Exploring the Perception of African Caribbeans in Choosing a Career as a Counselling Psychologist: A Mixed Methods Approach

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By

Ivet Resna White

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Abstract

This mixed method study explored the perceptions of African Caribbeans towards choosing careers as counselling psychologists. 131 (N = 131) African Caribbeans aged 16-55 contributed to this study. Firstly, an online and paper survey questionnaire was designed and administered to (N =121) participants. This comprised of (N = 41) parents; (N = 41) undergraduate psychology students and (N = 39) 16-18 year olds. An ANOVA Test indicated a significant effect between participatory groups. Semi structured interviews were carried out to explore these identified differences. 4 parents; 4 16-18 year olds; and 2 undergraduate psychology students were interviewed. Qualitative data was analysed using Braun & Clarke (2006) thematic analysis. Themes identified as significant across all groups were centred around participants’ perception of psychology; interest or otherwise in studying psychology and choosing it as a career option; knowledge about counselling psychology and choosing it as a career; the participants’ experiences of school; the attraction of particular careers such as sports and music for 16-18 year olds when compared to counselling psychology; the importance of support; attitudes towards mental health and the importance of having role models from the community that are counselling psychologists. Recommendations for the Division of Counselling Psychology, BPS, training and future research are outlined.
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Literature Review
Literature Review Search Strategy

To identify the relevant literature electronic data bases such as PsycINFO, PsycARTICLES, PsycBOOKS, Psychology and Behavioural Sciences Collection, Proquest Nursing and Allied Health Source (Nursing Journals), PubMed were searched. The search engines GOOGLE and GOOGLE Scholar were also used. The following key words were used in searches: the history of African Caribbeans in UK; Black and Minority ethnics in psychology, African Caribbeans perceptions of psychology/counselling; African Caribbeans and mental health; mixed methods in psychology; qualitative research; diversity and Counselling/Clinical Psychology; Counselling Psychology in the Caribbean; Underachievement and African Caribbeans; postgraduate education and Black and Minority Ethnic, thematic analysis.

Additional searches from known groups such as Black and Asian Therapists Network (BAATN), Journal of Black Psychology were also conducted. The University of the West Indies Psychology Division was also contacted (via email) to try and ascertain trends in the Caribbean with regards to counselling and psychology. In an attempt to gather as much data as possible other emails were sent to various parties. Searches for articles deemed relevant were also carried out in journals such as The Journal of Clinical Psychology, Clinical Psychology Forum, The Psychologist, Counselling Psychology Review and The Counselling Psychologist.
African Caribbeans are among the 8.1 million (13% of the general UK population) who classify themselves as belonging to a Black and Minority Ethnic group (BME). Of the 13%, African Caribbeans form 1.1% (594,825) of the 63.7 million who make up the population in the UK (ONS, 2011). Health inequalities among ethnic groups within the UK are well established and although this disparity is said to vary according to ethnicity, research suggests that members of the African Caribbean community fare worse in terms of both long term physical health and as service users in the mental health system (African and Caribbean Mental Health Commission, 2006; Becares, 2013; McLean, Campbell & Cornish, 2003; NICE, 2013; Sashidharan, 2001).

Why African Caribbeans?

One reason for focusing this study on African Caribbeans is the fact that “statistical evidence shows that this community is massively over-represented in the most restrictive parts of mental health services, and in terms of negative experiences” (The Sainsbury Centre for Mental Health, 2002, p.2). For example, African Caribbean men are three to five times more likely to be diagnosed with schizophrenia and other psychoses than both their White and other BME counterparts, despite having lower rates of common mental disorders than other ethnic groups, and are more likely to be detained under the Mental Health Act 1983 (Audini & Lelliot, 2002; Centre for Mental Health, 2013; De Maynard, 2009; Mental Health Foundation; Singh, Greenwood, White & Churchill, 2007). This is disproportionate compared to its size in the general population.

Secondly, studies show that not only first generation migrants but second and third generation African Caribbeans have been diagnosed with mental illness yet many under-utilise services (Edge & MacKian, 2010; Eliacin, 2013; Harding & Balarajan,
A study by Garraway & Pistrang (2010) suggest that African Caribbean boys are among the most challenging group to engage in mental health services in spite of the fact that they are more likely to experience mental health difficulties than White young men due to the fact that they experience increased levels of risk factors associated with mental illness such as higher school exclusion. Lack of engagement has been highlighted as a major contributory factor to the poor mental health outcomes evidenced within African Caribbean communities (McLean et al., 2003). Additionally, the focus of many of mental health studies on this Group has been the excess presentation of individuals living with schizophrenia and psychotic conditions (Arai & Harding, 2004; Edge, 2013).

Thirdly, the researcher’s interest in this area comes from being a woman born in the Caribbean who, prior to commencing counselling psychology training worked as a counsellor for over five years. During this time she witnessed very few Black and Minority Ethnic clients and certainly fewer African Caribbeans who came for counselling or who sought psychological help. This felt at odds with reports that the researcher had read regarding the number of African Caribbeans who were diagnosed with mental health difficulties and distress. The few that sought therapy seemed very surprised and pleased to see someone that was the same colour and whom perhaps they considered being from the same ethnic group and who was the counselling professional.

Use of Terminology

Finally, one of the difficulties in commenting on health inequalities is that the categories used sometimes lack specificity with regard to which ethnic group is being referred to. For example, some studies use the term Black when referring to both Black African and Black Caribbean and although they share the same racial characteristics they are not a homogenous group. They are ethnically and culturally different (Corrigal
Some writers and researchers from Black and Minority Ethnic groups use the term ‘Black’ when referring to people of African and Asian heritage (Keating 2002; McKenzie-Mavinga, 2005) whilst others use it as a means of self-identification. That is showing the people group to which he or she belongs (Adetimole, Afuape & Vara, 2005; Allyene, 2004; Cousins, 2010; De Maynard, 2009). Some of the sources that are used in this research use the term ‘Black’ to refer to a broad ethnic grouping (Asian, African, and Caribbean) either singularly or collectively (Singh, Greenwood, White & Churchill, 2007).

Similarly the term ‘African Caribbean’ is used inconsistently by researchers in the UK (Agyemang, Bhopal & Bruijnzeels, 2005) with some using it when referring to people who are either of West African or Caribbean descent or Black. A clear distinction makes it possible to adequately assess the needs of a particular group of people. Furthermore, differences according to Kenny & Briner (2007) may impact the way that minority ethnic groups are treated in the workplace and focusing on a specific ethnic group may help account for the differences in the levels of workplace discrimination perceived by different ethnic groups. This study seeks to address this issue by being clear in its focus on the African Caribbean community in the UK. In this study, the researcher uses the term ‘African Caribbean’ to describe Black people born in either the Caribbean or in the UK with at least one parent of Caribbean origin (Bhopal, 2004; Douglas, 2014; Sisley, Hutton, Goodbody & Brown, 2011).

Provision of Good Mental Health Care Includes a More Diverse Workforce

Policymakers, researchers and community personnel alike are united in the belief that “achieving good mental health care for individuals from these communities is one
of the biggest challenges for mental health services in England and Wales” (Keating, 2007, p.1). A response from the Department of Health to the inequality in healthcare was a proposal for education and training to be used to promote cultural competence in the workforce as well as recruitment initiatives targeting individuals from all parts of the local community with a view to building a diverse workforce (DOH, 2003). However, despite the total number of BME individual groups in the UK, statistical evidence shows that percentage wise there is a shortage of psychologists from these groups (Griffith, 2007). This study will explore if the recruiting and training of African Caribbeans and other BME individuals firstly to psychology and then to counselling psychology might help in the provision of good mental health care for people from these communities.

**Counselling Psychology – A Possible Career Choice?**

As a recognised profession, counselling psychology exists in Ireland, the USA, Canada, Australia, Hong Kong, Korea, South Africa and the UK (Orlans & Van Scoyoc, 2009). In the UK, it is a relatively new psychological domain. It has evolved from a section within the British Psychological Society (BPS) to full division status between 1982 and 1994 (Pugh & Coyle, 2000; Woolfe, Strawbridge, Douglas & Dryden 2010). According to its professional practice and guidelines, counselling psychologists seek to:

“recognise social contexts and discrimination and to work always in ways that empower rather than control and also demonstrate the high standards of anti-discriminatory practice appropriate to the pluralistic nature of society today”. (DCoP, 2005: clause 4)
As a discipline, one of its salient values is the therapist’s appreciation of the client’s life experiences. Counselling psychology focuses on the beliefs and contexts within which people construct meaning and explores how the well-being of the individual might be affected as a result, particularly emotionally (BPS, 2010; Orlans & Van Scoyoc, 2009). This is a contention for counselling psychologists who are employed within statutory organisations and mental health services in the NHS, where work was often based in a framework that is “dominated by a medical model of distress in which treatment guidelines focus on disorder” (Douglas, 2010, p.24) over the personal experiences of clients (Lewis, 2008; Martinelli, 2010; Pelling, 2004; Woolfe et al., 2010). Counselling psychologists are mindful of the harm that can come from using diagnostic labels, particularly as a means of pathologising an individual. In fact Turner-Young (2003) argued that an increase in diagnostic categories can lead to pathologising normal behaviour. Counselling psychologists “seek to support clients’ control over their lives and their ability to make appropriate decisions;” (Professional Practice Guidelines, BPS, 2005, p. 3) and seek to “make themselves knowledgeable about the diverse life experiences of the clients they work with” (p.7). This places counselling psychology in a prominent position in terms of demonstrating a different way of engaging with African Caribbeans.

Counselling psychology emphasises a value base that recognises the importance of the therapeutic relationship. Counselling psychologists do not “assume the automatic superiority of any one way of experiencing, feeling, valuing and knowing” (Larsson et al., 2012, p.55). This stance has led counselling psychology to be influenced by various philosophical positions embedded within different epistemologies; mainly that of scientist-practitioner and reflective-practitioner. As reflective scientist-practitioners, counselling psychologists draw upon a wide range of therapeutic approaches to attend to different client needs thus reducing psychological distress and promoting the
psychological well-being of the client (BPS, 2014; Gillon, 2007; Larsson et al., 2012). Counselling psychologists are aware that each person is unique and requires a mode of working that recognises it (Ward, Hogan & Menns, 2011). These approaches to psychological therapy although not exclusively, are situated within person-centred, psychodynamic and cognitive behavioural therapy. Each espouses general assumptions regarding human personality, the nature and cause of psychological distress and the role of therapy in addressing it (BPS, 2014; Gillon, 2007; Larsson, Brooks & Loewenthal, 2012; Woolfe, 2012). For the reasons mentioned above, counselling psychology is well placed to work with the mental health needs of people from the African Caribbean community and wider society. However, is counselling psychology a profession that African Caribbeans would choose to go into? Are African Caribbeans even aware of it? The scarcity of research around the attractiveness or otherwise of professional counselling psychology to individuals from the African Caribbean community suggests that this is an area that requires further research. However, due to a lack of representative research regarding African Caribbeans and counselling psychology, the researcher has considered studies that have explored the perception of African Caribbeans towards counselling (BPS website: Careers, 2013; Edge & MacKain, 2010; Ellis, 2012; Greenidge, Daire & Lewis, 2012).

Williams, Turpin & Hardy, (2006); Turpin & Fensom, (2004); and Meredith & Baker, (2007); investigated the attractiveness of psychology and clinical psychology to BME individuals. They referred to parents’ perception of psychology but no study was done to ascertain this. Instead, the participants from these studies (undergraduate students) gave their interpretation of what their parents might say. Williams et al. (2006) concluded that exploration around the perception that school leavers, influential members of their communities and their families have about psychology would be
beneficial to the profession. Such perceptions might help in the targeting of information in order to enrich the recruitment of BME individuals to the profession.

