in graduate programs, as well as how their experiences affected their mental health. Results highlighted that Black students in graduate programs experienced racerelated barriers during matriculation, such as "being treated as a criminal or a second-class citizen, having one's personal ability underestimated or ignored, and feelings of isolation" (p. 1093). According to Solorzano, Ceja, and Yosso (2000), and Sue, Capodilupo, Torino, Bucceri, Holder, and Nadal (2007), racial microaggressions are "brief and commonplace, interpersonal exchanges—intentional and unintentional—that communicate denigrating and disparaging messages to ethnic minority individuals" (Torres, Driscoll, & Burrow, 2010, p. 1076). It is recognized that these exchanges have negative impacts on the psychological well-being of blacks, more so than overt forms of prejudice and discrimination (Solorzano, Ceja, & Yosso, 2000). Kessler, Mickelson, and Williams (1999) indicated that at least 25% of blacks reported some sort of discrimination on a daily basis, as well as a 50% of blacks having "lifetime prevalence rate for reporting some major form of discrimination" (Torres et al., 2010, p. 1075). Sue et al. (2007) specified three types of racial microaggressions experienced by ethnic minorities:

*Microassaults*, which refer to "explicit, racially derogatory statements of actions intended to hurt the victim", which may or may not be violent "but are motivated by the conscious and purposeful intentions of the perpetrator" (Torres et al., 2010, p. 1076).

*Microinsults*, which "convey rudeness, insensitivity, or otherwise demean the victim's racial or cultural heritage, thought they need not be enacted explicitly" (Torres et al., 2010, p. 1076), and

*Microinvalidations*, which "exclude, negate, or minimize perceptions, thoughts, feelings, or other experiential components of targets realities" (Torres et al., 2010, p. 1076).

It is documented that any combination of such microaggressions yields negative results for the functioning of blacks across environments. As skin color was and is still an internalized factor affecting self-esteem for this group, these racial interactions also present further problems with stigmatization and developing healthy coping mechanisms. A growing body of literature has aimed to address the chronicity of these exchanges, as Torres et al. (2010) point out that many of the instruments used to assess the relationships between discrimination and mental health outcomes "used instruments that measure more direct and overt forms of discrimination, thus largely overlooking the more subtle racial microaggressions" (p. 1077).

Microaggressions—along with other experiences have been documented by researchers in efforts to highlight the supervision experiences of those doing clinical work, but little light has been shed on the classroom and other peripheral experiences of these clinicians (see Sue & Wing, 2010; Sue, Capodilupo, Torino, Bucceri, Holder, Nadal, & Esquilin, 2007). Robinson-Wood et al. (2015) looked at how microaggressions affected Black women with graduate degrees, both pursuing or having obtained a masters or doctorate. Using phenomenological methodologies to interpret semi-structured interviews, the researchers investigated the presence and nature of microaggressions, ranging from subtle to blatant, in 17 "highly educated women of African descent, ranging in age from mid-20s to late 50s" (p. 221). Five themes were developed from the exploration of this phenomenon: the Mighty Melanin Tax, The Acrid Academy,

Underrating Race, Coping as Optimal Resistance, and Armored Coping. The literature review highlights some of the psychosomatic symptoms experienced by Black women who were the victims of microaggressions, including, but not limited to, substance use, breast cancer, obesity, and low feelings of belonging. Also, as an explanation for lower functioning in programs of higher education, increases in internalization and depression were/are seen, as well as externalizing and hostile/aggressive behaviors toward others were observed and reported. Robinson-Wood et al. (2015) also shared reported feelings and experiences of insomnia, body pains, and headaches (e.g., Bryant-Davis & Ocampo, 2005), as well as complex feelings that include confusion, shame, and guilt (e.g., Carlson, 1997) for exposure to microaggressions.

The themes centered around the subtle nature that encompasses microaggressions in the 21st century—while there are still incidents of lynching, foul-mouthed hollering, and outright killing of blacks, interactions seem exponentially different in the world of academia as it relates to its historical purview. The Mighty Melanin Tax theme "refers to the massive physiological and psychological toll that chronic microaggressions levied upon visible Black women, including those who occupy elite and niche positions, or have earned tenure" (p. 230). Judgement was experienced by Black women based on the superficial variable of skin color, with these women noting various health issues that correlated with this treatment. The second theme of the "Acrid Academy" highlighted unfortunate situations wherein Black women were questioned about their level of competence or subjected to scrutiny. "Underrating Race" exposed the power that race had in creating an uncomfortable learning or work atmosphere, especially when Black women confronted whites in the workplace who were ignorant of their privilege or did not recognize racism as a real and living entity. "Coping as Optimal Resistance" and "Armored Coping" highlighted strategies, both unconventional and catholic to those outside of the Black race that

Black women practiced to self-preserve (e.g., prayer, picking one's battles, mentoring and educating new students of color, sought therapy). The implications for this study showcase how "injurious to women" the reception of these microaggressions are, most specifically because of our "intensely relational" identities.

Regarding participation in mental health by Black in the United States, research literature has highlighted many of the negative aspects of these experiences in previous studies. While these contributions have helped to bring to light to some of the discrepancies in the field, no concrete follow-up measures or interventions have surfaced to address these grievances. Specifically, because of the growing number of minorities (and more so, Black graduate students) entering psychology and the social sciences (i.e., Thomas, 2004), it is disheartening to see that very little attention has been paid to what solutions can directly be applied to help students of color succeed as future clinicians. This project aims to explore the lived experiences of black women who are currently matriculating through or have graduated from clinical psychology graduate programs (i.e., both at the masters and doctoral levels) and how historical trends and current conceptions of culture in the field may have affected their functioning. Particularly, this project aims to explore perceptions and receptions of black women in the field of psychology, working through stereotypes and historical stigmas associated with actively participating in mental health services.

Myers' theory of Optimal Psychology (1988, 1992) explored Black navigation through predominantly white environments that can be the breeding grounds for feelings of inferiority and insecurity. It posits that the least restrictive environment is, in essence, propositioned by self-generated coping mechanisms peppered with the cultural values of the Black community.

Pointedly, "Compared to white students, students of color are vulnerable to experiencing college

campuses more negatively" (Robinson-Wood et al., 2015, p. 225). Specifically, it was noted by Torres, Driscoll, and Burrow (2010) that Black doctoral students were experiencing negative impacts on overall mental health due to "frequent behavioral and environmental encounters with inferiority" (Robinson-Wood et al., 2015, p. 225). In this study, n=107 Black doctoral students and recent graduates experienced assumptions from others about criminality and second-class citizenship, an underestimation of abilities, and cultural and racial isolation. Moreover, the utilization of Black scholarly work and research seems to be sparingly used at the doctoral level with the combined negative assumptions about the quality of work that non-white scholars bring to the table.

In other relatable studies, women particularly seemed to have difficulties in deciphering whether or not the discrimination that they faced was race or gender-based (Constantine et al., 2008). Thomas (2004) succinctly highlighted the naturally occurring problem with attempting to unravel the mystery that is the Black woman in this country; are her problems gender-based or byproducts of racial discrimination? She stated, "Black women bring uniqueness to psychology stemming from a historical legacy that continues to relegate them to membership in multiple groups" (Thomas, 2004, p. 286). Mainstream psychology has tried to present an explanation for this "unique" experience through the traditional cookie-cutter, dichotomous mindset that forces such a complex sociohistorical group into a watered-down citizenry. As a consequence, a sense of *cultural paranoia*, as presented by Grier and Cobbs (1968) is elicited as a means to help certain oppressed groups maintain a sense of stability and cultural homeostasis by not trusting the dominant culture and their one-dimensional approach to understanding. There is something to be said about the quality of one's existence when oppression is not only experienced and lived through, but also as a variable where one's experience is the constant expectation of trauma and

the need to remain guarded yet resilient. Would the experience be honored similarly if a female (or even male) of the dominant culture experienced this?

## **Chapter III: Methodology**

## Using a Qualitative Approach

Creswell (2007) describes qualitative research as beginning with "assumption, a worldview, the possible use of a theoretical lens, and the study of research problems inquiring into the meaning individuals or groups ascribe to a social or human problem" (p. 37). Further, he indicates that to study the specific problem, or "phenomenon", the researcher(s) use an "emerging qualitative approach to inquiry", collect data in a setting where the problem is organically played out, and then interpretation of the data occurs to extract themes and patterns regarding the information provided (p. 37). Qualitative research allows the researcher to take an exploratory approach to a subject of interest, guided by the participants' own narratives, free from "distortion and/or prosecution" (Alase, 2017, p. 1). This particular research focuses on the lived experiences of Black women in doctoral clinical psychology programs, warranting an approach that concentrates on formulating some common ground among participants of the study. Additionally, due to the sensitivity of race and the experiences of prejudice surrounding this topic, careful consideration is taken in utilizing an approach that allows participants to share their narratives free from condemnation.

## **Interpretive Phenomenological Analysis**

Smith, Flowers, and Larkin (2009) stated, "IPA is a qualitative research approach committed to the examination of how people make sense of their major life experiences" (p. 1). They argued that this approach should be "seen as psychological—its core concerns are psychological, and psychology needs space for approaches concerned with the systematic examination of the experiential" (p. 5). IPA is not only concerned with the common aspects of [shared] lived experiences, but the nuances that contribute to the uniqueness of the phenomenon

(Alase, 2017). More particularly, this approach is helpful when examining emotionally inciting, complex, and elusive phenomena shared by individuals (Smith & Osborn, 2015). In efforts to analyze the person's lived experiences, the researcher's participation involves an interpretation (and/or series of interpretations) of how the individual(s) interpret their own circumstances and experiences. It also aims to conduct detailed examination of the human lived experience "in a way which as far as possible enables that experience to be expressed in its own terms, rather than according to predefined category systems. This is what makes IPA phenomenological and connect it to the core ideas unifying the phenomenological philosophers...." (Smith et al., 2009, p. 32)

This approach was chosen for this project for the following reasons. Firstly, Interpretive Phenomenological Analysis (IPA) is consistent with the goals of this research as it aims to explore the shared lived experiences of Black women matriculating through doctoral clinical psychology programs. Because of the "participant-oriented" nature of IPA, the approach zooms in on the subjective experiences of the "human-lived experience, and posits that experience can be understood via an examination of the meanings which people impress upon in" (Smith et al., 2009, p. 34). While the interview process may be somewhat structured, the interpretation is guided by the responses of the participants through open-ended questions that lead to saturation of data.