As mentioned, studies in the UK pertaining to the experiences and number of Minority Ethnic psychologists have focused on clinical psychology and not counselling psychology. Additionally, most of the current psychological research relating to this issue emanates from the United States (Killion, 2007; Flicker, Waldron, Turner, Brody & Hops, 2008). Drawing on research from the US is helpful in that it will show the wide breadth of the issues within this context and proposes ways in how these are being addressed. However, applying theories developed in other countries has its limitations. For example, there are significant cultural differences; the delivery of healthcare services is not the same in the UK as in the US. Caution in terms of generalising is therefore required. Drawing on research from clinical psychology provides a reference point to work carried out in the UK. Studies from clinical psychology in the UK have shown that minority ethnic groups on the whole are “excluded from, marginalized, and either unable or unwilling to access mainstream clinical psychology services” (Williams, Turpin & Hardy, 2006, p.325; Daiches, 2010; Hickling, Mckenzie, Mullen & Murray, 1999). The reasons for this are varied but principally point to the profession’s lack of success in providing a service that is sufficiently sensitive, relevant and attractive to the needs of a multicultural society. The development of such a service requires that all staff is trained in the relevance of understanding and responding to diversity as well as recruiting staff from Black and Minority backgrounds (Williams et al., 2006; Joseph Roundtree Foundation, 2004).

**Purpose of the Study**

The purpose of this study is to address some of the gaps in current research. The researcher will seek to:-
Explore the perceptions that 16-18 year olds, undergraduate psychology students and African Caribbean parents hold about counselling psychology as a career choice;

Explore the relationship between education, counselling psychology and the African Caribbean community;

Explore whether parental choice is a significant factor in the career choice of their children.

In terms of making a contribution to counselling psychology, it is hoped that this study will raise awareness within the profession and provide suggestions that will be helpful in attracting more African Caribbeans and other BME individuals to counselling psychology.

**Experiences of Some BME Psychologists**

Previous research (BPS, 2004; Fleming & Daiches, 2005; Nadirshaw, 1993; Scior, Gray, Halsey & Roth, 2007; Turpin & Coleman, 2010; Williams, Turpin & Hardy, 2006; Wright, 2008) addressing the under-representation of BME psychologists within mental health services in the UK has, in the main, focused on the shortage within clinical psychology. A number of these studies were carried out by Minority Ethnic individuals documenting their experiences as trainees. For example Rajan & Shaw (2008) reported that trainees became aware of and were uncomfortable with the ethnocentricity of mainstream psychological theory but struggled to challenge assumptions due to fear of being labelled, misunderstood and perceived negatively. Ethnocentrism is a term coined by Sumner (1906) to denote a tendency “to use one’s own group standards as the standard when viewing other groups, (and) to place one’s
group at the top of a hierarchy and to rank all others as lower” (Berry, Poortinga, Marshall, Segall & Dasen, 2002, p.8).

On reflecting on their training experiences, Adetimole, Afuape & Vara (2005) described difficulties regarding their professional and personal identities as they initially embraced the dominant group values which were Caucasian but later focused on re-establishing their identity as Black women. A number of studies referred to trainees being positioned as experts on matters of culture, race and diversity (Rajan & Shaw, 2008; Shah, 2010; Thakker, 2009) yet trainees expressed poor self-efficacy, believing that academic staff viewed them as academically inferior (Scior, Gray, Halsey & Roth, 2007).

The above presents some interesting and important findings in terms of the experience of BME trainees as it offers insight into clinical psychology training and yet it does not clarify what initially attracted the trainees to the profession. The article by Adetimole et al., (2005) gave a good account of their respective experiences which involved their consideration to leave the profession but one cannot help but wonder whether that has been the experience of all Black trainees as they seem to imply. In terms of counselling psychology research and the purpose of this study it would be ‘putting the cart before the horse’. From a methodological standpoint the general use of the BME category in the studies proved difficult to distinguish between the various ethnic groups. In order to know whether all the participants’ experience was the same, it would have been helpful to know the ethnicity of participants used in the qualitative findings.

In writing a research paper about a particular topic or group of people it is incumbent to know something of the history or background of that group. This viewpoint fits well within the ethos of counselling psychology. With this in mind, a brief
synopsis of the people, their migration to the UK along with some details about the experiences of first generation migrants to Britain is provided.

**The People**

The Caribbean is home to a diverse mix of people. Many African Caribbeans trace their roots to Africa due to the forced migration of African Slaves during Atlantic Slave Trade but are of Caribbean heritage (The National Archives). African Caribbeans live throughout the UK but the larger groups live in cities like London and Birmingham (Sainsbury Centre for Mental Health, 2002; Kenny & Briner, 2007). Significant groups can also be found in Manchester, Luton, Bristol, Nottingham, Gloucester, Huddersfield, Leeds, Sheffield, Cardiff and Croydon (Cabinet Office Strategy Unit, 2003; ONS, 2011).

**Migration to Great Britain**

The Caribbean was part of the British Empire and its people were recruited by the British Government for military service during both World Wars. Due to the losses from the War and the rise of newly nationalised industries such as British Rail, London Transport and the National Health Service; the British Government encouraged people from the Commonwealth and British Empire to migrate to Britain to join the workforce and to help rebuild the country (Chater, 2011; Sutherland, 2006). Large scale migration from the Caribbean countries to the UK began in the 1950s and by 1962 there were around 250,000 African Caribbean migrants who had settled permanently in the UK (Plaza, 2000).

**Life in the Motherland**

Although African Caribbeans arrived in the UK at the invitation of the British government, life was extremely difficult for them. They experienced prejudice,
intolerance and racism from many parts of British society. Obtaining housing and employment were some of the difficulties they faced. Many found themselves living in cramped conditions, yet paying extortionate rent. Learning to cope with racism and issues pertaining to colour of skin proved difficult (Tomlin, Wright & Mocombe, 2014; Wray & Bartholomew, 2006) and the hostile environment that first generation African Caribbeans faced shattered their expectations as to how life in the “mother country” was going to be (Eliacin, 2013, p. 469). Like many other immigrants African Caribbeans were forced to take menial work even though the early immigrants were qualified in various skilled trades. There was the assumption that they did not have the mental capacity to take on low-level managerial roles. Employers at the time thought that the migrants were only suitable for manual labour (Plaza, 2000).

Much research (Campbell & McLean, 2002; Sutherland, 2006; Dabydeen, Gilmore & Jones, 2007) has provided insight into the early experiences of the migrants to the UK. Also documented is the range of policy documents that were implemented in an attempt to end discrimination against African Caribbeans (Scarman, 1981; Skellington & Morris, 1992 cited in Sloman 2005; DOH, 2003; DOH, 2005). The mental health needs of African Caribbean people are an area of public concern and have been for almost 30 years. Referring to African Caribbean families, Fatimilehin & Coleman (1998) spoke of the “significant social, political and economic disadvantage” (p.6) that these families experienced.

**Historical Perception of Black People**

The birth of Western psychology emerged around the time of 19th century popular Darwinian thinking. At that time overt racism was prevalent. With the abolition of slavery in the USA ex-slaves and masters were adjusting and searching for new ways of communicating and interacting. Darwin’s survival of the fittest was used as the
rationale for promoting racial superiority and inferiority (Dabydeen, Gilmore & Jones, 2007; Report from the Division of Educational and Child Psychology Working Party, 2006). Referring to Robert Guthrie’s (1976/1998) book, “Even the Rat Was White”, Belgrave (2009) posits that Guthrie gave a candid summary of the historical treatment of Black people by psychology professionals, beginning with the role of Europeans in perpetuating theories of racial inferiority, through to the role of American Scientist’s contribution to scientific racism. The overall conclusions of these studies carried out during the 20th century were “that Blacks were intellectually inferior to Whites, more psychologically dysfunctional, and had more social and behavioural problems” (Guthrie, 1976/1998 cited in Belgrave, 2009, p.2; Kenny & Briner, 2007).

Has anything changed over the years? In today’s society the above studies would be outlawed but racial stereotypes still exist and in fact some BME researchers suggest that part of the ‘issues’ that need to be considered is the “impact of social history on the personal development of both black and white counsellors and clients” (Mckenzie-Mavinga, 2004, p. 2; Adkinson-Bradley, Maynard, Johnson & Carter, 2009). What is being referred to is the impact of colonialism, slavery and racism on the psyche of the Caribbean person (Frey & Black, 2012; Turner, 2009; Ward & Hickling, 2004).

Slavery was abolished 150 years ago. What purpose does it serve to still make reference to it in the context of African Caribbeans? Frey & Black (2012) lay some responsibility upon the legacy of slavery on the psyche of the African Caribbean both in the Caribbean and further afield. At the time, slavery was morally justified by the slave traders because they refused to classify Black people as human beings; choosing rather to describe them as “the most ignorant and unpolished people in the world, little better than lions, tigers, leopards, and other wild beasts, which that country produces in great numbers” (Dabydeen 1987, p. 30). Black people were viewed as property or goods to
be sold (Thompson, 2010). Some writers argue that mentally and socially, Black (African Caribbeans included) people still carry the scars from the experience of slavery even though they are five or six generations removed from the experience of slavery, and that the trauma of slavery on individuals can cause long term psychological distress (Ackbar, 1996 cited in Mckenzie-Mavinga, 2004; Smith, 2000; Ward & Hickling, 2004).

The harsh treatment of African Caribbeans is sometimes seen as analogous to ways in which their African ancestors were treated as slaves, with similar impacts on self-esteem. What might that mean? Among the findings from research commissioned by The Sainsbury Centre for Mental health (2002), it was stated that: “mainstream services are experienced (by people from the community) as inhumane, unhelpful and inappropriate” (p.4).

**African Caribbeans and the Mental Health System**

All individuals seeking to access mental health services will face barriers at some point; however, individuals from BME backgrounds and in particular African Caribbean men face additional barriers. Discrimination and disadvantage personify the experiences of many African Caribbean men (DOH, 2009, 2004). Research commissioned by the Department of Health shows that “rates of admission to inpatient mental health units, and rates of detention, continue to be higher for ‘Black African’, ‘Black Caribbean’ and ‘Black Other’ groups than for other population groups” (Sewell, 2012, p.4.). This is despite its own statement which postulates that service users can expect a service that is non-discriminatory and that delivering race and equality in mental care plan has been set up to ensure that access to psychological therapy is not hindered by an individual’s ethnicity, faith or culture (Appleby, 2007; DOH, 2009). Similar findings were outlined by Shaikh (1985 cited in Haworth, 1998) where a higher proportion of individuals diagnosed as psychotic were found to be of Asian heritage compared to their White
counterparts. Sashidharan (2003) points out that differing treatments and diagnoses are not simply determined by skin colour; Irish people have appeared more likely to be at risk of psychiatric hospital admission as well as suicide and attempted suicide.

**Referral of African Caribbeans to Mental Health Services**

For Black men in the UK, the outlook for mental health according to Channelle & Gannon (2013) does not appear good. They are more likely to enter mental health services via the criminal justice system rather than their GP; are compulsorily admitted to psychiatric services more than their White counterparts, are less likely than White service users to be offered psychological therapy (Brooks, 2009; De Maynard, 2009; Keating 2005; Lowe, 2010) and are more likely to be given medication as a first form of treatment (Bhui & Bhugra, 2002; Keating, 2007; Morgan et al., 2005).

The reasons for this appear unclear and Maginn et al., (2004) concede that very little study (into common mental illness among African Caribbeans) have been carried out and of those carried out, the issue of GP’s detecting psychological problems with BME’s and African Caribbeans have proved inconclusive. A UK population based study of first-episode psychosis was conducted by Aetiology and Ethnicity in Schizophrenia and Other Psychoses (AESOP). The findings showed that more African Caribbean family and friends initially sought help from the police than any other ethnic group (Morgan et al., 2005). This report appears to attribute a lack of knowledge about mental illness, and the over stigmatisation of mental illness within the African Caribbean community as a contributory factor in terms of how early symptoms and behavioural disturbance are interpreted. Other studies (Boi, 2000; Campbell et al., 2004; Keating, 2007; Keating & Robertson, 2004; Sloman et al., 2005; Street, Stapelkamp, Taylor, Malek, & Kurtz, 2005) depict a lack of awareness regarding sources of help and being able to identify mental health needs.
That being said, a probable factor might be that African Caribbeans, who were compulsory admitted, were less likely to keep appointments prior to admission, did not comply with taking medication and were more likely to be admitted from home because no prior contact had been made with their GP (Oluwatayo & Gaytor, 2004). Furthermore, stereotypical views of African Caribbeans as irrational, threatening and aggressive in their behaviour could be perceived as a reason for administering medication first in that it was used to control clients’ perceived behaviour (McLean, Campbell & Cornish, 2003). The dichotomy is a mis-interpretation of normal modes of behaviour, common in African Caribbean communities but which may seem overly loud or extrovert to outsiders (Lowe, 2006; Rathod, Kingdon, Phiri & Gobbi, 2010; Wright, Standen, John, German & Patel, 2005). Other studies suggest that if offered, African Caribbeans are more likely to refuse psychological help because, “Black people do not trust mental health services and those who work within them fear them” (Keating, 2007, p6). According to Thomson, Bazile & Akbar (2004) psychologists are aware of the dilemma but often struggle with how and when to address issues of race, culture and ethnicity and its impact on the therapeutic process. Language can be a further barrier to accessing therapy for many from the BME community.