Secondly, this procedural technique allows for the participation of the researchers in a relatively unique way—to not completely ignore their own experiences or exposure to the phenomenon in question, but rather to bracket their own thoughts and experiences to "capture the essence of a true investigation" (Alase, 2017, p. 13) and put aside preconceived thoughts and prejudgments about the notion to grasp a better understanding about what is being studied

(Moustakas, 1994). In this particular instance, as a self-identified, Black woman in a doctoral clinical psychology program, it is compulsory for me to render my voice temporarily silent through the interviewing process to not muddy the data.

## Sample and Size

According to Creswell (2012), it is important to choose participants for qualitative research that help the investigator best understand a central phenomenon. Further, he adds that in phenomenological research two objectives should be considered: "One is to either corroborate the 'lived experiences' as told by the research participants in an 'across the board' corroboration; or two, dispute the allegations altogether, if they're not found to be true or credible" (Alase, 2017, p. 13). Creswell (2013) also indicates that an IPA research study should have a "homogeneous" sample pool so to "examine convergence and divergence in some detail" (Smith et al., 2009, p. 3). The sample is strategically chosen, rather than through "probability methods" so that the individuals can give insight into a particular experience (Smith et al., 2009, p. 2009). Selection criteria and invitation to participate in the study are carefully teased out to ensure the homogeneity of the sample, and the sample size is usually between 2 to 25 participants (Creswell, 2012). More obviously, the sample should have "[similar lived] experience of the phenomenon being studied" (Creswell, 2012, p. 155).

Smith and Osborn (2008) describe IPA sampling as "purposive" rather than random or representative (p. 56). They underscore the importance of recruiting a sample that is relatively homogenous with the knowledge that there may be nuanced differences to account for. To preserve the integrity of the sample for the study and the sample needs to execute this particular type of research, the following selection criteria was utilized to ensure that the interviews encapsulated the intended group. Individuals selected self-reported attending predominantly

white institutions (PWIs), enrolled in a doctoral clinical psychology program, self-identified as Black (i.e., despite being of mixed race, etc.) and had completed at least one year of doctoral studies (i.e., residency period) in their doctoral program. The participants were also within similar age ranges (i.e., within 10 years of one another in age). The written and verbal consent of each participant were obtained to participate in the study and deliberate on the data. A simple screening questionnaire was administered to participants-of-interest to find out if they fit the needs and selection criteria of this project (Appendix B).

#### **Research Design**

Along with selecting the appropriate sample and size for a phenomenological study, appropriate measures were taken to ensure that the research questions capture the essence of the phenomenon being studied. Creswell (2003) suggested that researchers using a qualitative approach aim for a small number of questions (i.e., one or two central questions) followed by no more than "five to seven sub-questions" (p. 106). Each of the sub-questions intended to continue to narrow the study's focus but remain open-ended as to not corner the participant into a particular set of responses (Creswell, 2003).

#### **Research Questions**

The research on this subject is limited and warrants some spotlight because of how literature highlights gaps in understanding Black women in this field. Remarkably, there are little to no research studies with specific focus on Black women in doctoral clinical psychology programs. This project aims to shed light on the following questions for Black professional women in psychology, without necessarily being asked in these direct ways:

- Describe your experiences as a Black woman going through a doctoral clinical psychology program.
- Are there any circumstances of your educational career that you find unique to being a Black woman in the field?

#### **Sub-questions:**

- What attracted you to the field of clinical psychology?
- What has been your experience in the classroom learning about clinical information?
- Do you feel like your cultural concerns are addressed in the classroom/through educational means (e.g., Supervision, etc.)?
- What are your perceptions of how you are received by the clients you serve and the professionals that you work with?
- What strengths or resiliency factors do you feel help you get through the process? What makes it difficult for you to press on?

A semi-structured, in-depth interview was administered to participants using the aforementioned, open-ended questions to help guide the conversation to extract a meaningful understanding of the phenomenon that this group has experienced (Creswell, 2013). Smith and Osborn (2008) noted that any instrument utilized for IPA must maintain a sense of flexibility, as it allows rooms for dialogue between researcher and participants as well as the modification of research questions based on the responses provided by the participants (p. 57).

The use of a semi-structured interview is intentional in this project, per the direction of Smith and Osborn (2008), as it "guides" the interaction rather than "dictating" it. Specifically,

• There is an attempt to establish rapport with the respondent

- The ordering of questions is less important
- The interviewer is freer to probe interesting areas that areas
- The interview can follow the respondent's interests or concerns (Smith and Osborn, 2008, p. 58).

#### **Data Collection and Storage**

Participants that met selection criteria were scheduled for one to two hours at their convenience. Interviews were conducted on a one-on-one basis. No compensation was provided to participants, rather, an offering of electronic access to the completed dissertation project.

Additionally, electronic copies of the disclosure/consent form for the study were provided to participants for review.

The collection, storage, protection, and destruction of data from this project are crucial to preserve the utility. The process requests that participants divulge information about themselves that are personal, private, and may subject them to feelings of vulnerability. In an effort to respect the information provided by each participant, careful measures were taken to safeguard interview data, including, but not limited to: electronic password protections and encryption of interview content, using HIPAA compliant video software to increase security of live interviews, locking physical (i.e., paper) documents with identifying information in a locked filing cabinet in a locked office, and only providing access to the data to the investigator and faculty advisor (i.e., dissertation chair). Further, when obtaining consent for participation, each individual was assured that their data can be reviewed and revoked at any time prior to analysis of data.

#### **Data Analysis**

Richardson (1997, 2000) asserted that the meaning of qualitative data is extracted from the reading. Unlike the tenets of quantifiable research, which include data tables and illustrative

summaries to make generalizations, qualitative research, and more specifically IPA aims to sustain a level of engagement with each participation for saturation of information to formulate interpretations.

## **Initial Noting and Looking for Themes**

It was the intention of the researcher to interview, analyze, and disseminate on the small group of participating individuals, as it is noted that IPA studies are "conducted on small sample sizes" (Smith & Osborn, 2008, p. 55). As aforementioned, IPA is dedicated to the "painstaking analysis of cases rather than jumping to generalizations" (Smith & Osborn, 2008, p. 56).

Additionally, Smith and Osborn (2008) acknowledged that any guidance presented for conducting interviews for IPA is not prescriptive, and leaves room for the researcher to be creative in the approach to work. For the purpose of this project, a reading, and then re-reading of each individual transcripts were completed to gain familiarity with what is "interesting or significant about what the respondent said" (Smith & Osborn, 2008, p. 67). Notes were in the left-hand margin of each transcript in an effort to summarize, clarify, and/or develop connections, contradictions, and language use between certain parts of the transcript to other parts (Smith & Osborn, 2008). Initial, broad themes were developed from the content of each individual transcript.

#### **Searching for Connections Across Themes**

After the reading, re-reading, and commentary of emergent themes from each individual transcript, the researcher placed a "theoretical order" of the themes found and make sense of some of the connections between themes within one individual transcript. The goal was to develop clusters of themes from each transcript to form overarching categories (i.e., superordinate themes) and to continually check back to make sure that the theme matches the

participant's actual words in the transcript (p. 72). This continued until umbrellas and clusters of themes were developed and ordered for each individual transcript.

#### **Identifying Patterns across cases**

After each individual transcript has been gleaned for themes, the researcher looked for patterns of themes and connections across each transcript. This included a side-by-side analysis of transcripts that involves another reading of each transcript and a table of collected themes from each to compare "convergences and divergences" across data, "recognizing which ways in which accounts from participants are similar but also different" (Smith and Osborn, 2008, p. 73).

# Validity and Reliability—The Write-Up

The final piece of this project involved the written interpretation of the meanings of the themes and experiences shared by each participant to, hopefully, present a culminated version of the phenomenon that is most accurately representative. Anecdotes from the interviews were highlighted and used to support developed themes. The researcher also took a ginger approach to bracketing her own experience to not muddy the interpretation of the data. Unlike the more structured, quantitative sibling, qualitative research can subscribe to more loosened methods to ascertain a sense of confidence in the data. Holt and Slade (2003) suggested that the validity and reliability of qualitative research should take into consideration how applicable the themes are to similar situations. The problem is, as Brock and Wearden (2006) propose, is that the parameters of the target population are not in fact known and there is not an aim for a "representative sample" (p. 24). So then, the credibility of the interpretation of data lies in the production of "indepth analyses of a small group's accounts rather than representative samples" (p. 24; see Touroni & Coyle, 2002; Smith & Osborn, 2008).

Participants were invited to review their transcripts electronically to edit their responses, or, if so desired, withdraw their responses from the study. The intention was that a review of the transcripts by each individual participant would aid the researcher in ensuring the accuracy of the content provided and perhaps the chance to expound on areas of the interview where there may have been a need for clarity.

#### **Chapter IV: Results**

The purpose of the present study was to explore the experiences of Black women in doctoral programs in clinical psychology at predominantly white institutions (PWIs). The study was intended to shed some light on their lived experiences and to highlight recurrent and prominent themes in their experiences. The experiences of Black women going through this process was important to highlight since the literature is scant pertaining to this specific subject.

## **Participant Demographics**

Data were collected from seven self-identified Black women enrolled in doctoral clinical psychology programs (i.e., Doctor of Psychology and Doctor of Philosophy) at predominantly white institutions (PWIs) in various parts of the United States (i.e., Midwest (n=2), Northeast (n=2), South (n=2), West (n=1). Responses from two participants were eliminated as they did not meet full criteria for the study (i.e., they were still in their first year of study). Participants were recruited through social media (i.e., Facebook, Instagram) and Word of Mouth through the "snowball" method where participants alerted other potential interviewees (Biernacki & Waldorf, 1981). The participants ranged in age from 22 to 32 (M=23.3). They were all in various places in their respective programs between just finishing their first year of studies and going into their fifth year and applying for pre-doctoral internships.

## **Emergent Themes**

A detailed analysis of the interview transcriptions and data were utilized to identify common themes between and amongst participants in the study. Themes emerged both spontaneously and in response to the open-ended questions presented to each participant. It seemed that each participant's responses highlighted an amalgam of personal experiences as a Black woman and peppered in academic environmental experiences to showcase interweaving thoughts. Five superordinate themes emerged from the data. It is important to mention that while

each theme distinctly represented a particular area of weight, there was much overlap in thematic response and experiential data.

Table 1

Being a Black Woman at a PWI Doctoral Program in Clinical Psychology

Superordinate Theme	Subordinate Theme
Awareness of Identity	Impacts of Racism (Overt/Covert) Being Questioned Tokenism Beyond Being a Student Financial Stipulations Imposter Syndrome
Social Interactions	Awareness of Exclusion Within-group discrimination Feeling the need to educate others Navigating Racial Interactions Wanting to quit
Support and Coping Mechanisms	Lack of Academic Supports Needing Black Females Individual Coping Mechanisms Outside (family/friend) supports Community Supports
Gender Roles	Underrepresentation Carrying the gender weight The "Angry Black Woman" Male privilege Doing it on my own Intersectionality
Diversity	Disappointment in learning Lack of Black faculty/Faculty of Color Diversity Walk Contributing to the difficulty of clinical work

#### Why Clinical Psychology?

When exploring the reasons for entering the field of clinical psychology, each woman brought their understanding of why this particular area was of interest to them and highlighted some of the challenges and educational barriers in getting into their programs.

Participant 7: I always wanted to be a clinical psychologist. I like discovered and fell in love with psychology. I was like 11 and it was like, why are my peers so weird? I forget there's a subject where you'd be like figure out people's behavior and how they think—I was hooked. All I knew was the term clinical psychologist. I didn't know there were so many ways to be in our field of psychology. And so yeah, I kinda just like had the idea and I just kind of stuck with it. And, you know, went through undergrad and I got my master's in clinical counseling. I decided to get my PsyD versus my PhD, um, because I'm more interested in clinical practice than research.

Participant 3: So I got my master's in psychology; I kept going forward and there was a PsyD and PhD. I was like, which one should I do? The PsyD has these years, and then the PhD...who has more? And I was like, oh, I want clinical psych. You have more advantage to doing more things. So, I was like, okay I'm going to do the clinical cycles. I want to have my own practice. I wanted to have my own center for children with autism and just like psychological testing. So, I just have everything all planned in my head. I was like yes this is what I'm going to do. But it's been like a hell. But looking back and where I'm at right now, I've really come a long way so I cannot give up right now—almost there to the finish line and it's becoming really hard to finish 'cause I cannot find a practicum site and all that stuff. So that's really slowing me down a little bit. Cause you know I'm supposed to be like far ahead.

Some of the women disclosed that their sojourn into clinical psychology was inadvertently imposed, as opposed to being due to sheer will.

Participant 3: So, when I entered the program, I didn't exactly have one direction on what I wanted to do. I just knew in order to be in the field of psychology you can't do much with just a master's degree. So, I knew in order to grow in the field, I needed to get my doctorate. I just knew I had to get that done. The difference between when I started and now is my belief system and my value around being a Black woman has grown exponentially. Um, when I entered the program, I didn't know what direction I was going to go into. I hadn't the slightest clue. And...now my focus is...I am that militant Black chick. Anybody will tell you, don't look at me sideways. I don't have patience for the fragile white woman.

## Theme 1: Awareness of Identity

A recurring viewpoint during this study was the evolving versions of identity each participant talked about experiencing. Specifically, a question regarding each participant's reason for choosing clinical psychology at the doctoral level was explored and other attributions to identity awareness were disclosed. Many participants disclosed research interests and/or particular groups that they would like to empower and embrace through clinical work at the doctoral level and acknowledged the limitations of race and power through having lower education and training.

Participant 2: So, when I first started going up way back, my bachelor's degree, I didn't even find myself doing psychology to be honest. I didn't have a bachelor's in psychology. I had a bachelor's in health science. So it was, I didn't even see my path here, but I started working with children with autism. Okay. That's when I got like—my eyes were like open towards this field. I would see psychologists come in and do like, you know, assessments or whatever. So, I was like very interested in the field. Like, oh, so you can do this, you can do that with this degree, we can do that, do this. And I was like, okay, let me look more into it.

When further analyzing what parts of identity contributed to each participant's continuation in their programs despite reported challenges, financial woes, as well as life circumstances were highlighted:

Participant 2: I've spent so much money and I'm closer to the finish line. I'm done with the coursework. I probably have like maybe two or three electives left. Internship. Um, dissertation. Yeah, that's all that's left. So, it's like, like stopping right now is just going to, I have a lot of loans to pay to be honest. And I just want to be a doctor. Just want to have that "doctor" in front of my name 'cause I deserve it. Everybody would be like, "You've been in school like forever since I've met you. How many years have you been doing this? in my family, when are you going to be done?" I don't even talk to them anymore. They don't understand. They don't get it. There's no point explaining to them like, okay, I have this class left. They don't get it. I don't see anyone who gets me where I'm from.

Some participants disclosed a sense of wariness of the process of starting their program as they had come from environments where they were not the sole or "token" Black person, and how their newfound indoctrination into doctoral

student life shifted their perspectives of how they were accepted. One participant talked about how perceptions of her being a Black woman have affected her own ways of dealing with others in her program:

Participant 1: ...Sometimes I feel like I don't want to like get so angry about this text that we're reading even though it's written by more races and like start screaming about that because then I'm just like looked at as the girl who always talks about racism ...and so like I have like this whole thing about not wanting to be like the angry Black woman in class and, um, and I hate that and I never had that before coming here and being the only one.

Another participant spoke about the difficulties of being and feeling isolated in her doctoral studies and explained how other environments she has been in have been more validating and less threatening:

Participant 5: I spent a year doing a postbac program and my advisor was like, "It's going to be really hard for you as a Black woman because like there's not that many Black women out here in clinical psychology in general". A lot of the programs aren't very diverse and she's like, "It's going to be like a really uphill battle". I think I had like internalized that like I'm ready to fight this. I mean, my advisor's Black, and my lab is predominantly Black and women of color. But I just felt like, okay, like I'm going to have to be like on my A-game and I have to make sure that like nobody can say like, [participant] got in just because she was Black, you know, like I have to make sure that like, people know like I got him cause like I'm super smart, like I deserve to be here. And so, I think like my expectation was going to be like I have to prove myself and like I haven't had to do that.

She also recalled feeling unsettled and questioned without warrant, and feeling as if she did not have anyone to help her through a difficult situation.

Participant 5: We have orientation with all the like professors—not just in clinical but like all like I/O experimental. And so, we broke out into small groups who were talking and I felt like I was being interviewed again. [Being asked] what clinical experience we have like from people who aren't in clinical. So I'm like, I really don't need to impress you, but whatever. Let's go down this road if you want to. But it just felt like, I was like being grilled about, oh, how do you think you're going to adjust to [school]? You know, being a Black woman here and like my advisor wasn't there. So, I kind of felt like I didn't have a buffer, but I was just like, it's fine. I grew up not too far from here. I've been in white spaces my whole life. It's nothing new. But I just felt like then I have to be like, no,

I really deserve to be here, these other professors who did an interview, like for the clinical programs.

A few participants talked about outside obligations (i.e., parenthood, employment, getting married) that made it difficult for them to feel like they could connect with others who did not and were not experiencing some of their same circumstances. For example, two participants talked about how they were perceived after members of their cohort and faculty members found out about them starting families and having obligations outside of schooling.

Participant 6: I just, I always felt like they view me as a poor little Black girl—like they will say, Oh don't worry about it. We know that you have a baby at home. It's okay. And in my mind I'm thinking what does my baby being at home and me working have to do with anything that I'm doing here? And it was funny because one of my cohort members actually just said this the other day, she's like, I don't understand how you manage to stay on-track, work full-time and had a baby.

In another incident, this participant disclosed some of the struggle of balancing doctoral responsibilities and taking care of other responsibilities without being judged differently from her peers.

Participant 6: It's one of those things where I just felt like sometimes they think I have the old "poor, little Black girl" thing going on. I had a professor who had the department thinking that my son had all types of developmental delays 'cause he was sick. He got sick with hand, foot and mouth.

One participant disclosed how her work was viewed as sub-par, now being in a predominantly white environment when she had received accolades and validation for her writing and work at her previous institution of learning (i.e., HBCU).

Participant 3: What's funny is that when I was in residency —a year-long residency, I went through the entire thing by myself although I had the same cohort for the entire year but entire year with the same people. I didn't even go out to eat with them until the final day of the our... but our final day. And they told me that I've not a, we thought that you were a, excuse my language: "bitch". We thought that you weren't friendly and all this

other stuff. And I felt bad, but I was honestly like I'm about my business and I don't have time for friends. I never hung out with them; we never studied together. We never practiced assessments together. We never did any of that together. I'd probably have two people's phone numbers to this day that I may be kind of stay in contact with, a little bit. And it's a white woman and one older white woman from [city].

And another talked about the constant need to be "on point" to have a sense of belonging.

Participant 5: I'm here because like, I deserve to be here and I've put in the work to be here, you know? But I think like coming from [city], I had to be like on my guard and on my A-game all the time because like, even in my lab, there was one girl that was Black and like, I never saw her. And so it was just like me and then like here it's still just me, but it feels better, I guess. It doesn't feel uncomfortable and it might've just been like the people there, but like I felt at [city] I was like, I have to like to be on time, be early. Like we like the exemplar of Black person where like here I don't feel like I need to as much, but I still sometimes feel like I have to.

One participant talked about how her writing style was viewed as different since coming from an HBCU and having a "Black" writing style, and that she felt as if her competency as a scholar was in question, negatively affecting her mental health. Additionally, it seemed to silence her own creative and accepted writing style from other environments.

Participant 4: It just added to the feeling of like "imposter syndrome" and feeling like maybe I'm not cut out for this type of work, but eventually came back around to me thinking like, okay yes, there's things that I need to learn and work on. But then at the same time, I'm not just completely inept in writing. Like, I, I know how to write in. It's an assault. It's not, uh, it's not fully appreciated here. So that is something that I just, I kind of accepted and pushed aside so that I could do what I needed to do, which was basically just literally like literally what I did was exactly what she told me to do. Whenever she would give me edits of how she wanted it to look, I did it exactly how she wanted it to look. But the thing was it did create more anxiety around writing and being mainly like nervous to get feedback and you know, being more concerned about it. So I, um, but I ended up just kind of thinking "Fine, whatever you say is right. That's what I'm going to do and I'm just going to do it to get by". So that's what I ended up doing.

One participant shared her belief about what is in the academic environment that affects how Black women and people of color in general are perceived in academia and in

clinical work.

Participant 7: I think it is the microaggressions and cultural insensitivity of the professors or supervisors or advisors saying things or doing things and not realizing the magnitude of their impact.

#### **Theme 2: Social Interactions**

Categorically, this theme seemed to hold much weight and relevance throughout the course of each interview. Specifically, participants disclosed how social interactions shaped feelings, thoughts, and behaviors throughout their programs in the classroom and in clinical work.