Differences in terms of experience of care and access to services have also been noted for African Caribbean women. Whilst schizophrenia is frequently diagnosed among African Caribbean men, statistical studies show that African Caribbean women are less likely to receive a formal diagnosis and treatment for depression or anxiety than their White counterparts (Lloyd, 1993), even though African Caribbean women are more likely to have a higher rate of undiagnosed depression than their counterparts (Adkinson et al., 2009; Edge, 2013; Edge & MacKian, 2010).
Research conducted in the US (Thompson, Bazile & Akbar, 2004) showed that African Americans perceived that it would be extremely difficult for mental health workers (psychologists) to remain unbiased from societal stereotypes that saw them as ‘crazy’ (p.23) when it came to administering treatment or therapeutic work. In the UK, Keating, Robertson, McCulloch & Francis (2002) reported that ‘circles of fear’ (p.9) exist within the African Caribbean community and that prevented them from engaging with mental health services. They argued that African Caribbeans and Africans make associations between mental illness and being detained in hospital and receiving involuntary treatment in a confined environment where their needs are not being adequately met. This was said to result in a reluctance to seek help or to engage with treatment.

The above study set out to review the relationship between mental health services and the Black African and African Caribbean communities and was conducted in stages. It focused on the experiences and views of service users, carers and staff who were working in the various mental health sectors. Focus groups formed part of the process and two interviews and follow up sessions were used for this; one appeared to consist of more professionals than service users. It aimed to find solutions for a perceived problem that already existed. The problem appeared to be raised by members of the Sainsbury Mental Health Team working with service users rather than, it seems, service users themselves. Focus groups rely on assisted discussions to produce results and the facilitation of the discussion via a moderator is crucial. The fact that the problem being studied was raised by staff members and participants were selected by gatekeepers, who knew service users and their families, creates the potential for a study that becomes biased.
A Consequence of Lack of Engagement with Mental Health Services

Notwithstanding the above, the reported reluctance to seek help and lack of engagement means that African Caribbeans come to the attention of mental health service when they are already in crisis. This would often lead to compulsory admissions which would then reinforce the ‘circle of fear’ (Oluwatayo & Gator, 2004). With a number of high profile deaths that have occurred among Black detainees (Keating, 2007; Rabiee & Smith, 2007), the possible lack of trust on the part of African Caribbeans and the potential fear from mental health workers means a lack of engagement on both sides with little progress being made (Keating, 2002, 2007). The implications are huge for the emotional and psychological wellbeing of any individual. The end result can be a spiral that might seem never ending. The diagram below clearly demonstrates a possible effect of non-engagement and it highlights the importance of raising awareness in order to bring about change.

Figure 1
Perceptions of Mental Health Services by African Caribbean Men.
(Copied from African and African Caribbean men and mental health, Keating, 2007).
Other factors that contribute to lack of engagement are stereotypes held by African Caribbeans themselves. Perceptions of the ‘strong black person’ and cultural traditions of not “chatting your business” (Ellis, 2012) particularly not to someone who is perceived as lacking cultural awareness and/or understanding, are contributory factors in not seeking psychological help for some BME individuals and African Caribbeans. “Chatting one’s business” is done within the community, in places such as the barber’s shop, within families and through prayer (DOH, 2004; Patterson, 1996; Shallcross, 2010; Sisley et al., 2011). Some researchers allude to the fact that African Caribbean men and women have difficulty in admitting and expressing their emotional distress (Sisley et al., 2011; Turner, 2009). Research evidence from the mental health charity MIND shows that the high numbers of Black people within mental health care services provides evidence that cultural prejudice and racism may play a part and impact both the referral and assessment procedures.

There is evidence of good practice that is being carried out among African Caribbeans and other BME communities in terms of making care “more therapeutic and less restrictive” (Keating et al., 2002, p.13); but there is a plethora of researched evidence that shows that there is still a significant gap in this area (Williams, Turpin & Hardy, 2006, p.325; Sewell, 2012; Patel & Fatimilehin, 2005; DOH, 2003b). According to Baker et al. (1997) preventative work is important in terms of the experiences of individuals but also the cost effectiveness of the service. It is far easier either to capture a problem at early onset or to prevent it from occurring in the first place rather than trying to resolve it once it is embedded (Blair 1992; Baker, Gilbody, Glanville & Press, 1997 in Fatimilehin & Dye, 2003).

One of the ways in which preventative measures can be implemented is by partnership working between the community and mental health services. What might this look like in practice? A report entitled “Inside Out” (2003) commissioned by the
Department of Health concurred that provision for change with regard to the treatment of BME individuals within mental health requires an inclusive approach. This would involve policy makers, politicians, “service providers from both statutory and voluntary sectors, service users and carers and most importantly, black and minority ethnic communities themselves” (p.5).

**Diversity**

Diversity is a socially constructed concept. It acknowledges the presence of difference (Greene, 2005). Evolutionary Psychologists tell us that the human mind does not find it easy to negotiate differences. Marsella (2009) argues that the human brain’s response to differences is usually alarm, sometimes attack and arousal. This state of hyper vigilance continues until the differences can be processed through mastery, reason or exposure. Difference is attributed to a myriad of things including the colour of a person’s skin; their physical, mental and emotional ability, age, ethnicity, gender, national origin, race, religion, language, sexual orientation, socio-economic status. The term is also used when discussing the multicultural nature of society (Gordon & Hall, 2006; Greene, 2005; Gurpinar-Morgan, 2012).

**Ethnic Diversity**

Although all forms of diversity are important, the focus of this study is on ethnic diversity. To do this, consideration also needs to be given to ethnicity. It is a concept used when discussing the multicultural nature of society. Ethnicity has been used to describe people who have “shared origins or social background; shared culture and traditions that are distinctive, and maintained between generations…, and a common language or religious tradition” (Gill, Kai, Bhopal & Will, 2004, p.228). Some theorists have criticised the term ‘ethnicity’ as lacking a clear theoretical framework (Kenny & Briner, 2007; Mason, 2000; Phinney, 1996). Smith (1986), exploring ethnicity from an
African perspective, described it in terms of how individuals perceive themselves but also how one is viewed by others as different based on their culture. Others define it from a perspective broadly based on social identity theory concepts, describing it as: "that part of an individual's self-concept which derives from his knowledge of his membership of a social group (or groups) together with the value and emotional significance attached to that membership" (Tajfel, 1981, p.255, cited in Phinney, 1990).

**Why Ethnic Diversity is Important**

Cohesiveness, diversity and inclusivity are words often used in relation to society in the UK and further afield. Recent research predicts that Britain will be the most ethnically mixed country in the Western World in less than 40 years (Rees, Wohland, Norman & Boden, 2012). Aside from a concept of equality and fairness, there are practical reasons for promoting greater diversity within the workforce of mental health practitioners. Reasons such as “(1) advancing cultural competency, (2) increasing access to high quality health-care services, (3) strengthening the medical research agenda, and (4) ensuring optimal management of the health care system” (Hills-Briggs, Evans & Norman, 2004, p. 14) are but a few. Providing services to meet such needs is one that the National Health Service (NHS) seeks to provide. A Government report commissioned in 2003 to identify the level of inequalities in service outcome and experience of BME individuals noted that:-

“There does not appear to be a single area of mental health care in this country in which black and minority ethnic groups fare as well as, or better than, the majority white community. Both in terms of service experience and the outcome of service interventions, they fare much worse than people from the ethnic majority” (Sashidharan, 2003, p.10).
To combat this level of disparity, one of the main objectives outlined by the NHS is to provide a “workforce and organisation capable of delivering appropriate and responsive mental health services to BME communities” (Wilson, 2010, p.5). That is providing a workforce that reflects the ethnic and cultural make up of those to whom it delivers a service (DOH, 2002, 2003; Sewell & Waterhouse, 2012). However, there is a plethora of evidence that shows that despite the rhetoric and effort there is still much to be done. The NHS itself is the biggest employer of allied health professionals. Its workforce consists of 1.4 million people, yet within it there are wide variations of diversity. For example, only 7% of NHS managers and senior managers come from a Black and Minority Ethnic background. Of those, many report being bullied and harassed and are subjected to more disciplinary measures than other staff members (Sallah, 2010). Research carried out within the NHS concluded that diversity and equality policies would make a difference in the workplace and, although respondents felt diversity was important to the NHS, some felt that it was not working hard enough to promote diversity (Bogg, Sartain, Wain, Pontins & Gibbons, 2005).

**Ethnic Diversity in the Work Force**

The lack of diversity in the workforce is a problem spread across many professional organisations. For example, research pinpoints the shortage of Minority Ethnic people seeking a career working in personnel departments, working in public libraries and within the construction industry, to name a few (Missa & Ahmed, 2011; Ross, 2003; Williams & Nicholls, 2009).

**Counselling Psychology and Diversity**

In 2010 counselling psychology was reportedly the fastest growing society membership making it the third largest division within BPS (BPS, 2011). Despite rising trends for counselling psychology, figures obtained from the Division indicated that the
number of known African Caribbean counselling psychologists was relatively small with 25 (1.1%) women and 2 (0.3%) men. The graph below depicts the number of known Counselling Psychologists along with the number of African Caribbean counselling psychologists.

Figure 2

*BPS Membership and Number of African Caribbean Counselling Psychologists*

As previously stated, “mainstream mental health services in the UK have a longstanding history of failing the needs of Black and minority ethnic communities” (Keating, 2002, p9). Discriminatory practices have been a hallmark of that failing (Ellis, 2012; Keating, 2007). The question is, can counselling psychology distinguish itself from other forms of mental health provision? How does it make itself known in order to become a viable career choice for African Caribbeans?

Since 2007, counselling psychologists are required, once qualified, to become registered members of the Health and Care Professions Council (HCPC). Contacting them to ascertain a total number of registered counselling psychologists who identified themselves as African Caribbean proved unsuccessful as they do not release the ethnicity data of their members. The reason for this was neither given nor pursued at
that time. However, knowing the total number of psychologists across the various
disciplines is important in terms of the profession’s ability to deliver a service that
meets the needs of its service users but also, if data is not available, it becomes
detrimental to the ability of the profession to implement planning for the future (Centre
for Workforce Intelligence, 2012).

The way in which counselling psychology is perceived, and its relevance to the
African Caribbean community as with other BME groups, will affect the level of access,
benefit and interaction that these communities make with applied psychologists (Turpin
& Fensom, 2004). The desire to have a workforce that reflects the community it serves
recognises the importance of recruiting, training and retaining staff of the same cultural
background (DOH, 2003; Greater London Authority, 2005). How then does the
discipline of counselling psychology in the UK fares in terms of the issue of ethnic
diversity particularly if it is to recruit and train more counselling psychologists from the
African Caribbean and other BME communities?

Moller (2011) argues that counselling psychology in the UK has “an overly rigid
and often over identification with phenomenology and humanistic values” (p.8), rather
than a commitment to diversity. Moller differentiates between the identity of
counselling psychology in the US and in the UK. She comments on the fact that a
commitment to diversity and multiculturalism is explicit in US counselling
psychology’s philosophy rather than phenomenology. The serious nature of this stance
is also reflected in the counselling psychology model training value statements on
diversity. The statements that have been ratified by organisations that form part of the
core discipline of counselling psychology in the US outline values related to diversity
that trainers and trainees alike are expected to adopt. The work of trainers on training
programmes is stringently examined to ascertain if the courses recruit, retain and
promote diversity in the staff as well as how far the course curriculum promotes diversity.