Participant 2: It's just been hard. I find myself just as the time goes by, my mood is... my excitement is going down instead of going up. Sometimes I find myself saying, "Oh, I wish I never started this program". And I find myself saying that recently, you know, like, and my fiancé would be like, "You're already there. You should just keep going. You cannot quit now".

One participant recalled a disturbing incident in which her and another Black female student observed microaggressions occurring with no intervention on behalf of the professor or other peers:

Participant 6: The first incident was we were doing an assignment where we had to talk about stereotypes and one of the students got up and said, "Black people are poor, uneducated, they're this, they're that. And so, in my mind I'm thinking, am I hearing this? And so, I look at [friend] and she's like, are you hearing this? And so, we're looking at [professor], like—you don't hear that? You're not gonna check that?! I said, "I have an issue with this because these are the people that you serve every day in our clinic and is this just how you view them? So clinically I don't even trust you. Like I can't trust you". And she [professor] didn't say anything. She's like, "That's just his thoughts".

This same participant also disclosed the measures of retaliation that ensued on behalf of this professor because of trying to speak out against other injustices that she believed occurred against Blacks not only in the classroom, but in everyday life.

Participant 6: Everybody else in this classroom who doesn't look like me can "spazz" on her and keep their place in this program and I cannot. And so, I left and I called [mentor] like I can't sit in his class. This is what happened. And I think at that point, [mentor] said something to her [professor] and she was so angry the way that she did our final, like she made it impossible for us to do this final. Impossible to the point where we got a 'B' in a class based on one test, one test! and it was just one of those things where it's like you don't see this shit? And she still teaches [class].

She also talked about another disturbing interaction in which her and another Black female doctoral student had to navigate racial misconceptions because of a parallel that a classmate made about an injustice that cost a Black man his life. She also talked about how dismissive her white, female counterpart was of the feelings from Black students in the room.

Participant 6: We started talking about Freddie Gray. I don't even know how it came up, but I was offended by the fact that she [white student] tried to compare it to a SpongeBob episode. I said, "I just think that's a stretch because SpongeBob is a little trivial considering that uh, law enforcement took a man's life. I don't think SpongeBob can relate". And so she ended up arguing with this us; she ended up arguing with [Black female student] because [Black female student] is like, "No, no". There was some wrongdoing and basically she was trying to argue that it wasn't premeditated and the type of murder it was. She's like, "You're not a lawyer, so how are you telling us what it is?"

One participant disclosed the differences between being in the classroom and having interactions with peers versus being alone and how perceptions can make it difficult to function and how it influenced her identity.

Participant 5: When I'm in class, I'm good, but once I get home and I'm like, "Okay, I need to study". It's like, I don't know if I can. I have a hard time like studying because I'm so exhausted, I think, from being on guard—I can't focus, I'm like, "Ugh! I'm not learning anything". And it's like, my peers were learning stuff and I like have to push a little harder to be like, "Okay, you need to get this done". Especially like, 'cause I feel like if I don't get it done, I fall behind that are going to be like, oh, look at this Black girl falling behind. I don't ever want that to be the case.

And another participant recalled having to deal with how white peers were insensitive to socioeconomic statuses of clients that resulted in negative perceptions about people of color in the clinical environment where they served them.

Participant 1: I think I catch myself having to like, in, in didactics or in class, I'd have to like, uh, they're like, I really, I don't like, like hateful comments. Like, so there's like this one instance where we had to, um, we, uh, for one of our assessment practicums had to go to a like, um, clinic or took a state addiction type of clinic. Um, and like, I don't know, it's just one of my peers was like, oh, I don't like going to this clinic because it's just so dirty. And like the people are like, uh, but it was like poor people of color and I just like to sit there and I was like, what the fuck? And that kind of stuff. Like, it's like, and I don't even know if it's malicious...It's just, yeah. It's like, that's something that people said out loud and that makes me so angry.

Another participant talked about how she had to explain herself and educate other professionals more about the way she was interacting with clients, and indicated that she did not witness that happening to other colleagues. She disclosed beforehand that in an interaction with a supervisor, she found herself being questioned and having to explain certain terms that he, as a white male was not aware of.

Participant 3: And my supervisor was like, I noticed that there are times in your session where you guys would like go over things that I know that I would've stopped at and be like, I'm not familiar with that term. Can you explain it to me? Or um, I really wasn't sure what you guys were talking about are the dynamics here. Can you explain to me so I can give you feedback and like he just goes to prove my point.

# **Theme 3: Support and Coping Mechanisms**

When asked about what contributed to each participant's perseverance in their programs, every participant disclosed friends, family members, and/or mentors whom provided them with reprieve from their academic dejections. While there were mentions of racial discrimination and microaggressions, what also stood out was the lack of supports in the immediate environment.

Participant 2: We had like this "Whatsapp" group, but nobody really went on as soon as they were done with residency. You don't even hear from anyone anymore. It's like everyone is doing their own thing. And I even at some points messaged out—how are you guys? have you guys found any clinical sites yet? No one actually responded.

Participant 3: I don't have any friends. I don't have a significant other like anyone else in my field where like I'm literally out here by myself and I'm ignored. I'm being Black, right? Like I'm just shopping while Black. I'm pumping my gas while Black. And so, um,

it used to bother me, and I think just because I've been here for my second year, um, and you know, I kind of had to figure out what that means to me. And realizing like, if my blackness makes them uncomfortable, that's their own stuff. And that's nothing for me to hold on to. Um, like I feel a lot better now and it's not as distracting. Um, in regard to the faculty and learning, there's definitely, um, there's something missing. I mean, granted they have to take multicultural, um, that's like a prerequisite of the course. However, a white woman who's teaching it.

Participant 7: And I would say that for the most part, I feel supported by faculty as much as their own cultural experience allows them to, if you know what I mean, in terms of like, there's times they just don't get it or, um, you know, but they're supportive in their level of curiosity and like opening engagement. Um, so like they're as supportive as they can be. Um, and I think realizing that like, what that means in terms of calibrating my expectations in that regard has been a learning curve for me.

This last participant also disclosed, like many of the participants, that she found supports from outside of her program and department of study.

Participant 7: I get support outside of the program certainly—like family and friends, but then also like other Black people at this institution that are outside of my program still. There was a professor in the counseling program. I met him soon after I started. I think he just like saw me holding a book bag and I started randomly talking to him.

A couple of participants spoke about the confusing nature of being Black women and doctoral students and wondering if their experiences were commonplace.

Participant 5: At first, I felt like, okay I don't have the support and I'm like trying to do it all on my own, but I also feel like is this doctoral-level work—kind of figuring it out on your own and muddling through it?

Participant 3: There's not a single person that I talked to regularly who understands the entire process. Um, it's been really helpful over the past few months to speak to my cousin about certain things. I wish I'd started to talk to her sooner. Um, it's been helpful, although I have my sister who went through the same program. Um, I didn't lean on her for help because I know she was doing it as well, so I didn't want to like stress her out with like my issues. So now for the most part it's just been me and that has held me back significantly because to be quite honest, I should be done with my doctorate by now. I probably should've finished about a year ago. And because of that lack of support and the anxiety and the stress about it, I just didn't, I just didn't get what I wanted to get done, done. Um, I wish I did have that support.

When addressing what could be helpful in terms of supports and other learning to feel included, participants shared a myriad of suggestions. One participant recalled

that a person of color was hired in to teach about diversity.

Participant 2: So they brought her [professor of color] in to take over that course. I think she teaches that course well and people really, really enjoy it. But at the same time, with the diversity I feel like it should be more. It should just not be just one course. I feel like it should be more than one to be able to learn more because it's so much information too. Grabbing just one course. And I feel like diversity's also thought of as like a course itself. So it needs to be more emphasized on, and maybe they should have like two or three or something, but I know there's no time to, you want to get out of the program and get done, but at the same time it's, it's going to have to deal with your own personal research.

One participant talked about the supports in the community that might be helpful for Black women and blacks in general to thrive in their communities and education environments.

Participant 1: I think it starts with like having clinicians of color to be trained to train people like, or different workshops and like things. There's people all over doing this work and I think a lot of the times especially in departments that can be so insular. I think seeking out chains for your coalitions that maybe are not just in your immediate vicinity.

Another participant delved into the need for more support from their faculty and administration in regard to recruitment efforts that have students in the programs that are more reflective of the individuals needing clinical services and who are doing the work.

Participant 4: Well first I would want them to prioritize having not only more diversity, but like program population and have graduate students [of color]. But it's I don't think they're doing enough with that. They also they need faculty of color, who are studying things that will shed light on some of these issues.

#### **Theme 4: Gender Roles**

In his dissertation, Salvador (2017) highlighted that one point of contention when looking at Black experiences could be resolved by looking at differences in gender experiences between Black men and women. Some of the participants spoke anecdotally about the differences observed between themselves and their male counterparts.

Participant 2: Okay. Starting right now I feel like I'm still on my own and I still dig in to find myself and find my place in this field. It's also a learning process at this point 'cause I feel like I haven't really gained a lot to be honest. I still have my own research and do my own, um, you know, my own readings to be able to understand this diversity process

and everything that it entails. And what I'm hoping for is starting this practicum. Um, I would get more, more insight to how it actually works, how this field actually operates. But that would also take to time to be able to, you don't want to just go there and not knowing anything. You want to be prepared. You want to have an idea of actually what is called, which I know I pretty much have an idea of everything, but get the hands on, we'll be like the open like open doors to more ways of learning and which I'm looking forward to. It's like working twice as hard because you know, being a Black female and also, um, not as privileged as being a white individual. So, you'd have so work twice as hard because you have to prove that you're up to par with the society. So, it's kind of hard. I've been everywhere. It's not like work and everything. It's just we have to prove like we're, we're capable of doing our work.

Participant 1: Something I think is it may be not be as hard for a Black man just because you do have some privilege being a man. I think a lot of times I have a hard time not wanting to come off as a stereotype. I have a lot of them. Since being here I'm notice that I carry a lot of like stereotype confirmation biases with myself. I hate it and I am actively fighting it.

Participant 3: Something that is unique is that we are able to build bridges, where possibly some Black men don't. And I'm not like saying like they're unable to work together as a group, but what I've noticed is that Black male friends of mine who are in doctoral or even like master's programs I feel like they're not getting what they need. They go and they create a completely separate space—completely separate from their program and I understand that they need this space. I'm just kind of like, "But what about other students that come in? Like is this the space that you're setting up somewhere where they will have access to it when you leave? Like is this only for you? How does this benefit the incoming cohort?" But still there's the problem of there's not enough space for us in this program.

One participant spoke about how Black women's presentations are perceived, and highlighted the experiences that they are often misconstrued as "angry" or conceptualized in negative ways in comparison to Black male counterparts.

Participant 7: I think as a Black woman, you're constantly dealing with the intersectionality of that, right? So being Black and dealing with racism or cultural things related to race and a woman and having to deal with gender applications. And we put those two together as the stereotypes that Black women have in terms of being like angry or too boisterous or not peppy enough or things like that. And so, when you add those dynamics in a doctoral program, it gets even weirder. In terms of if I advocate a certain amount, how am I going to be perceived? You know—walking down the hall if I'm not like cheesing at everyone. Do they think that I'm just like really angry for some reason? You know, the other things that you're constantly having to deal with. And then the lack of support when you're a Black woman in a doctoral program at a PWI, depending on how the staff is made up. It's all white and so I don't have that representation or

someone's office I can't duck into that gets it or you know, someone that I can like talk to and figure out what this means.

She also noted that there are some observable differences between Black men and women and how they are able to move through professional and social environments with greater ease—perhaps due to limited numbers of them.

Participant 7: Black men are like a commodity—a commodity in the field of psychology, right? Cause there aren't a lot of them. And so, um, there's a need for that because if Black boys and Black men are seeking therapy, like who's filling that role, if they want to talk to another of Black male psychologist? I do think that it's a little bit different in a way that like it's always a little bit different. And in society in terms of how Black men may be revered in ways that Black women aren't. Um, or even like the idea of if you just think about it from a gender point of view, right? If a man can be more assertive and not be seen as aggressive, um, and can you speak louder or carry himself in a way that's more accepted, but if a woman does it, then it's problematic where she's being aggressive or it's too much or it's viewed in a specific way. And so I think, you know, in general there's a gender dynamic. And you know, for Black women versus Black men, um, and so certainly there are, um, dynamics that I think Black men would struggle with in terms of the deaf students and a PWI just as Black women do as well. I think the idea, I think men, um, when it comes to navigating that space and being assertive in that space, I think it's easier for a them do so.

One participant disclosed how she felt little support from her program and that she had to try to figure out how to get what she needed when there were observable deficits in help.

Participant 4: So what I've noticed with my program is that they all, like, care and they want me to succeed, but you don't really have any infrastructure to help me do so. Like I've had you so much on my own. In terms of getting my own mentorship, getting my own fellowship, I am a part of the minority fellowship program through APA and funded by SAMHSA, but nobody in my program ever heard of it. Even when I won it, they were like, "Oh, congrats. What is that?" So, I had no help. Things worked out because I already was a part of psychology community with being a part of the Association of Black Psychologists colleges; things like that. But also being in my same area where I was an undergrad where I built networks. But if I, if I didn't have that I wouldn't be able to get to where I really want to be.

She also disclosed her disappointment in not having representation for her own self-care endeavors (i.e., a Black female therapist) available to her as a means to deal with some

trauma experienced in working with clients of color.

Participant 4: I started freaking out like, okay, what if he says something and I haven't even processed what I feel? What if his trauma triggers my trauma? And so I talked to my supervisor about that and she was like, "Well, you should go to therapy and you know, you just need to be one, one session ahead of him." And so, I went to therapy and I went to [school] for therapy. I requested like an African American female therapist and they're like, "Okay, yeah, we'll see if we have someone". And I was also like, "I want someone who's not a graduate student because like what if I see them somewhere?" and they're like, "Okay, we have a postdoc." I come to my first session, it's a white male therapist.

A participant also discussed some of the male privilege that was acted out in the educational environment and the inadvertent invalidation this gave to women in academia. She spoke about how the reputation of a professor preceded his own ineptitude the cultural dynamics of the classroom.

Participant 1: [We met him] our first semester and he is super famous in his specific area. He taught our class and all of us noticed that he was kind of sexist. It was like a discussion-based class. All the middle class would make these like, just longwinded non-concrete answers and he'd be like, "Oh yeah, yeah, that's interesting". And then like if woman answered a question, he would correct her grammar. And he wouldn't do that to any of the male students. So it was like getting past that and the extra way of him being like super famous in this bubble—as famous as you can be an academia.

One individual talked about her struggles as a Black woman and mother, and how she felt that she was treated differently from her white female counterparts as well as her Black colleague who took a different approach to other responsibilities and how that was viewed.

Participant 6: I know it's my pregnancy because here I am at an all-white Catholic institution and I'm a Black single mother. Right? And so, we already got the race card going but now I am a stereotype—like how did I manage to let this happen? And I just felt like, you know, [my colleague] is married, she was married before she had [her baby]. And I felt like the way that some of the professors viewed her versus how they viewed me was probably different. It was more of, "Oh, she did things the right way and you didn't. So you need more support where you need this, you need that". And like looking back on it now, it's like I missed a lot of precious time with my son trying to make sure that I didn't fall into a stereotype. That really doesn't even matter because the goal is for me to graduate.... I have [mentor]; she sent me her office one day and she

said, "I need you to stop looking at your pregnancy as a shortage in your life and look at it as a value because you're looking at it as if it's stopping you from doing something family and having a family and deciding to be a mother is a wonderful thing".

# **Theme 5: Diversity**

Many participants started their interviews discussing challenges with diversity in their respective programs and the manifestation of stress that ensued from witnessing and experiencing such issues. Overlapping with the theme of identity, diversity highlighted anecdotal situations that these women disclosed had huge impacts on their sense of self, how they felt they were situated with others, and their feelings of importance overall in the field and in academia.

Participant 2: I feel like starting this program at the beginning—it was very exciting., I was like looking forward to it and as soon as I got into it. We started like an online hybrid. So, it's like, you know, partially online and in person. When we started the inperson phase we saw so many, you know, white people like we can count how many Black people are there. So, I'm like, "Oh wow, I'm always, I am always counting." Like how many Black people, how many of my people do I see around? So it kind of felt like, Wow, I kind of feel like kind of left out a little bit. And also, they do this privilege thing where if you're of privilege, if you're this move forward, if you're that move backward. So, we are all the way in the back, and like all the whites were all the way in the front and I actually cried. Cause it was kind of emotional saying that like, oh wow these are the privileged kids and yeah, then me—and I'm not that privileged. And even the instructor is like pretty much like—we have all white instructors, only one Black in the entire school.

One participant disclosed some of the dissonance experienced between what she intended to learn versus how diversity learning occurred and highlighted the limited corpus of literature and research biases observed in the classroom and in clinical work.

Additionally, she disclosed how prayer and faith were the tools for healing versus clinical therapy.

Participant 1: I knew that I wanted to be trained, um, in clinical psych and, um, not just like an MSW 'cause I wanted to do research, one. And then I also wanted to work with like pretty severely mentally ill patients. I see myself kind of eventually, if not in academia then like an academic medical kind of situation where I can also be like a

trained supervisor and also do clinical work. I hope that I can be an answer to the question of how to access Black therapists because there's not many of us and how there's a lot of stigma I think even from in my community. To therapy in general like growing up it was always like, you know, pray about it and that kind of stuff. So, just like I see myself trying to like tackle that and kind of being a resource as much as I can.

Participants their frustrations with being in environments where the topic was broached about diversity in ways that seemed offensive.

Participant 4: What it ends up being is that every course has one diversity day. And it's like, this is not enough. They're like, oh yeah, and these things affect, you know, people of color in this way. If they were really to do things that were helpful for having a culture that was more like the culture of the program, which shifts I think with different faculty, with more diverse students in the cohort and with having specific, like an ingrained structure that acknowledges and embraces the differences that people have and the social context that they live in and have to deal with. I think it's mainly those things else. So just like being aware of what would be different with a student of color. Like these are basically all white faculty until they just hired a Black woman last year.

She also talked about the importance of being able to process her experiences with faculty of color, and most specifically, Black psychology supervisors as she continued to grow in her clinical development.

Participant 4: I think it's important has been important for me to talk about race in supervision. And like my race and my client's race or ethnicity. Because like it is very strange, like an assessment particularly like, um, at feedback sessions. It's an African American graduate student, clinician and African American supervisor in a white family. And it just feels really strange. And like I notice it and I don't know if other people notice or not, but I noticed that like this, the roles are reversed. Like we are not white doctors talking to a Black family. Like these are powerful Black women talking to these families about what we can do to help their children. So, I haven't had a lot of opportunity to kind of talk about that dynamic of like what it means to be a Black female psychologist and how that influences my work. And I, I don't know that it would be productive to talk to my way supervisors about that.

Participants shared their dealings with diversity-related interactions in the classroom and how it affected their own training and practices.

Participant 3: So, when I was in a multicultural course, I again, I felt uncomfortable so I wouldn't say anything. I would listen and like maybe say something small. But the confidence I have now, um, I didn't have back then 'cause I wasn't as well read about it as much. So now that, you know, I've, I've done years of research into the topic of diversity

and I could speak on it a bit more and it's in the news every day. And um, yeah. And I've been able to teach the course, so I'm much more comfortable in speaking up.

Participant 2: I feel like sometimes I get defensive of my own culture so it will be hard to like, I'll probably have to still dive in and read more so I don't like step on anyone's toes or offend any anybody. So, I'll probably have to do my own research or for other cultures, so I don't offend them—that's how it's supposed to be anyways. So, you don't even know cross path with the people. S yeah, it will be, sometimes there'll be uncomfortable situations where I have to face a client who is of a different ethnicity as I am, and I have to be able to respect your own opinions in India views as well. So, some people don't get that. They think they can just talk in no, see whatever they feel like saying without considering the feelings of that person, which is totally wrong.

The disappointment in the learning environment was also talked about from the perspective that there was no continuing education and efforts on the behalf of faculty to better their understanding of how to help clients of color. One participant indicated that there was little being done to ensure that the quality of care for clients was ensured through self-directed research from faculty.

Participant 4: I just see that there's no understanding like what else could be going on. Most of the faculty members are not willing to try to learn about those things. They don't really care to. They focus on their areas of research and they think that that's good enough. But again, everything they're doing would impact or affect a person of color and they're not taking any type of initiative to like really learn more about what they would need to do to be the best, you know, producing the best research that reflects both groups, but then also being clinicians that are equipped to work with those different groups.

Collectively, these women also disclosed through these interviews that their need for advocacy and an environment to be able to share their needs and learn from one another was another aspect relating to diversity. They talked individually about their efforts to foster more diverse conversations through starting groups of their own. These efforts seem to have been made when they identified that no one at their respective institutions was making strides to help them feel included.