It is interesting to note that in the US studies suggest that counselling psychology programmes emphasise diversity more than clinical psychology do in terms of the recruitment of Minority Ethnic students and having a focus on research of the afore mentioned group (Beechtoldt, Norcross, Wyckoff, Pockrywa & Campbell, 2001). It is helpful to have an understanding of the way in which the US is tackling diversity within counselling psychology but caution is required. Arnett (2008) investigating psychological research published in the American Psychological Association (APA) journals raises concern regarding the importance that people from the world of psychology generally place on American psychological research findings. He asserts that theories and principles are developed that are sometimes perceived as universal and consequently used as a benchmark for dealing with the emotional, social and cognitive function of individuals. Yet these studies are based on only 5% of the world population – America. Research on the whole of humanity is necessary to create a science that is representative of all people. This study focuses on African Caribbeans. Conducting research specifically for African Caribbeans might mean using measures and assessment tools that have been validated on that said population in order to develop theories that are pertinent and culturally relevant to that group (Patel & Fatimilehin, 2005). This would demonstrate that the data gathered would be used for the good of that people group (Ball, 1991, cited in Moodley, 2003).

**The Department of Health: A Response to Ethnic Diversity**

The National Service Framework for Mental Health (1999) was a government wide initiative to reduce unacceptable variations in how services responded to individual needs and to raise the quality of that service regardless of gender, sexual orientation,
race, religion, culture or disability. As a result of the initiative, a Department of Health, Home Office and BPS survey was conducted in 2002 to ascertain the number of applied psychologists working in the NHS, Prison and Probation Service (BPS, DOH, 2005). The largest group of applied psychologists who took part in the survey were clinical psychologists who worked predominantly in the NHS. The overall picture from the survey showed that even though the number of psychologists who were from Minority Ethnic Groups showed an increase in the lower age bands, it was still lower than the UK population level. The survey highlighted a workforce that was in the main young, female and White clinical psychologists.

A report co-authored by the British Psychological Society and the Division of Clinical Psychology was therefore commissioned looking at the career paths of psychologists from undergraduate studies to postgraduate training to ascertain what some of the potential barriers to a more diverse health and social care work force may be (Fielding & Miller, 2004 cited in Turpin & Fensom, 2004). The report had two main aims. Firstly, it reviewed how diversity was reflected in the make-up of professional psychology. The report investigated the popularity of psychology at undergraduate level for different ethnic groups and issues related to disability and gender. Secondly, it assessed whether the popularity of the subject at degree level influenced the recruitment and training of clinical psychologists in the NHS (Turpin & Fensom, 2004). Findings confirmed that at undergraduate level, psychology was the most popular discipline compared to other health related professions for all students including BME individuals.

Like their White counterparts, psychology was most popular among young, female BME students. However, BME students were less likely to be offered a place on the clinical psychology training programme. The report indicated that predominantly female and white students were recruited on to the clinical psychology training programme (Turpin & Fensom, 2004). The report also indicated that the destinations of BME
psychology graduates were lost once they graduated. Even more surprising, there was little evidence from this report to suggest that the debate progressed to individuals studying at doctoral level and it is training at this level of competence that is the entrant point to becoming a psychologist in the UK (Leonard et al., 2008; Murphy & Monsen, 2008). Reporting of the results showed general terms for BME groups rather than individual groups. Moreover, no reporting was made regarding African Caribbeans.

Although the aim of the report was to establish the popularity of psychology with a view to recruiting and training BME students to join the Health Service, this report did not ascertain what their perception about psychology as a subject was; neither did it explore their perceptions regarding a career in clinical psychology. Even though this omission was made, other research pertaining to career aspirations of some BME individuals identified a restriction in the choice of professionally related courses with preferences shown to careers such as business studies, law or pharmacy (Darr, 1998).

Some Divisional Responses to Ethnic Diversity: The Division of Clinical Psychology

The shortage of psychologists from the BME community is not a new issue. Davenhill, Hunt, Pillay & Harris (1989); Newland (1998) (as cited in Turpin & Fensom, 2004), questioned this over 20 years ago. Whilst reviewing the selection of BME applicants for clinical psychology training they complained about the lack of reliable data regarding the ethnic profile of applicants to both undergraduate and postgraduate psychology courses. They made a number of recommendations which, if adhered to, would widen access to psychology training courses. Some of the recommendations stated that ethnic minorities should be included in the selection process and be involved in reviewing the content of course materials. Similar concerns about the lack of diversity in the profession were put forward by Bender & Richardson (1990).
Until recently little, if any, progress had been made by the profession to implement these recommendations. Reviewing progress on diversity over the last five years, Turpin & Coleman (2010) posit that nothing much has changed. The exception has been the work of the Race and Culture Special Interest Group within Clinical Psychology. Its Training and Strategy Group has seen the issue of diversity become a key theme in the trainers’ conference of the 2002 Clinical Psychology Conference (Williams, Turpin & Hardy, 2006) and a briefing paper containing information about recruiting BME individuals into clinical psychology and outlining services for BME has been compiled (Turpin & Coleman, 2010).

Furthermore, a study by Meredith & Baker (2007), using Q methodology, which seemingly appeared to address the paucity in research regarding the perceptions and attractiveness of clinical psychology to Minority Ethnic individuals was conducted. The study examined the incentives and negatives of choosing a career in clinical psychology from the BME community. In this study Minority Ethnic groups are broadly categorised. For example, African and Caribbeans were combined but only one African Caribbean student participated from 37 volunteers.

The main feature of Q methodology involves participants being given a predetermined set of statements (known as the concourse) that are relevant to the research question. Participants are asked to sort these on a rating scale along a grid (Caswell & Baker, 2008; Haworth, 1998). Using Q methodology is time consuming both in developing the concourse and gaining understanding if unfamiliar to the participants. A further criticism of this methodology is the possible length of time involved in distinguishing the statements as well as the amount of statements that the researcher has to produce in order that a wide selection of participants’ points of view can emerge. The statements are ranked on a rating scale but because they are predetermined it is difficult to elicit moment by moment responses that might occur when conducting an
interview, for example, being able to probe for meaning to a particular statement that a participant might make.

Despite criticisms identified here, findings from this research concurred with previous research (Wright, 2008) in that participants perceived that there would be difficulties in accessing clinical psychology courses as well as the lengthy training. The Eurocentric versus ethnocentric views of psychology were raised. Evidence indicated that there was ‘community disapproval’ (p 484) surrounding clinical psychology as a career choice. If a person became a clinical psychologist it was felt that the community may view the person as a ‘snoop’ (p.484); that is someone who seeks out private matters with a view to making it public. Families struggled with the concept of viewing it as a valid career choice. It was reported that some families perceived psychology as involving “too much thinking and a waste of time” (p.484).

Within the Division of Occupational Psychology (UK) a working group was also set up. One of the areas discussed in the group’s inaugural meeting was the limited quantity of UK based research on the role of ethnicity in work behaviour. Of the research available, it was noted that organisations still struggled to attract, recruit and retain BME employees (Wyatt & Briner, 2010).

Counselling Psychology: A Response to Ethnic Diversity

There is a dearth of research on this issue within counselling psychology UK but despite that, Milton (2011) refutes the claim made by Moller (2011) that diversity is a new concept within counselling psychology in the UK or that the discipline shows a lack of engagement in the debate. He readilycatalogues a number of articles written on the subject as well as outlining the Division’s guidelines regarding diversity over the years. Whilst agreeing that ‘re-engagement’ (p.88) with diversity is necessary, he objects to the abandonment of counselling psychology’s humanistic and phenomenological perspectives. In his response to Moller (2011), Milton (2011)
reminisced about counselling psychology’s past engagement with the topic of diversity and held it up as an achievement to be proud of. However, it appears that the time is right to formulate new strategies and different ways of working and there has been a move within the Division to publicly address this issue and a document regarding culture and diversity has been produced (BPS, 2013).

Can the Division galvanise the known African Caribbeans and other BME counselling psychologists together with the Black and Asian Counselling Psychologists’ Group (BACPG) to think more about specific training needs that this group may have? Furthermore, counselling psychology needs publicising. For example, a joint publication by the Higher Education Careers Service Unit and the Association of Graduate Careers Service Unit entitled “What do graduates do?” (2012), which collates and publishes tables, graphs and information about what graduates do after graduation, had no mention about counselling psychology, even though both clinical and educational psychology were mentioned specifically.

The Fight for Divisional Status: Parallels in the Struggle

The emergence of counselling psychology as a discipline has not been without its struggles. To receive Divisional status members had to put up a fight. Counselling psychology was not seen as a “defined area of practice and discipline” (Woolfe, 2012, p.74). Members were encouraged to form a special group, a halfway juncture between a scientific section and a professional division that in time led to the formation of the division. In parallel, African Caribbeans and other BME individuals have been struggling to get their voices to be acknowledged and heard. Aspects of that voice are about having open dialogue around the inclusion of “black issues” in the discussion forums and a part of clinical training (Mckenzie-Mavinga, 2004). An increase in counselling psychologists from the African Caribbean community can serve in both
working with individuals, as well as being involved on a leadership level, to help to bring about change and also to be a representative voice for the Black and Minority Ethnic community.

The Clinical Leadership Competency Framework (CLCF, 2011) was commissioned by the NHS National Leadership Council. It is founded on a concept of shared leadership coupled with delivering a good service to clients. It has five domains: (1) Demonstrating personal qualities (2) Working with others (3) Managing services (4) Improving services and (5) Setting direction. All are of equal importance and they provide a standard in which a career as a counselling psychologist in a leadership role could affect the experiences of African Caribbeans and all other service users. To do this, however, individuals from the community need to be firstly recruited to psychology, secondly to the profession of counselling psychology and thirdly cultivate an interest in conducting psychological research so that an evidence base of culturally informed research can be built up which in turn will inform clinical practice and “...be used in a positive way to bring about change” (Ball, 1991, p.40-41 cited in Moodley, 2003; Farooq & Abbas, 2013; Patel & Fatimilehin 2005).

**Cycle of Change**

The cycle below is a proposal whereby African Caribbeans’ interest in psychology can be aroused, and where suitable cultural practices can be considered. This will include awareness of services, which in turn makes it easier for therapy to be accessed and, highlights the benefits of counselling psychology which promotes postgraduate study and in turn sees more African Caribbeans accessing services which helps in the process of early intervention.
This is an idealistic framework for African Caribbeans. There is much groundwork that is needed for such a paradigm shift to occur. The idea of a therapeutic community that is able to reflect the diversity of its population is one that is called for by various bodies and voluntary groups. Ellis (2011) espouses what he calls “a rainbow-coloured therapeutic community” (p.188). Rainbow-coloured is a term that was used by Nobel Prize winner Desmond Tutu to encapsulate South Africa’s diversity as a nation. This therapeutic community in the UK would consist of allied and state registered professionals who would provide a primary care service that is “fit for purpose” (p.189) for BME individuals.

How Can Psychology Help Itself?

Understanding people is paramount if there is to be a service that is fit for purpose and psychology is a vehicle that can help with this because psychology is a ‘self-reflecting subject’ (Hylton, 2010, p.8). It is the scientific study of people, the mind and behaviour (BPS, 2013). It is a science that explores how individuals make sense of the
world, others and themselves. Valuing diversity is consistent with the profession of psychology as set out by the BPS Code of Ethics and Conduct (2009).

As a subject to be studied, psychology in the UK is very popular. It has been described as personal, engaging and relevant as well as “having the potential to produce a “WOW” factor (Banyard, 2013, p.11; Briefing Paper, BPS, 2013). Similarly, studies show that psychology is viewed positively in the Caribbean by academics and lay people alike. Although a fairly new development to the Caribbean (introduced in the 1970s), it has been perceived as the most rapidly growing subject area within social sciences in the University of West Indies Mona campus, Jamaica (Frey & Black, 2012; Maynard, July 2013. See Appendix 1; Ward & Hickling, 2004). Interestingly, the training of practitioner psychologists is seen as a way of helping with the problems that Caribbeans face. Two of the many pressing challenges that psychologists there are called to work with is HIV/AIDS and crime and violence (Bradshaw Maynard, 2013; Frey & Black, 2012). This was supported by the former president of the University (Mona Campus), who stated that: “There is an intrinsic need for psychological training and workers to meet the exigencies of our society” (Hall, 1999, p.3 cited in Frey & Black, 2012).