#### **Chapter V: Discussion**

# **Interpretation of Results and Discussion**

This section will focus on a review of the themes and subthemes that emerged from the Interviews. This discussion will first reflect on the reason that participants chose the subfield of clinical psychology. The first theme will address each participant's awareness of their own identity within their programs, incorporating self-perceptions as well as perceptions of others. The next theme will address social interactions and how they affected their functioning through the doctoral process. The third theme looks at the current and desired supports and coping mechanisms during this process for each participant. The fourth theme zoomed in on gender roles and perceptions of differences versus males. The last theme focused on diversity factors and the discourse of this variable.

While not a thematic concept that was explicitly found, each participant was asked why they chose the subfield of clinical psychology for doctoral studies. There were a range of responses from the participants from understanding the availability of opportunities that clinical psychology would bring to their career and practice, to having very little knowledge prior to entering doctoral studies. These responses rolled into the first theme of "Awareness of Identity" and responses were peppered through other categories. Participants shared themes of empowerment and wanting to give back to underserved communities through obtaining doctoral degrees. They also talked about how limited their knowledge was of the sub-field and how they saw the importance of obtaining a doctorate to help their communities.

# **Awareness of Identity**

Many of the participants' responses seemed to be focused on how others (i.e., white peers, white faculty) viewed them and their social interactions. Participants shared common

themes relating to how they are perceived and what contributed to that. Under the umbrella of identity, participants shared sub-themes of impacts of racism (i.e., both overt and covert), being questioned beyond being a student, tokenism, differences in coming from a historically Black college/university, and financial stipulations. These sub-themes are linked by how they were and are perceived by others who are not Black. These instances have reportedly affected how these women have navigated their doctoral environments and viewed themselves within this setting. Participants acknowledged financial burdens that made it difficult for them to have any other identity outside of "doctor" and that they were compelled to finish their programs despite the adversity experienced and sensed. Participants talked about the importance of representation in the sub-field of clinical psychology, the arduous nature of tasking above and beyond being a doctoral student and stressed the importance of showcasing their best selves in order to be taken seriously.

Some participants also talked about how their identities outside of their doctoral programs might have been inappropriately intertwined with their abilities to prosper and do well and maintain other hats that they wear. For example, on participant spoke about her child being sick and peers being overly invested in her ability to complete school work and work full-time—as she interpreted as belittling. Another participant disclosed that she was afraid to disclose her pregnancy until she was ready to give birth because of perceptions that she might have more difficulties than others. This supports Patterson-Stephens, Lane, and Vital (2017) in their comprehensive finding that Black women have to balance several responsibilities above and beyond their educational goals.

Per Wingfield and Wingfield (2014), the almost negligible numbers of Black students—and for the purposes of this research, Black women in particular, in doctoral programs in clinical

psychology at PWIs put them at risk for being rendered the expert on so called "Black issues", perpetuating the notion of tokenism. On top of this, some participants acknowledged the need to overcorrect for historical stereotypes about being Black and being a Black woman at that. For example, one participant talked about how she felt the need to always be on time for class, to be the "exemplar of Black persons", while another talked about how she always had to remain conscious of being perceived as the "angry Black woman" or as a "bitch" because of speaking candidly about racially-charging issues, or choosing to remain focused and not socialize in the same ways as white peers.

#### **Social Interactions**

Regarding social interactions, participants' responses showcased sub-themes that were close to the superordinate theme of identity. Participants' responses seemed to focus on how others (i.e., white colleagues, white faculty) were treating them in relation to others. Responses shared the essences of the following subthemes: Awareness of Exclusion, Within-group discrimination, Feeling the Need to Educate Others, Navigating Racial Interactions, and Wanting to Quit. Participant 8 vouchsafed an incident in where several microaggressions occurred in a classroom interaction with other peers and the level of complacency demonstrated by the professor. Per Holliday and Holmes's (2017) attestation, situations like this contribute to continued feelings of marginalization for ethnic minorities. This participant continued on by disclosing that because of speaking out against the injustice, retaliation ensued making it more difficult for her to feel safe in talking about racially insensitive conversations and feeling protected in her doctoral environment. Additionally, they talked about feeling the need to teach others about what appropriate interactions are and finding herself getting upset at the sheer callousness of white peers in the field.

Revisiting Robinson-Wood et al.'s (2015) study on low numbers of blacks in the professional world, Black women at PWIs (i.e., at the college level) were cited to have experienced a myriad of "...environmental and interpersonal challenges that contribute to feelings of isolation, loneliness, and a sense of not belonging" (p. 225). One participant talked about feeling as if her peers were learning at a different rate than she was and the need to push harder and not admit this out loud. Another participant talked about shifts in mood from being exhausted and not feeling as if she could continue (i.e., wanting to quit), despite completing so much of her studies. This supports Torres et al.'s (2010) focus of how these microaggressions and invalidating experiences negatively affect the mental health of highly-achieving blacks.

These interactions seem to contribute to an inadvertent acculturation of Black women, or a losing of a sense of self as the learning environment is not interpreted as safe or conducive of a diverse clinical experience.

#### **Support and Coping Mechanisms**

The literature showcased the limited supports that are afforded to Black students, and Black women going through this response. As a response to direct questioning about what supports they were able to identify through this process, participants described their needs for success and feelings of inclusion. In sync with Baskerville (2016), participants talked about their need for mentorship and faculty of color. Their responses highlighted the following: Lack of Academic supports, Needing Black Females, Individual Coping Mechanisms, Outside (family/friend) supports, and Community Supports.

Participants continued the dialogue regarding isolation and not feeling supported in their respective programs. Two participants talked about attempting to reach out to others for support and find themselves back to square one with very little response. Participants talked about

receiving most of their supports from family or individuals from outside of their respective programs. Additionally, they acknowledged the limitations of such supports. For example, one participant talked about how their white faculty members are limited in their abilities to understand the Black female experience and that they have to recalibrate their expectations of the supports that they can receive (i.e., Participant 7).

#### **Gender Roles**

Gender stereotypes and roles were acknowledged by these women where directly asked about differences seen and experienced during their doctoral experiences. Participants highlighted the following: Underrepresentation, Carrying the gender weight, the "Angry Black Woman", Male privilege, Doing it on my own and Intersectionality. In referencing Higgenbotham (1992, 2017) in the literature review, the white feminist movement attempted to conceptualize women's experiences as homogeneous. Collins (1990) brainstormed the concept that this was not representative of the Black woman's experience and introduced *Black Feminist Thought* as a means to acknowledge differences even between Black women, while oppression and prejudice served as common denominators linking them. The participants in this study shared a variety of experiences related to gender, and responses seemed to piggyback on the elements of support and coping mechanisms.

One participant talked about how Black men are a "commodity" and because there are not a lot of them, they are seen very differently than their female counterparts. This indirectly supports with Collins (1986, 2009) idea that Black intellectual women value the procurement of knowledge and representation of the Black voice. She conceived that they are better able to navigate the educational environment, per her observations and interactions with Black male colleagues in her situation as a doctoral student. She attributed that "navigability" to common

perceptions about men and women—that they can get away with being seen as "assertive" as opposed to "aggressive" when expressing their points of view. A second participant highlighted the same concept of perception and indicated that she has worked and is working hard on not living up to stereotypes about being the "angry Black woman". It was also perceived that Black males do not have the kinds of supports that they need in these educational programs, and that they are observed to keep to themselves and enter "completely different" spaces to help them get through the experience.

Another individual posited that isolation and seclusion as a Black woman has made it so that there is more to prove with less resources than White counterparts. She disclosed that much research has to be done on her own and that much of her learning has been experiential—understanding the underpinnings of the field through transactional means. Per Hill Collins (2009) fifth feature of BFT, there is an acknowledgement that knowledge is an ongoing process due to ever changing social conditions. This participant recognized this concept and estimated the importance of doing this for the process of diversity. Many participants also disclosed the limited number of supports, as aforementioned, to help navigate the intersectionality between gender and race in their programs. One participant mentioned having to receive mentorship from a Black female faculty member from a completely different department. Representation is a critical factor.

Only recently has the American Psychological Association acknowledged the disparities that Black women endure as a result of the intersection of race and gender. Representation in the field has also been negligible, and it was not until recently (i.e., 2018) that the first Black woman was appointed to serve as president of the APA (Office of Minority Affairs, 2019). While it was recognized that Black women are obtaining postsecondary degrees at a steadily increasing pace

in the United States, the field of psychology still fails to have this representation for a myriad of reasons mentioned. This has also contributed to the alienation "...from mainstream U.S. psychology." (Wispe et al., 1969).

# **Diversity**

Riding the coattails of gender concerns is the variable of diversity. As mentioned, prior, Sesko and Biernat (2010) highlighted that Black women in the workforce were receiving less recognition for their work than their white counterparts. Additionally, the increasing numbers of Black women obtaining college-plus degrees is not represented in the field of psychology (Haizlip, 2012). Participants readily disclosed experiences regarding diversity and inherent flaws in program development around this variable. Their responses regarding diversity highlighted the following: Disappointment in learning, Lack of Black faculty/faculty of color, Diversity Walk, Contributing to the difficulty of clinical work, and the Imposter Syndrome. Participants spoke about the "diversity walk", in which a series of statements were made for people to take an appropriate number of steps forwards or backwards indicating their levels of privilege. Two participants expressed concern with this ostensible display of privilege, or lack thereof, indicating that it was an emotional experience that just confirmed that lack of diversification and underscored how much the field of psychology was whitewashed and lacked manifoldness.

Aforesaid, Clance and Imes (1978) described the Imposter Syndrome as an "internal experience of intellectual phonies," where individuals persistently believe that "they are really not bright and have fooled anyone who thinks otherwise" (p. 1). One participant spoke about her writing style being underappreciated and seen as less than when she had been validated and praised at her former HBCU. She (i.e., Participant 5) reported that she ended up having to work

differently and harder than before and that her style of writing did not seem to be appreciated in this new, predominantly white setting. Also previously mentioned,

Despite their high level of education, accolades from colleagues and other scholars, and superior levels of functioning, these individuals do not have confidence in their skills and abilities and are of the belief that their underlying identity as an "imposter" will be found out and that favorable outcomes are often due to luck rather than intellect and ability. (Parkman, 2016)

This participant revealed that these interactions about her writing contributed to her internalizing her competency and questioning her ability to make it in the field.