Studying why people do what they do is an interesting phenomenon, but it appears most beneficial if human behaviour can be explained over a wide range of cultural groups utilising approaches that are meaningful to the said group rather than what some consider a traditional Eurocentric approach (Berry et al., 2002; Fatimilehin & Coleman, 1998; Fernando, 2003; Hylton, 2012; McKenzie-Mavinga, 2005; Patel & Fatimilehin, 2005; Turpin & Fensom, 2004; Williams et al., 2006).

Zimbardo (2004) asked: Does psychology matter? He acknowledged its growth and achievements over the past hundred years but questioned its current state. For example,
does what psychology attempts to do in the present make a significant difference to people’s lives or how communities function? Has it spread beyond academia and out to the people to improve health, welfare, safety, education and so much more? One of the learning objectives laid down by the Qualifications and Commissions Authority (2007) is to develop “an awareness of why psychology matters” (p3) and to “develop an understanding of the relationship between psychology and social, cultural, scientific and contemporary issues and its impact on everyday life” (p.4).

**Perceptions about Psychology**

Studies among African Americans living in the USA found some participants who knew very little about the role of psychologists, whilst others identified psychologists as “older White males, who were unsympathetic, uncaring and unavailable” (Thompson, Bazile & Akbar, 2004, p.23). Participants in the study perceived psychologists as distant and untrustworthy in that they did not show an interest in, nor were active in any way within the African American community. A notable comment from participants, who sought therapy, was the difficulty they experienced in finding either African American or Minority Ethnic therapists. The sample (N = 201) consisted of volunteers who were offered a monetary incentive to take part in the study. It is probable that this may have attracted a proportion of low income participants, particularly students. The majority of these had no experience of mental health prior to volunteering and a small number had considered therapy but had not attended. This may have limited the level of contribution from these participants. According to Leung (2009), focus groups are defined by their size, between 7 to 10 participants. In this study the size of the focus groups varied from seeming too small (N = 3) to large (N = 12). Potentially this might impact on the ease in which participants got involved in the discussions.
In the UK, Radford & Holdstock (1999) explored the perception of further education students and sixth form students in school regarding psychology when compared to other subjects. Completed questionnaires totalled 580. Around half of the respondents (58%) were studying psychology, sociology or both, alongside a range of other subjects. Findings showed that female and male respondents ranked psychology as a subject that would be interesting to study at university. It was viewed as a subject ‘most concerned with people’ (p. 29). When asked what the gain from studying psychology would be, it was placed as low in prestige, offering poor career prospects and was seen as more female orientated. The demographics from this study did not provide the ethnicity of the participants; therefore it is unknown whether the findings were inclusive of African Caribbean students.

**Studying Psychology**

At A-level, psychology is the fourth most popular subject studied by students (BPS: Briefing Report, 2013; Hylton, 2012) but although psychology appears to be popular, misconceptions about what it is are high. TV programmes like Cracker or perceptions referring to Freud have formed the base of knowledge for many (Smith, 2012).

Psychology has a lot to offer in terms of employability that often is not publicised. It informs careers guidance, organisational behaviour including recruitment. It is concerned with self-awareness, personal growth and development (Reddy, Lantz & Hulme, 2013). According to Trapp et al., (2011) studying psychology offers a wide range of generic skills such as numeracy, critical thinking, team work, independent learning and computing and these provide a good preparation for many careers. Employability skills are being embedded within the psychology curriculum and students are made aware of this within the first year of their studies (Robertson, McMurray & Roberts, 2012). However, the question is asked: do those skills teach graduates what
they need to know in order to become a psychologist, and how much emphasis is placed on encouraging students into the profession at undergraduate level?

Some students, it seems, are intrigued by psychology because they want to learn about body language and the like. However when they learn what it is about many drop out, because it wasn’t what they expected. Hylton (2010) points out that some students choose psychology because they believe that it will be relevant to them. Sadly, this turns out not to be the case and many choose not to continue with the subject. It appears that the message that psychology matters and its impact on everyday life is not being understood. Conversely, Toal (2007) described psychology as one of the hardest subjects that students study at A-level, due mainly to the fact that students find it hard to conceptualise that there can be varied answers to any particular question and that psychologists disagree as to what things might mean.

In other ways, too, psychology has been branded. According to Jarvis (2011) a recent report in the press that picked up on the University of Cambridge’s Trinity College classification of Psychology as a Category B ‘A’ level, (the more limited category for studying at Trinity) claimed that “thousands of teenagers were effectively being shut out from prestigious institutions after taking subjects such as media studies, dance, and psychology in the sixth form” (Paton, 2011 cited in Jarvis, 2011). Although such claims were challenged, the reputation of psychology has been dented, with some describing it as a soft option subject without the rigour of subjects such as Maths or Natural Sciences. As a subject it is not valued within the Key Stage 4/5 curriculum (Ansell, 2013; Banyard, 2013; Jarvis, 2011).

Degree Choices

Richardson (2008) confirmed that there is a high percentage (61%) of BME individuals that are going to university. A recent study (Stuart, Lido Morgan, Solomon
& Ackroyd, 2008) examining individuals’ university choice showed that African Caribbean students are applying to attend universities although their choices of universities are more likely to be post-1992 universities rather than the Russell Group band. The reasons for this have often been attributed to low grades at A-level and whilst this will be true for some people, others might make their choice based on the number of other minority ethnic personnel and where the university is situated (Booker, 2007). Ivy (2010) reported that “African Caribbeans had 100 per cent acceptance to the universities they chose” (p.391). This was in direct contrast to White students who although they had the highest UCAS point count, had the lowest university acceptance rate.

Commenting on the type of degree courses that Minority Ethnic students were applying for, Ivy (2010) described it as more likely to be Social Studies, Law and Business, Combined Social Sciences, Medical Sciences, Maths and Computer Studies. A breakdown of Ethnic groups was not given; therefore the researcher could not clarify which were more relevant to African Caribbean students. Contrary to previous studies, findings from this research showed that African Caribbeans appeared to be less motivated by “family influencing their decision to go to university” (Ivy, 2010, p.399) than, say, African and Asian Pakistani respondents.

**Studying Psychology at Undergraduate Level**

In the UK, psychology student numbers have grown steadily between 2002/03 and 2008/209 and there currently are 77,000 undergraduate students studying psychology. A key factor in this is the study of the subject at ‘A’ level (BPS, 2013; Hylton, 2010). Whilst the figure for African Caribbeans studying psychology at undergraduate level is limited, Black and Minority Ethnic individuals make up 12% of the undergraduate psychology student population (Turpin & Fensom, 2004).
Studying psychology at undergraduate level is “essential in developing the knowledge base and theoretical background for the profession” (Kinderman, 2006, p. 745). Students need to have an academic background with skills such as research, personal reflection and clinical experience and have the ability to cope with the demands of clinical training (O’Shea & Byrne, 2010). It has been suggested that many students choose to study psychology with a view to entering the profession, yet only a small percentage of psychology graduates go on to train and become psychologists, despite its popularity at undergraduate level (QAA, 2010; Reddy, Lantz & Hulme, 2013; Wakeling, 2010).

**Psychology Graduates – African Caribbeans**

Research suggests (Redman, 2012; Wakeling, 2010) that most first degree psychology students in the UK obtain employment or proceed to further study, or do both in the first six months of graduating. There is research that suggests that African Caribbeans are more likely to be unemployed six months after graduating (Wakeling, 2010). Data regarding psychology graduates from the cohort of 2010/2011, who are African Caribbeans, was obtained from the University of Wolverhampton Careers Centre. Graduates were surveyed six months after graduating. Of the 95 responses, from the questionnaires received from undergraduate psychology students, 16 were African Caribbeans with one person either studying/training only; 7 who were in employment only; 2 employment and study combined; 3 were unemployed and looking for work/study and 3 were coded ‘other’. Data from 2009/10 showed that 68 responses were collated from psychology graduates. Of these eight were African Caribbeans. Of which, 3 were in employment only; 2 were studying/training; one was unemployed; and 2 were coded ‘other’ (Sharp, 2013). This data shows that some African Caribbeans are
choosing to study psychology. What is less certain is whether those students go on to pursue careers in counselling psychology.

**Requirements for Postgraduate Studies**

In order to study at postgraduate level, each prospective student has to gain the Graduate Basis for Chartership (GBC) conferred by studying for a degree accredited by the British Psychological Society (BPS, 2012). It provides graduates “with recognition that they have studied an appropriate course to provide access to professional postgraduate training.” (Reddy, Lantz & Hulme, 2013, p.10). To obtain employment as a practitioner psychologist further postgraduate training, normally for three years, (full time) as well as supervised training is required (QAA, 2007).

**BME and Postgraduate Studies**

Interestingly, Stuart et al. (2008), investigating the kind of student that studies at postgraduate level, combined with exploring under representation of any particular group at two universities in the UK, found that African Caribbean students reported significantly greater intent than all other students to study at postgraduate level, but the outcome of such intentions has not been documented due to the scarcity of available research on postgraduate studies. However, due to concerns about accruing debt (this was more worry than actual debt), anxiety regarding expectations in postgraduate study, limited family experience of higher education and a disquiet relating to perception of employers’ value of postgraduate study, these students did not continue their studies after completion at undergraduate level (Wakeling, 2010).

The continuation of psychological studies to postgraduate level is pivotal to becoming a Psychologist. Concern about the lack of ethnic diversity in the profession and ways to tackle it remains a challenge. If more individuals from the BME
community are to engage with the discipline of psychology and be more interested in studying it at both undergraduate and postgraduate level then the curriculum has to be more relevant so that what is read and learnt has some resemblance to their backgrounds and experiences. Sue, Bingham, Porche-Buerke & Vasquez (1999) believe that change can occur in adopting a social justice agenda. Such an agenda would advocate equal access and opportunity for all groups as opposed to the majority group. The onus would be placed on the profession and psychologists to ensure that policies that are implemented do not, albeit unintentionally, harm cultural groups within society; that there is awareness among the profession to ensure injustice is not perpetuated but rather alleviated.

Debates about this have led to some action being taken and in the US a number of institutions have set up psychology programmes that have focused on recruiting minority ethnic individuals and supporting them (Maton, Wimms, Grant, Wittig, Rogers & Vasquez, 2011). These programmes were said to encourage graduates to work within their communities, “using culturally relevant techniques, resulting in benefits for both clients and students” (Zinkiewicz & Trapp, 2004, p. 25). Similarly, Vasquez & Jones (2006) suggested that recruiting Minority Ethnic individuals to psychology would be very beneficial because of the contributions that they can make to the discipline. For example, they are more likely to offer different perspectives that might help in the development of alternative theories in psychology that are more relevant to Minority Ethnic individuals rather than the Eurocentric concepts that are currently available.

**Underrepresentation of BME Psychologists Employed in Education: UK**

The demographic of BME psychologists employed within institutions in the UK remains a challenge. Wakeling (2010) reported data on the ethnic background of UK staff in Psychology and Behavioural sciences based on cost centre figures. Of those
who declared an ethnicity, 92% were classified as White British. There were fewer than 10 full-time staff declaring themselves from a Bangladeshi background and the largest teaching ethnic group mentioned were Asian or Asian British Indian with 60. This was compared to 4,600 staff of White British ethnicity. Furthermore, proportionately, the number of professional staff from the White British Group increased to 95%.

Therefore, out of almost 500 full time psychology staff there were less than 15 from a BME background with no more than 5 female professors who were from a BME background. As in previous research (Adetimole et al., 2005; Bhopal, 2004) BME groups were clustered together in the data and it was difficult to ascertain which groups were being referred to. However, a disparity was apparent with the representations of women to men in the professoriate and also in teaching. Women could be found in the majority in “teaching only” and “research only” positions, but not in “teaching and research” roles and BME groups are underrepresented among the student body in terms of research (Wakeling, 2010, p.23).

Findings from this data seem to present a picture of predominantly White men holding key positions within psychology departments in education. However Wakeling (2010) suggests that it is difficult to accurately describe the size of psychology departments and therefore some caution is to be observed in interpreting the numbers. However, even taking that into account, what seems clear is the fact that of the BME groups mentioned, African Caribbean or Black individuals were not denoted as belonging to the staff cohort. Arguably the lack of staff members at middle and senior management level within psychology can unconsciously convey a message to African Caribbeans and to other BME groups that psychology is an exclusive profession despite its claim to have a workforce representative of communities that it serves.
Underrepresentation of BME Psychologists in the Workforce

Addressing the paucity of Black and Minority Ethnic individuals in psychology, Patel & Fatimilehn (2005) inferred that questions need to be asked. Questions such as: “What is it about psychology that makes it an unattractive career prospect? … What is it about our profession…systems…training programmes…that excludes Black and minority ethnic people?” (p. 20). Or in another guise explore the reasons why Blacks are not attracted to psychology. Furthermore, they argue that often responsibility for the small number of BME psychologists has been laid at the door of the undergraduate students. They challenge the notion of merely focusing on factors that deal with students choosing or not choosing psychology. They suggest that the answers might be found in the perception that Black people have about psychology and also in the type of advice given by careers advisors.

Patel & Fatimilehin (2005) were themselves part of a small group of BME clinical psychology trainees. Reflecting on their journey as BME psychologists they bemoan the fact that little seems to have changed over the years in the UK in terms of diversity in psychology. Zinkiewicz & Trapp (2004) acknowledge that psychology has not always taken the initiative or been positive with regards to diversity. One might expect that this would be quite the opposite in that psychology would take the lead in matters of, and in the promotion of, diversity, bearing in mind that the work of psychologists is about working with and treating people (Ocampo, Prieto, Whittlesey, Janco-Gidley, Mannix, & Sare, 2003 cited in Zinkiewicz & Trapp, 2004).

In the US similar patterns have emerged. In the history of US psychology African American psychologists left the American Psychological Association (APA) and formed the Association of Black Psychologists in protest at the APA’s perceived lack of interest in and reluctance to respond to the needs of the Black psychologists at the time.
and the community they served (Holliday, 2009). Furthermore, women and Black people are underrepresented in psychology and on the faculty. However, to address this, a big effort was put into recruiting and providing mentoring programmes for Black women who were psychologists and interested in pursuing an academic psychology career. The rationale being that increasing the number of Black research psychologists would generate more cultural research, thus advancing the discipline (Daniel, 2009).

To demonstrate its commitment to diversity psychology needs to be relevant and accessible to students across a range of ethnicities and cultures. Can it be done? Some argue that psychology has “the talk” but questions whether it is “walking the walk” successfully (Case & Smith, 2000, p.1108; Morris, 2012; Patel, 2010).

Making a Career Choice

Research evidence points to a particular type of person who chooses a career in counselling or psychotherapy. Many such applicants cite a desire to help or understand others as the reason for choosing the profession. Numerous accounts of respected and known therapists have described how personal experiences, particularly loss in childhood, deprivation and unsatisfactory parental attachment have influenced their choice of profession (Barnett, 2007; Hazell, 1996; Herman, 2001; Phillips, 1988).

Counselling literature documents well the concepts of the wounded healer. Jung (1951) used the term to describe the relationship between the analyst and the patient. A wounded healer is one who is self-aware and understands his or her own process but is able to bracket it so that it does not interfere with the therapeutic relationship and therapy. Through personal therapy the wounded healer is able to work through psychological and emotional distress (Faber, Manevich, Metzger, & Saypol, 2005; Martin, 2011; Moodley, 2010). DiCaccavo (2002) suggests that for many wounded healers the desire to “rework the hurts and disappointments of their own early life”
(p.465) is carried out through caring for the well-being of others; for somehow through this the therapist is able to care for him or herself.

Holland’s RIASEC theory of career and vocational choice provides an alternative view-point when considering career choices. He espoused a theory based on personality types: Realistic (doers), Investigative (thinkers), Artistic (creators), Social (helpers), Enterprising (persuaders) and Conventional (organisers). Holland argued that the career choice a person chooses reflects their personality. Similar to Schneider (1995), Holland (1997) posited the view that career and job environments are classified by the personality types that work within them and that people choose career environments in which they feel that they fit. In other words people choose careers or jobs where they can be with people who are like them.

However, Brown (1995) argued that theories of career choices are based on a White Eurocentric perspective and therefore have limited use to many BME individuals, due in part to a restricted sample size of White middle class males. Moreover, Nabi et al. (2005) concurred that career choice research has, in the main, focused on the matching of individual personalities and abilities to occupational environments. Other theories have made assumptions relating to career development suggesting that career development is a rational choice made by all people or that individuals have a free choice about careers to pursue (Holland, 1997; Lent, 2000).

Alberts, Mbalo & Ackerman (2003) argued that making career choices is one of the main areas of concern for students as they consider leaving school. There are many influences. Some are dependent on the young person’s conceptualisation of his or her preferences and abilities and what is available on the job market. Further influences come from family, community and gender (Ferry, 2006). According to Kniveton (2004) school and parents play a role in guiding and providing information to help with the choice.
Parental Influence on Career Choices

Although teachers do play a role in giving advice to students regarding career choices, parental influence over career choice is greater. Wintre, Hicks, McVey & Fox (1988) suggested that parents still have a role to play when it comes to career choices for adolescents even though parents tend to have less input into adolescents’ lives. That being said, children are influenced by the attitude of family members to work. Parental support and expectations are seen as important factors which influence career making decisions. Parental involvement in the career choices of their offspring has been said to help children follow their own career aspirations later in life (Alika, 2012).

Parental influence has been most marked in terms of birth order and gender, with same sex parents seemingly more influential in the type of career that was chosen. Similarly, support was given when the occupational choice was the same or similar to that of the parental career (Kniveton, 2004). Studies exploring the career decision making process of African Caribbeans point to a variety of sources, ranging from the media, friends, television, family relations. Parental support was evident through encouraging children to pursue a profession. Professions were viewed as having status. Parents were said to also encourage their children to have a backup plan. Conversely, whilst parents spoke about following a profession, students appeared to be more interested in following vocational courses, music and dance being favourites (Nabi et al., 2005).

BME career choices however are not that straightforward. Restrictions might occur by stereotyping (societal and self-stereotypes), experiences at school or home and career guidance (insensitive or inadequate) to name but a few. Additionally there are some organisations and industries that appear to recruit mainly White members of staff. Whether this is intentional or not, it can be perceived by many minority ethnic individuals as a closed door or a career that is suited for a particular type of person
rather than open to all (Bhavnani, 2006; Nabi, et al., 2005). This in turn can result in the under representation of many groups of people in that field of work and Dunkwu (2002) points out that such segregation leads to a disproportionate number of minority ethnic people in certain types of work and not others. For example, there is a high percentage of African women in the public sector, Bangladeshi men in the distribution sector and African Caribbean males in sales occupations, secretarial and clerical positions (Fitzgerald, Finch & Nove, 2000; Owen, Green, Pitcher & Maguire, 2000; Strategy Unit, 2003).

Ideas about “social belongingness” (Clark, Mercer, Zeigler-Hill & Dufrene, p.178) are described in self-determination theory as necessary for general happiness and success in all aspects of life, including education. Being socially connected is a good motivator and predictor of positive outcomes (Walton & Cohen, 2007). This notion is supported by Steele (2010). He refers to levels of representation and he argues that some Black individuals read their environment, looking for others with whom they can identify. If the conclusion is that there are none, Steele (2010) argues that people feel threatened and are reluctant to stay.

Cousins (2010) reports that “lone black employees” (p.14) often experience levels of anxiety other than what would be expected when commencing new employment. The anxieties would feature around issues such as identity, being stereotyped, career progression and others. Her own experience was described as feelings of sadness when she walked into a room filled with her colleagues but knowing that she was the “lone black worker” (p. 13). In the US, some African American Psychologists within academia were said to choose to work in a ‘historically black college/university’ because the environment was seen as being more hospitable and helpful (Anderson, 1998).
Choice of Career: Counselling Psychology v Counselling

DiCaccavo (2002) studied the early family experience of a sample of trainee counselling psychologists to ascertain their motivation for pursuing a career in counselling psychology. Her findings showed that participants reported less parental care but more parental control, self-efficacy and parentification, when compared to art students. It was postulated that individuals who experienced parentification were more likely to train as counselling psychologists. This was due to the fact that through their life experience individuals developed the skills needed to work with the psychological need of others, and secondly the reflexive nature of the work of a counselling psychologist allows the therapist to deal with their own distress.

Counselling psychologists work within a wide context. It has become increasingly established within mental health work and within the NHS. The specialism and philosophy of counselling psychology link most closely to the profession of psychotherapy and counselling, but there is a distinction. As a discipline, counselling psychology is embedded in psychology but its humanistic values connect counselling psychology to a “human science” (Woolfe, Strawbridge et al., p.10). Counselling psychology emphasises the role of therapists as scientist practitioners. The importance placed on using psychological theory and its emphasis on developing research so as to develop and inform practice highlights variances in the way in which some counsellors and psychotherapist are trained (Gillon, 2007; Woolfe, Strawbridge et al., 2010).

On the other hand, counselling and psychotherapy have been described as “umbrella terms that cover a range of talking therapies. They are delivered by trained practitioners who work with people over a short or long term to help them bring about effective change or enhance their wellbeing” (British Association for Counselling and Psychotherapy website, 2013). Enhancing well-being is often perceived as a good
thing, yet many people from various backgrounds and ethnic groups equate receiving psychological help or counselling as problematic and seek it as a last resort.

Past studies have shown that some participants perceive counselling as attracting White middle class females (Coldridge & Mickelborough, 2003; Gillon, 2002; Moodley, 2000). Counselling was viewed more as problem-solving, seeking assistance and help, whereas psychotherapy was less familiar and was associated with mental illness and its stigma. Some, without a mental health background, preferred the use of the term counselling over psychotherapy (Loewenthal et al., 2012; Thompson et al., 2004).

**Stigma and Counselling**

McKenzie (1986) relayed perceptions of counselling that were prevalent for him as a young person growing up in an English speaking West Indian culture. He described “a deep rooted and long standing aversion to professional counselling and psychotherapy” (p. 42). Furthermore his study reported that Black West Indian boys saw counsellors in a similar way. He added that they “…think the counsellor is a shrink and that something is wrong with them…” (p.43). This suggests that counselling for those West Indian boys carried some degree of stigma.

However, studies indicate that adolescent boys generally are less likely to express emotions and seek help from either their social network or from professional (Lowe, 2010). Furthermore the concept of men and counselling is viewed in a negative way irrespective of ethnicity and more women than men access counselling. For example, White (2009) argued that some men perceived the idea of talking therapy as taboo conceiving counselling as “a potential threat to their sense of autonomy” (p. 6).
Feelings of stigma and shame are not unique to BME individuals. They are common to all people with mental health difficulties (Galbraith & Galbraith, 2008; Lowenethal et al., 2012). National figures show that nearly nine out of ten people (87%) who have mental health problems have experienced stigma and discrimination directly as a result of the problem. Vogel & Wade (2009) claim it is a common reason given for not seeking psychological help. Often the perception from society is: “that a person who seeks . . . treatment is undesirable or socially unacceptable” (Vogel, Wade, & Haake, 2006, p. 325).

Goffman (1963) identified stigma in terms of a sign or a mark. It denotes that the one being stigmatised is spoiled and therefore less valued. For African Caribbeans and other BME individuals the shame and stigma is not only about mental health illness or fear of mental health professionals but it is about how it might look in the community and whether it will be perceived as a betrayal of family values (Edge & MacKian, 2010; Jim & Pistrang, 2007; Kim & Omizo, 2003; Lowenethal et al., 2012). According to Lowe (2010) avoiding psychological help can be a defence mechanism used by African Caribbeans who are unable or unwilling to face the afore-mentioned internal conflict.

Although it appears that receiving counselling is frowned upon by some African Caribbeans it is nonetheless a term that is familiar to many. There seems to be more widespread awareness about the features of psychiatry (Allen, Winifred, Glasford & Roberts, 2006; Baboolal & Hutchinson, 2007) and counselling (Sloman, 2005) compared to counselling psychology. As a treatment option, little is known in terms of the relevance of this profession to the African Caribbean community whereas; African Caribbeans attend counselling and find it beneficial. Sloman (2005) conducted a study to explore the perceptions of African and African Caribbean individuals towards counselling. The aim of her study was to address problems arising from the planning
and provision of counselling that negatively affect access to counselling for African and African Caribbean individuals. Results showed that the locality of the service, ease of access to the counselling agency followed by the availability of a counsellor from the same ethnic background were fundamentally important factors in determining whether counselling was accessed. Overall findings from the study showed that a significant number of African Caribbeans felt that they benefited from having counselling. However, due to the dominance of a self-selecting sample, a bias towards older African and Caribbean people occurred and the concepts from the younger generation of African Caribbeans were not heard even though statistically they dominated the communities.