Participants also conceded that diversity is a factor that is often not incorporated into clinical learning, but rather regarded as an afterthought. They disclosed their programs' futile efforts to overcorrect or ensure some type of compliance with APA's standards for clinical programs. For example, on participant talked about how diversity was left to a day—where students would deliberate on challenges with working with individuals from different backgrounds. Many of the participants talked about how this was not enough, and the small number of diverse faculty made it that much more difficult to find and be a resource for other Black women. Because of this, may of the women disclosed forming their own advocacy groups and safe spaces for Black women to learn and thrive because their respective institutions did not purposely provide these spaces.

## **Final Thoughts and Future Implications**

In looking at the data and studying the literature, it seems that Black women have a sense of need for community during turbulent processes and that the doctoral process is no exception. The experiences extracted from each of these interviews are consistent with the current literature pulled from multiple sources regarding the experiences of Blacks at PWIs but adds a layer of uniqueness when zooming in on Black women going through the process.

To date, no current literature addresses just Black women and their experiences in clinical psychology doctoral programs at predominantly white institutions (PWIs). In terms of participation in the study, participants disclosed wanting to share their experiences and expressed interests in helping the field of clinical psychology to be more representative and inclusive of Black women. When asked what they believed would be helpful in this regard, many participants talked about recruiting more Black women and students of color, as well as faculty and mentors. While more literature is coming to the surface regarding this particular situation, the data is still negligible at best and not penetrating the surface of the importance of this information for the field of clinical psychology. The American Psychological Association (2017) published multicultural guidelines to help psychologists and training programs understand and engage with students from various ethnic minority backgrounds with the recognition of unique needs and perspectives that clients, students, and other professionals may bring to the table because of their cultural subscriptions.

Psychologists are encouraged to attend to intersecting sociological and neurobiological contexts that contribute to diverse identities of an individual. Intersectionality, by its broadest definition, incorporates the vast array of cultural, structural, sociobiological, economic, and social contexts by which individuals are shaped and with which they identify (Howard & Renfrow, 2014). Individuals are located within a range of social groups whose structural inequalities result in marginalized identities. Unlike unidimensional identity models, intersectionality addresses "the vexed dynamics of difference and the solidarity of sameness" (Cho, Crenshaw, & McCall, 2013, p. 787).

In summary, the purpose of this study was to examine the lived experiences of Black women in doctoral programs at predominantly white institutions (PWIs) studying clinical

psychology. This research was conducted as a qualitative study involving interviews with nine participants, all whom identified as Black women. Participants in this study came from different parts of the United States (i.e., Midwest, South, West, East). Through semi-structured interviews, each participant divulged the challenges they experience as Black women in their respective programs, their personal and professional reasons for choosing clinical psychology, and identified what helped them to endure the challenges that they live through. Many attributed their perseveration and resiliency to their support systems—both inside and outside of academia, spirituality, internal drive to succeed, and desires to do clinical work with people of color.

This study highlights that both macro and microaggressions are incidents in which many of these Black women had to endure, which influenced their progress in their respective programs. While there were not many reported overt incidents of racism and prejudice, many participants admitted to experiences of being invalidated, overcorrected, intellectually challenged and/or underappreciated through parts of their programs. They talked about not feeling the ability to relate to other people of color or their white counterparts in their programs when it came to discussions about culture and diversity.

Through the examinations of Intersectional Theory and Black Feminist Thought, it was observed that these women seemed to benefit from community supports through the courses of their programs and highlights that while Black women are being admitted to these programs there is seemingly little being do support these women as substantiated by the lack of recruitment efforts and problems with racial hierarchy. Additionally, it seemed that the onus was both directly and inadvertently placed on these women to form social and emotional support networks and educational platforms to educate others about their own experiences and how to interact appropriately with Black communities.

Each interview was peppered with data that contributed to the richness of understanding each participant's lived experiences, despite the small sample size used for this study. The insights from these individuals underscored the difficulties that these women faced even in different geographical parts of the United States under the same clinical training. While this study has supported a lot of the research that blacks in general have different experiences in academia and in clinical psychology, there are subtleties that have been emphasized regarding how Black women are dealing with this environment. Pointedly, the various responsibilities that Black women have to take on in addition to furthering their education has and is scrutinized and questioned in the face of other individuals with similar circumstances. The women in this study also highlighted the challenges of having competency questioned by their white counterparts while having to be educators of the Black experience and advocating for their communities.

As a scholar, mother, and Black woman, I value this kind of research because it serves to benefit several individuals on different levels of thinking and functioning. While acknowledging the difficulties in not only obtaining support for this research but struggling with my own identity throughout this process and how transformative higher knowledge can be, procrastination became a close and personal friend who aided me in not wanting to seek what needed to be sought to accomplish this project. For many reasons mentioned in the literature, my feelings and experiences of microaggressions and prejudice—both subtle and blatant, made every move that I made a walking experience in hardening concrete.

#### **Strengths and Limitations**

Interpretive Phenomenological studies allow for investigators to explore lived experiences of individuals in a more detailed medium through open-ended questions during an interview process. The process allowed for each participant to candidly give an in-depth

depiction of their individual experiences as Black women in clinical psychology doctoral programs at PWIs, especially since the literature is scant regarding this particular area. The participants expressed enthusiasm and gratitude for this project and their abilities to share what they believed to be unique to this process.

A limitation to this study goes back to the nature of interpretive phenomenological research, which allows for smaller samples sizes to help capture more detail. Because of the small number of participants, it cannot be said with confidence that this experience can be generalizable to all Black women going through this experience. Additionally, looking at the age cohorts for this study it cannot be determined if Black women in older age groups would report similar experiences. It was clear during the interview process and when analyzing data that these women all had individual differences and circumstances above and beyond being Black and female that may have also contributed to how they are matriculating through their programs. This is in line with one of the tenets of Black Feminist Thought (BFT), which acknowledges disparities within groups even under a collective experience.

Thomas (2004) stated, "No other group has been victimized by hegemonic domination and located within the hierarchical power structure as Black women have been in American society" (p. 286) The experiences that were disclosed in this study were collective reflections of several written works regarding Black women's experiences both in and out of academia and clinical work. It was a tedious task to pull from different areas of study to pinpoint the disadvantages and identity concerns that Black women are experiencing as doctoral students, and particularly in the field of clinical psychology. It is clear that very little research is being done in this area and this work intends to be a modicum of literary work to highlight the needs of this community for immediate and future action in recruitment and retention of Black women in

these programs. The title of this piece involves the concept of acculturation, which is defined by Redfield, Linton, and Herskovits (1936) as "the process of cultural change that occurs when individuals from different cultural backgrounds come into prolonged, continuous, first-hand contact with each other" (p. 146). The participants in this study showed how their identities as women were often downplayed or that there were reactions to their styles of writing, interacting with others, and ways of conceptualizing their experiences that were foreign or misunderstood by their white counterparts. While becoming a clinical psychologist is already an arduous endeavor, these women talked about being mentally and psychologically defeated because of the intersectionality between race and gender. Defense mechanisms, such as isolation, limiting social interactions, turning to mentors and supports outside of their programs, and continuing to "check themselves" when it came to how they came across to others (i.e., living up to the Black female stereotype) were ways that seemingly made it difficult for these women to feel good about their blackness in this environment. For many of these women, stripping themselves of certain qualities even for the time being was a way to mitigate the stress of these environments.

To be "involuntarily" white in this case means to succumb to the requirements of an environment that questions one's identity. The women in this study shared personal testimonies ranging from global interactions that were pervasive in society, to classroom exchanges that had direct influences on the ways that they navigated their education. This study highlights the perceived need for mentorship and representation in the field for cultural acuity and feelings of safety. Participants talked about how their writings, cultural discernments, and multiple roles were challenged when they had intentions to be helpful and break stereotypes. Racial microaggressions, as well and gender stereotyping seemed to contribute to these women's needs

to retreat or navigate clinical psychology in ways that they described were not observed to happen for their white counterparts.

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# Appendix A:

# **Recruitment Flyer**

#### **Recruitment Flyer**

Are you a doctoral student in clinical psychology AND identify as a Black woman in the United States? Do you attend a predominantly white institution (PWI)?

If so, you are needed for a research study designed to gain insight of the lived experiences of Black women matriculating through doctoral programs in clinical psychology, and in particular, highlight the experiences of completing this degree at a predominantly white school. Participation is voluntary, and it will include a 1 to 2-hour semi–structured interview. A transcript copy of your interview will be available for you to review and correct, and the results of the study will be made available to you after it is completed.

If you would like to share your experience and are interested in contributing to this research, or would like to learn more about participating, Please contact:

Carmela A. Maxell-Harrison, MA, LMHCA, PsyD Student
Antioch University Seattle
cmaxellharrison@antioch.edu

Thank You!

# Appendix B:

### **Online Prescreening Survey Content**

#### **Online Prescreening Survey Content**

Page 1—Introduction

Thank you for your interest in participating in this research. Carmela A. Maxell–Harrison, a Doctor of Psychology Student at Antioch University Seattle is looking for Black, female students currently enrolled in a doctoral program in clinical psychology at a predominantly white institution (PWI) with at least one year of completed studies (residency), to discuss their experiences.

This survey is the first step towards determining your eligibility for inclusion in this study. Your participation at all levels, including responses on this form, is optional, confidential, and revocable and will only be read by the primary researcher, and possibly the primary researcher's dissertation chair. Not all participants in this survey will be included in the main study.

If you have any questions or complaints regarding this survey, please note the following contacts:

Carmela A. Maxell-Harrison, MA, LMHCA, PsyD Student (Primary Researcher)

Phone: xxx-xxx Email: <a href="mailto:cmaxellharrison@antioch.edu">cmaxellharrison@antioch.edu</a>

William Heusler, PsyD (Dissertation Chair)

Phone: xxx-xxx Email: wheusler@antioch.edu

Page 2—Survey

This is the first step toward determining if you are eligible to participate in the main study. This survey contains 4 questions and should take approximately 5 minutes to complete.

- 4. Are you currently enrolled in a doctoral program in clinical psychology?
- [Yes] [No]-Stop here-Based on your response, you are not eligible to participate in this study.
- 2. Do you self-identify as a Black female?

[Yes] [No]—Stop here—Based on your response, you are not eligible to participate in this study.

3. Are you currently enrolled in a predominantly white institution (PWI)?

[Yes] [No]

-If answered yes, what state is your school located in?

4. Do you have at least one year of studies completed in your doctoral program in clinical psychology? (Residency)

#### Page 3—Conclusion

Thank you for completing the preliminary screening interview for this study. This survey is NOT the main study: it is to help the primary researcher determine if you meet eligibility criteria for the main study. If you do not meet eligibility criteria, are you willing and interested in being contacted by the primary researcher for possible inclusion in the main study?