**Counselling as a Possible Career Choice for some African Caribbeans**

A further study by Allen et al., (2006) was conducted among African Caribbeans living in the West Midlands. One of its objectives was to promote counselling courses as a positive career option. The findings highlighted that some participants were interested in pursuing a career in counselling. However, there were conditions attached to the interest: the counselling course had to be culturally relevant to African Caribbeans.

What is absent from this study is any evidence that consideration was given to any possible input from psychological services even though an objective was assessing needs in relation to ‘talking therapies’ with local African Caribbeans. This gives the impression that ‘talking therapies’ were perceived in a narrow way.

The study reported that African Caribbeans and other BME people envisioned a service in which there would be less fear of mental health services but an increase in customer satisfaction where BME services and service users would be more actively involved both in the planning, providing and developing of mental health policies. Furthermore there would be “a workforce and organisation capable of delivering appropriate and responsive mental health services to BME communities” (p.5).
Within the voluntary sector there are various recognisable charitable counselling organisations that have been set up, many from within the BME community to meet mental health needs. An example is the African and Caribbean Mental Health Services Manchester (ACMHS) which was set up 25 years ago. It was set up because of the concerns

“expressed by the community about the frequency with which second generation…African Caribbean youths were admitted to psychiatric hospitals and the regional forensic unit… and…on the way such admissions took place, what happened when people were admitted (in terms of diagnosis and treatment)” (ACMHS website).

Interviewees from the study by Allen et al., (2006) highlighted the need for the recruiting and training of more African Caribbean talking therapists to the NHS in order to improve the type of service that is offered. Some participants felt that they would:

“Love to see more black professionals in the system. The NHS should take a strong look at the staff that they employ. They need to find ways to integrate black people into the work force” (p.33).

This appeared to be an aspiration held by some participants as the responses given by the majority of participants showed that they “did not know of any member of the Black community who is a talking therapist” (p.44).

The imbalance between the number of African Caribbeans (3.3%) living in England and Wales (ONS, 2011) and that of, particularly, young African Caribbean men in mental and forensic settings has been mentioned. The majority of staff employed by the NHS is not from the African Caribbean community. Should they be? Would their presence positively affect the high incidence of over representation of this group in the
UK mental health services? It appears evident that there is an interest among African Caribbeans to be people helpers: does this include counselling psychology and if so where is the evidence and if not what can be done?

Data obtained from BACP (May, 2013. See Appendix 2) supports the notion that African Caribbeans appear to be willing to train as counsellors. From current information available they have 657 (2.0%) members who are Black Caribbean; of the remaining BME groups Black Africans totalled 279 (0.9%); Indian 442 (1.4%); Pakistani 142 (0.4%); Bangladeshi 56 (0.2%); Chinese 104 (0.3%); Other 1,146 (3.5%); Whites 29,658 (91.3%) out of a total known membership of 32,484 members. If the above figures were representative of all ethnic groups within the UK population it appears evident that African Caribbeans along with other BME groups are underrepresented within the field of counselling.

However, the apparent shortage of African Caribbeans who are psychologists compared to counsellors is an interesting phenomenon as is the available research carried out regarding the perception of psychiatric services. African Caribbeans’ experience and perception of the mental health system are, in the main, based on the treatment received from the police, judiciary and other disciplines such as psychiatry, not counselling psychology and not primary care. Much of the literature does not make a distinction between counselling, psychiatry and psychology. These organisations appear to be perceived in a negative way; is it possible that by association, counselling psychology may be implicated and hence seen in the same way?

Choosing any career, as already said, is influenced by many factors including the opinions of family and community members (Ferry, 2006). Being helped by a particular profession, knowledge of its existence or a desire to be a trailblazer are also helpful indicators when it comes to choosing a career (Allen et al., 2006; Sloman, 2005).
question is are members of the African Caribbean community familiar with counselling psychology in order to consider it?

**Racial/Ethnic Matching in Therapeutic Work**

Ethnic matching between client and therapist has a long history of debate in counselling and psychology and the research in this area is vast. Ethnic matching is supported by research from social psychology which suggests that similarity has a positive effect on processes such as liking someone. For example people tend to associate with others who they believe to be similar to them, whether in terms of world view or physical attributes (Cabral & Smith, 2011). It has been said that “people assume greater similarity of opinion between themselves and in-group members than between themselves and out-group members” (Marks & Milller, 1987, p.80).

Proponents of ethnic matching posit that when therapist and client share the same racial, cultural or ethnic background the potential is there to make the therapeutic alliance stronger. Mistrust of the cultural understanding of the therapist has been perceived as consequential to early termination of therapy (Alladin, 1994; Cabral & Smith, 2011; Farooq & Abbas, 2013; Fatimilehin & Dye, 2003; Keating, Robertson, McCulloch & Francis 2002; Lowe, 2010; Pederson, 2000; Turner, 2009). Research indicates that when clients see therapists of the same ethnic or linguistic background treatment outcomes improve particularly in terms of dropout rate and sessions attended (Flicker, Wauldron, Turner, Brody & Hops, 2008; Sue, 1998). Support for this is implied by Hall, Guterman, Lee & Little (2002) Asian Americans and Mexican Americans underutilise counselling services because minority ethnic counsellors are underrepresented in psychology and related fields in North America.

Studies suggest that the therapeutic relationship will be more easily formed when a shared experience exist between the client and the therapist (Sashidharan, 2003; Sue,
Support for a successful outcome of counselling from studies by Sloman (2005) was attributed to the fact that counsellors came from the same ethnic background. This study was carried out in Liverpool, Manchester and London, cities where traditionally African Caribbeans migrated and which still have a large proportion of minority ethnic individuals. Because these cities have well established communities the likelihood that there would be counselling agencies within the community is not surprising.

Others advocate that misdiagnosis will be less frequent and communication will be better. The belief is that Black practitioners have the ability to integrate their experience as a Black person with their expertise as a Black worker which would help to address issues of racism as well as incorporating a Black perspective in service delivery (Fatimilehin & Coleman, 1998). Ethnically matched therapists are also thought to be more able to identify the impact of cultural issues on the therapeutic process (Sue, 1988; Sue & Sundberg, 1996).

However, the desire to have a therapist from the same ethnic group does not apply to all cultural groups or all people within a said group (Alladin, 1994; Sue & Sue, 1999). For example, a Black client can have a meaningful therapeutic relationship with a White counsellor if the counsellor is able to value the uniqueness of the said client. Atkinson & Thompson (1992) conclude in their review if the issue brought to therapy is around ethnicity or race they propose that an ethnically similar counsellor who is perceived as skilful and trustworthy will be best suited to work with the client and will in all probability have the greater influence on the client’s attitude.

Furthermore Farsimadan et al., (2007) argue that the number of studies that have examined the effect of ethnicity on therapeutic outcome over time using actual clients is limited in number and therefore suffers from low validity. Cabral & Smith (2011) argue that differences in outlook can facilitate reframing, provide insight and so forth.
However, it must be pointed out that having a workforce that meets the needs of its communities is not just about increasing the number of allied psychologists from a particular BME group. According to Sue (1998) ethnic matching alone is neither necessary nor sufficient for positive treatment outcome but service users need to have a choice regarding such matters; the make-up of the current work force limits this (Allen et al., 2006; Netto, 2006). As a response this study aims to explore whether a career as a counselling psychologist is one that African Caribbeans are considering.
Methodology Section
Methodology

Methodology refers to the procedures and process of the research. It is concerned with the process behind the choice of a particular method and how it links to the proposed outcome of the research being studied (Crotty, 2009; Ponterotto, 2005). Conducting research in an area where there is a scarcity of previous knowledge indicates that the researcher has to be flexible with the type of methodological approach that is used. Moreover Phinney & Landin (1998) suggest that particular consideration should be given to approaches that are used for studying Minority Ethnic groups. He calls these ‘between’ groups and ‘within’ groups. Between groups refers to studies using two or more distinct groups, whereas within group studies focus on a single ethnic group or a number of groups that are considered one unit, such as African Caribbeans. Although within group studies have been used less than between groups in psychological research, it gives the researcher the ability to study and/or identify issues that may be pertinent or important to that group, issues that may have been ignored in mainstream psychology.

The exploration around African Caribbeans choosing careers as counselling psychologists is one that the researcher wanted to explore in some depth, and reach as many of that population sample as possible. Strong research knowledge on BME groups must explicitly state the populations to which the findings are applicable.

According to Casas (2005) counselling psychologists producing research that is valuable goes beyond merely identifying ethnicity or race within the study, or concentrating solely on heuristic motives, but rather the social justice needs of a group are researched. Areas that have been previously highlighted but have not being addressed are what are required. The diversity of the counselling psychology workforce
to meet the needs of a multi-cultural society is an area that has been highlighted and is relevant for a diverse Britain.

There are three main accepted methods for conducting research. They are quantitative, qualitative and mixed methods. The most suitable methodology to use in this instance would be mixed methods methodology, or mixed methods as it is sometimes known. It has also been referred as the “third wave” and it fits in to the pragmatic philosophical approach (Cresswell, 2006).

**Rationale for Using Mixed Methods**

Creswell & Clark (2007) defined mixed methods research as:

“…a research design with philosophical assumptions as well as methods of inquiry. As a methodology, it involves philosophical assumptions that guide the direction of the collection and analysis of data and the mixture of qualitative and quantitative approaches in many phases in the research process. As a method, it focuses on collecting, analysing, and mixing both quantitative and qualitative data in a single study or series of studies. Its central premise is that the use of quantitative and qualitative approaches in combination provides a better understanding of research problems than either approach alone.” (p. 5).

Using a mixed method is useful when one method alone will not fully address the research question. For example, in this study, the scarcity of research in this area influenced the researcher to use a questionnaire as a means of gathering information in order to understand areas of interest to explore. However, the sole use of quantitative data in this study would provide some numerical data that might generate a hypothesis of what the factors might be but it would not be a whole picture. Quantitative research (nomothetic approach) focuses on uncovering general patterns of behaviour by using
large scale sample groups. As a method its main intent is testing theory but it would not provide a detailed perspective of participants which in turn might highlight a more comprehensive understanding of the research question (Curry, Nembhard & Bradley, 2009; Hayes, 2000; Laubschange, 2003; Morrow, 2007; Ponterotto, 2005). On the other hand, qualitative research is defined as ideographic and emic. Ideographic research is interested in the uniqueness of the individual and understanding meaning as it relates to the individual. Mixed method research can “harness the strength and counterbalance the weaknesses of both approaches” (Tariq & Woodman, 2010, p. 3). Potentially it can provide a better understanding of research problems and complicated phenomena in ways that one approach alone may not provide (Cresswell & Planto Clark, 2007; Jick 1979; Tashakkori & Teddie, 1998).

In choosing a methodology it is imperative to consider the participants and how best to elicit the information that is required from them in a sensitive manner. This felt particularly pertinent for this Group because of their long history in feeling disadvantaged, under-represented and not heard (Coard, 1971; McKenzie-Mavinga, 2004; Patel & Fatimilehin, 2005). Some cultural researchers have suggested using mixed methods so as to provide a more comprehensive understanding of different phenomena within cultural contexts (Church & Katigbak, 2002; Diaz-Loving, 2005; Kim & Berry, 1993).

**Mixed Methods: The Paradigm Debate**

In describing mixed methods it is appropriate to speak about paradigms. Various definitions of paradigms have been used throughout the literature. Morgan (2007) defined it as: “the systems of beliefs and practices that influence how the researchers select both the questions they study and methods used to study them” (p.47). Kuhn (1970) believed that paradigms have paramount importance within any field of science.
Paradigms then can be viewed as a theoretical lens that governs the way in which the researcher undertakes and implements the research study. Paradigms are defined by certain distinctive elements: (1) Epistemology (how we know what we know). It refers to how knowledge is gained. It deals with the “nature of knowledge, its possibility, scope and general basis” (Hamlyn, 1995, p.242). In this study the researcher hopes that the knowledge gained from the questionnaires and interviews will be a true representation of the thoughts and perceptions of African Caribbean participants. (2) Ontology. Crotty (2009) defined ontology as: “the study of being” (p.10). It addresses the question about the form of reality and what can be known about reality.