### [Yes] [No] [Unsure]

1. If yes, please provide an email address and phone number the researcher can use to contact you. Information will not be used by anyone other than the researcher for purposes of this study. **Provision of information implies permission to contact re:** study.

Name City/Town State/Province Email Address Phone Number

(Informed by Brendler, 2017; Spence, 2016)

# **Appendix C:**

## **Prescreening Phone Interview Schedule**

#### **Prescreening Phone Interview Schedule**

Introduction: Thank you for taking the time to discuss possible participation in this study with me. Is this still a good time for us to chat? I will be asking a few questions to determine if you might be eligible to participate in the main study and also answer any questions that you may have about the study in the end. I will also let you know that you have the ability to end this conversation at any point, no questions asked. I just ask that you let me know when you would like to stop.

- 1. Are you currently enrolled in a doctoral program in clinical psychology? [Yes] [No]—Stop here Based on your response, you are not eligible to participate in this study.
- 2. Do you self-identify as a Black female? [Yes] [No]-Stop here-Based on your response, you are not eligible to participate in this study.
- 3. Are you currently enrolled in a predominantly white institution (PWI)? [Yes] [No]

  —If answered yes, what state is your school located in?
- 4. Do you have at least one year of studies completed in your doctoral program in clinical psychology? (Residency)

# Appendix D:

### **Informed Consent**

#### **Antioch University Seattle Research Consent Form**

The Doctor of Psychology Program supports the practice of protection for human participants in research and related activities. The following information is provided so that you can decide whether you wish to participate in the present study. You should be aware that even if you agree to participate, *you are free to withdraw at any time*, and that if you do withdraw from the study, you will not be subjected to reprimand or any other form of reproach.

#### *Purpose of the Study*

You are invited to participate in a research study. The purpose of this research is to fulfill the requirements for the Doctor of Psychology program at Antioch University Seattle. The researcher, Carmela Maxell—Harrison, is conducting a research study to understand the lived experiences of Black women matriculating through doctoral programs in clinical psychology at predominantly white institutions (PWIs).

You are being asked to participate because you have self—identified as a Black woman, currently attending a doctoral program in clinical psychology at a predominantly white institution (PWI).

If you participate in this research, you will be asked to meet with the researcher for a scheduled interview for up to two hours. Interviews will be conducted via a HIPAA compliant video software named Zoom. Instructions for using and navigating zoom will be given to you prior to your scheduled interview with the researcher.

No deception will be used in this study. The interview will consist of open—ended questions about your experience as a doctoral student in clinical psychology. How you answer the questions will be your choice. At any time in the process, you may decline to answer or choose to withdraw from the interview and study. The interview will be audio recorded.

The audio recording of the interview will be subsequently transcribed verbatim. Any identified information, such as your name, address, and institutional connection will be removed from the transcript to protect your privacy. You will be given an electronic copy of the transcript for your review, if you request. At the time of review, you have the right to request that any information be removed from the transcript. You may also decide within two weeks of your interview to withdraw from the study and have your data destroyed.

Personal data that you provide (i.e., name, contact information, location, school) will be stored separately from the interview recording and transcript. This information will not be included in the research study. Furthermore, your information will only be available to the researcher and the supervising faculty of this study. You will be asked to provide an alias for the interview and any data specific to your interview will be stored under your preferred alias.

No participation beyond the interview is required, however, you will be offered the opportunity to read the results of the study one it is completed.

Risks and Benefits (Describe any potential risks or discomforts to the participant).

You may experience increased anxiety or stress leading up to, during, and/or after the interview. You might be reminded of stressful experiences and challenges to completing your

doctoral program. If you experience difficult emotions that require further consultation or therapeutic support, I encourage you to speak to the researcher (myself) at any time of the study. If needed, appropriate referrals will be discussed and given. Any financial charges associated with outside services will be your financial responsibility.

#### USING VIDEO SOFTWARE

Using Skype or Zoom will allow for participation in the study when the researcher and participant are not in the same location. If either software is used, all precautions to protect information will be used. While video data is encrypted, this is not fail-safe, and the researcher cannot be held responsible for the security of a third-party site and cannot offer additional protections above and beyond what the software provides. The researcher will only record the audio portion of the interview. No video components will be recorded or retained. For the purposes of maintaining a comfortable and research–friendly environment for this study, the researcher requests that the participant engages in the interview process in a quiet location with minimal distractions and no other parties present for the duration of the interview.

#### Compensation

No compensation will be provided for participation in this research study.

Your participation in this research is strictly voluntary. You may refuse to participate at all, or choose to stop your participation at any point in the research, without fear of penalty or negative consequences of any kind.

#### Confidentiality and Privacy

The information/data you provide for this research will be treated confidentially, and all raw data will be kept in a secured file by the principal investigator. Results of the research will be reported as aggregate summary data only, and no individually identifiable information will be presented.

#### Limits to Confidentiality

In certain situations, I am required by law as a mandated reporter and the ethical guidelines of my profession to disclose information whether or not I have your permission. The following situations are examples in which I am ethically and legally obligated to break confidentiality:

- You tell me that you plan to cause serious harm or death to yourself, and I believe that you have the intent and ability to carry out this threat in the very near future. If this were to be disclosed, it would be my ethical and legal obligation to engage in safety practices by assessing your current state of being, contact the proper authorities usually resulting in calling emergency services (i.e., 911).
- You tell me that you plan to cause serious harm or death to someone else, and I believe that you have the intent and ability to carry out this threat in the very near future. If this were to be disclosed, it would be my ethical and legal obligation to warn the individual in which the act(s) would be executed upon, as well as contact the appropriate authorities (i.e., 911 and/or the police).
- I have a reasonable suspicion, or you tell me that you are engaging in the abuse and/or neglect of another individual (i.e., child, adult, elder person) physically, sexually,

emotionally, or any combination of the aforementioned. In this situation, I am required by law to report the reasonable suspicion or disclosure of abuse and/or neglect to the Department of Social and Health Services.

You also have the right to review the results of the research if you wish to do so. A copy of the results may be obtained by contacting the principal investigator at the address below:

Antioch University Seattle ATTN: Carmela A. Maxell–Harrison, MA, LMHCA, PsyD Student 2400 3<sup>rd</sup> Avenue, Suite 200 Seattle, Washington

There will be no direct or immediate personal benefits from your participation in this research. However, the results may contribute to the advocacy and revision of and for more culturally inclusive and culturally appropriate practices in the field of psychology.

If you have questions later, you may contact the primary researcher and investigator, Carmela Maxell–Harrison, MA, LMHCA, PsyD Student, at <a href="maxellharrison@antioch.edu">cmaxellharrison@antioch.edu</a>, or Faculty Research Advisor, Dr. William Heusler, PsyD, at <a href="maxellharrison@antioch.edu">wheusler@antioch.edu</a> if there are any questions.

I have read and understand the information explaining the purpose of this research and my rights and responsibilities as a participant. My signature below designates my consent to participate in this research study, according to the terms and conditions outlined above. I understand that this research study has been reviewed and Certified by the Institutional Review Board, Antioch University, Seattle. For research—related problems or questions regarding participants' rights, I can contact Antioch University's Institutional Board Chair, Mark Russell, PhD at <a href="mailto:mrussell@antioch.edu">mrussell@antioch.edu</a>.

Participant Name (printed):		
Participant Signature:	_ Date:	
Participant Phone Number:		
Is it OK to leave you a voicemail message on this phone?	Yes □	No □
In addition to agreeing to participate, I also consent to having the interview audio-recorded.		
Participant Signature:	_ Date:	
Printed name of person obtaining consent		
Signature of person obtaining consent:		Date:

# **Appendix E:**

## **Contact List for Participants**

#### **Contact List for Participants**

This study involves only interviews with experienced behavioral health practitioners, all of whom have graduate degrees and licensure allowing independent practice in their field. If you should have any questions or concerns regarding the study you should be aware of the following resources:

- Primary Researcher: Carmela A. Maxell–Harrison, MA, LMHCA, (360) 551–0595 cmaxellharrison@antioch.edu \_\_\_\_\_
- Antioch University Institutional Research Board 206-441-5352
- Antioch University Seattle administration 206-441-5352[1]
- Washington State Psychological Association 206-547-4220[5]
- Washington State Department of Health HSQA Complaint Intake 360-236-4700

# Appendix F:

## **Project Description**

#### **Project Description**

The interview in which you are requested to participate in will last up to two hours and include a number of open—ended questions meant to stimulate conversation and facilitate coverage of the experience as a doctoral student in clinical psychology as a Black woman.

This study is not intending to generalize the experiences of Black women in this particular situation, but rather shed some light on the situation and highlight any circumstances that may be unique to individuals in this situation. This research is intending to explore what is occurring for Black women matriculating through such a specialized program at predominantly white schools in the United States. Are there challenges? If so, what are they? Is there anything particularly anomalous to the experience?

This study, which is qualitative, will utilize Interpretive Phenomenological Analysis (IPA) as a basis for its structure and approach to data analysis. IPA "aims to provide detailed examinations of personal lived experience" (Smith & Osborn, 2015, p. 41). It is committed to highlighting a phenomenon is a such a manner that it provides such rich detail about each individual account given, "prior to the move to more general claims" (p. 41). Additionally, the investigator/researcher is provided with strategies to bracket off experiences, biases and relationships with the particular phenomenon during individual interviews and analysis, and eventually incorporate prior experience into the final summary.

Five individual interviews will be utilized for this study. The number is intentionally low, per IPA directive, to focus in on the breadth and depth of each interview (Smith & Shinebourne, 2012). Because of the small sample size, this study does not intend to generalize any of the results to Black women in this situation across the board, but rather give life to the subject matter and value each case for its complexity and detail.

My hope is to develop a deeper understanding of the experiences of Black woman at PWIs, specifically in doctoral programs in clinical psychology and highlight themes, and possibly unique aspects of the time spent in this endeavor and its effects on possible future practice. This is just the beginning of a lifelong project.

# Appendix G:

### **Interview Schedule**

#### **Interview Schedule**

- Do you self-identify as a Black female?
- How old are you?
- Are you currently attending/matriculating through a doctoral program in clinical psychology?
  - o If so, what year are you in?
- Is your school a predominantly white institution (PWI)?
- Tell me about your experiences going through a doctoral program in clinical psychology as a Black woman.
- What kinds of feelings, thoughts, and actions do you have that you feel might be unique to your experience?