Research to date examining African Caribbeans’ perception about psychology and choosing a career in a field of psychology is sparse, particularly among 16-18 year olds. Similarly, little research has been carried out within counselling psychology to ascertain parents’ perceptions about counselling psychology and choosing a career in the discipline. In this study the researcher seeks to explore African Caribbeans’ perceptions about these issues. (3) Axiology. This is concerned with the set of values that the researcher brings to the process. In this study the researcher will be guided by the ethical guidelines of the BPS. As another human being in the research process the researcher acknowledges her own bias and values. They will not be eliminated but they will be bracketed during the process. (4) Methodology. Crotty (2009) defined methodology as: “the strategy, plan of action, process or design lying behind the choice and use of particular methods and linking the choice and use of methods to the desired outcomes” (p.3). Survey questionnaires and semi structured interviews will be the means through which data will be gathered for this study. Thematic analysis will be used for the analysis of the data.
Two issues have dominated the paradigm debate. Firstly, the paradigm method fit issue. A question at the heart of this debate was: do philosophical paradigms and research methods have to fit together? (Hanson, Creswell, Planto Clark, Petska & Creswell, 2005). Some researchers argued that a post positivist paradigm could only be used with quantitative methods. Others argued that a naturalistic or constructionist paradigm could only be used with qualitative methods (Hanson et al., 2005). The basic tenet of the constructionist argument is a belief in multiple constructed realities over a single true reality. This reality is subjective and it is influenced in the main by the experience and perceptions of the individual and the interaction between the individual and the researcher. Constructionists contend that the knower and the known are inseparable because the subject knower is the only source of reality (Bryman, 2006; Guba & Lincoln, 1988; Morrow, 2007; Ponterotto, 2005).

In stark contrast, positivists conceive of reality as objective, quantifiable and universal. Both conceptualise their paradigm as the ideal for conducting any type of research.

Secondly, the ‘best’ paradigm issue tried to ascertain what the best philosophical paradigm would be for mixed methods research. This was a very big stumbling block.

**Criticism of Mixed Methods Research**

Mixed methods research has been criticised. Much of this has focused on the debate questions – the incompatibility theses. Both constructionist and post-positivist researchers argued, as mentioned previously, that quantitative and qualitative research paradigms and their associated methods cannot and should not be mixed due to their different ontological and epistemological stance (Bryman, 2006; Doyle, Brady & Byrne, 2009).
However, some researchers have argued that different paradigms and methods do fit together. Johnson & Onwuegbuzie (2004) posit that mixed methodology is capable of bridging the gap between the paradigms, and pragmatism was hailed as the peacemaker between these disagreements. Pragmatists rejected the thesis that quantitative and qualitative researches are incompatible. Instead, in pragmatist research, paradigms can remain separate or they can be combined into another research paradigm.

**Pragmatism**

Pragmatism is a framework that is used for mixed methods research. It has been called the “philosophy of common sense” (Shields, 1998, p. 197). It draws on various ideas. It uses “what works” (Creswell & Clark, 2010, p. 43). It values both subjective and objective knowledge and purports that the ‘best fit’ should be about the research question rather than the theoretical lens or paradigm that underpins the model (Scott & Briggs, 2009). This is due to its versatility in providing the researcher with both quantitative and qualitative approaches to collecting data in response to the respective research question.

Pragmatic research differs from that which is paradigm orientated. Paradigm driven research focuses on ideas and their origin and it drives the research. Hammond (2000) suggests that a pragmatic approach is more interested in obtaining results that can be linked practically. Therefore a pragmatic position works well with a mixed methodology.

**Sequence of the Mixed Analysis**

The connecting of both the quantitative and qualitative strands of this study occurred during the collection of the data and the interpretative stage of the process. The quantitative analysis phase of this mixed method study was conducted first
Doctorate Portfolio

(Creswell & Planto Clark, 2010). This phase of the study was preparatory in design. Here connections that occurred from using the results of the first phase of the study were used to shape the collection of data in the second phase. This guided the questions that were asked by the researcher in the second phase. Although the two sets of analyses are independent, each provides an understanding of the phenomenon (factors that might affect African Caribbeans choosing carers in counselling psychology). The second mixing occurred after both sets of data were collected and analysed separately. At this final stage interpretations of both the quantitative and qualitative data were compared, contrasted and combined (Combs, 2010; Creswell, 2009; Creswell & Planto Clark, 2010; Tariq & Woodman, 2010). Both methods play an important part in addressing the research question.

When this is done it offers the possibility of being incorporated into a framework that might offer some possible explanations to inform practice and recruitment of African Caribbeans into Counselling Psychology. Although these methods are diverse, both are important for this study. Because quantitative research focuses on larger sample groups, the researcher was able to recruit from a purposive sample, African Caribbean participants. The qualitative method allowed the researcher to use a more inductive approach: semi-structured face to face interviews which were analysed using thematic analysis. The aim of this was to provide deeper understanding of the issues around factors that might influence African Caribbeans’ choosing counselling psychology as a career choice.

**Phase 1. Quantitative Methods**

Quantitative approach was used in the first phase of the study. This was the preparatory stage of the study and a questionnaire was used to gather some general information regarding the research question.
Rationale for using survey questionnaire. This study used both a paper and a web-based questionnaire. Conducting a survey questionnaire is a means of obtaining quantifiable results as they pertain to attitudes, opinions or trends (Creswell, 2002). It is a quick and efficient way of gathering data within a specified time frame and it reduces researcher bias. The use of the questionnaire provided a quick access route to the African Caribbean community, in particular the undergraduate students. African Caribbean psychology students form a small percentage of the student population and using the survey made it easier to recruit participants from universities farther afield (Creswell, 2009; Fox, Murray & Warm, 2003; Hanley, 2011; Schmidt, 1997).

Furthermore, as an initial contact it provided anonymity so that participants could be free in the responses that they gave. The findings from the questionnaire were used to guide the questions in the semi-structured interviews. They were also useful in keeping the researcher focused on the research question at hand. In mixed methods the research question plays a vital and central role to the process that evolves and emerges (Onwuegbuzie & Leech, 2006). Although a modest sample was used, using a survey questionnaire would provide the researcher with some degree of generalisation within the African Caribbean community. However, using data from a questionnaire provides little insight into the subjective experience of the participants (Strier & Kurman, 2009) but through the use of semi structured interviews the views of the participants will become known.

Recruitment and Selection of Participants – Quantitative Phase

A convenience sample of 121 participants who were of African Caribbean descent was recruited over a period of four months. This study considered three participant groups. The first group was made up of undergraduate psychology students, the second
group consisted of 16-18 year old students and the third group was comprised of African Caribbean parents.

**Undergraduate psychology students.** Studies show that African Caribbeans live predominantly in the larger cities of the UK (Oluwatayo & Gater, 2005; Reynolds, 2006; Street, Stapelkamp et al., 2005). Therefore, initially telephone contacts were made to university admissions departments in the West Midlands, Manchester, Leeds, London, Bristol and Nottingham. Students from the University of Wolverhampton were also recruited through the student participant pool system. The telephone calls were followed up by sending an email letter to the various Heads of Psychology Departments within the universities mentioned (Appendix D). The email letter was sent with a request that the information be directed towards African Caribbean psychology students. An information sheet/poster recruiting participants was also sent (Appendix E). This contained the URL link to the online survey questionnaire with Survey Gizmo (Appendix F). Responses from the universities were slow and the researcher decided that it would be prudent to contact other universities as well. A list of the top 100 universities in the UK was used for this. This was accessed via the internet (Appendix G). Secretaries from a number of university African Caribbean Societies were also emailed (Appendix H).

**16-18 year olds.** Participants for this group were recruited through schools, colleges, and youth and church groups. Initially telephone calls were made to Heads of Sixth Form in Secondary Schools and Colleges. Speaking to Heads of Department by telephone proved quite difficult as many also taught classes. Email letters, (Appendix I) together with a word formatted copy of the questionnaire were subsequently sent out to all the schools and colleges that were contacted for their perusal (Appendix J). When the researcher first contacted the schools and colleges an enquiry was made regarding
whether it would be appropriate to visit the school or college in order to speak to students about the research. Of those contacted it was agreed that the information would be emailed and the school or college would give it to the respective students. As with undergraduate students, an information sheet/poster containing the URL link to the online survey questionnaire via Survey Gizmo was sent (Appendix K). The Schools and Colleges were based in Birmingham, Northamptonshire, Bristol and Wolverhampton (Appendix L).

Telephone conversations and face to face contact were made with youth group leaders and Church leaders in Northampton, London, South Wales and Wolverhampton (Appendix M). The researcher also asked permission to visit the youth clubs in order to speak to potential participants. Of those asked, some agreed to this. Others requested copies of the questionnaire to take away and return at a later date. Both requests were granted by the researcher. Of those living outside Northampton, a word formatted copy of the questionnaire was downloaded from the Survey Gizmo website and forwarded to individuals. Others received the information sheet/poster containing the relevant URL link to the online questionnaire.

**African Caribbean parents.** Parents were recruited from Northamptonshire, South Wales, London and Wolverhampton. African Caribbean Community Associations (Appendix N) were also contacted but no responses were forthcoming. Of those who took part, some were from churches, hairdressing salons and barber shops. These venues were chosen because they are important meeting places within the African Caribbean Community. Face to face contact was carried out at a number of hairdressers and barbers’ shops (Appendix O).

Proprietors were asked if they were willing to ask their clients to complete a questionnaire or if the researcher could approach their respective clients to find out if
they were willing to take part in the questionnaire. The responses were mixed. Some proprietors were happy for the researcher to speak with their clients; others requested that the information be left and the proprietor would speak to the clients. In all cases, proprietors were shown an information sheet/poster containing information about the study together with details about the URL Link (Appendix P). Word formatted copies of the questionnaire was also handed out where appropriate (Appendix Q). Contact was also made by telephone and face to face with church ministers and church members. Some church leaders requested further information and in such instances an email letter was sent (Appendix R).

The criterion for parental participation was set so that any parent could participate. Furthermore, due to time constraints and difficulty with recruiting participants, the researcher did not think it would be feasible to try and recruit solely parents of children who were currently studying at a university.

**Demographics of participants.** The total number of participants that took part in this phase of the study was 121. 33.9% were undergraduates; 32.9% were from the 16-18 years old category and 33.9% were parents. Total number of male participants was 24.8 % (N = 30). Female participants totalled 72.7% (N = 88). 2.5% of participants omitted their gender.

**Undergraduate psychology students.** A total of 41 undergraduate psychology students participated in the questionnaire. Of the 41, 36 were females; 3 were males and 2 did not specify gender. They were from the University of Wolverhampton participant pool and other universities in the UK. Their ages ranged from 18 years to 54. All participants completed the questionnaire online.

**16-18 year old participants.** A total of 39 participants (13 males and 26 females) took part in this study. Of the 39, 19 completed the questionnaire online and 20
completed paper copies of the questionnaire. The participants that completed the paper copies lived in Northampton, Birmingham and Wolverhampton. The online questionnaire was completed by participants living in London (N= 11) Bristol area (N= 4) not specified (N=3) and Wales (N=1).

**Parents.** A total of 41 parents took part in this study. Their ages ranged from 25 years to 55 years. Of the 41 participants, 10 completed the questionnaire online and 31 completed paper copy versions.

**Materials and Procedure**

**Constructing the questionnaire.** The dearth of UK studies exploring the interest of African Caribbeans in counselling psychology meant that the researcher had little available data. Questions were planned based on a number of themes rising from the literature and also some from areas in which the researcher had an interest. The pool of questions were discussed and critiqued by RD and CW (supervisors) as well as other professionals working within the field of education (HR, Ethnic Minority Achievement Advisor). Statements and questions were written around the following:

- Perceptions about and knowledge of both psychology and counselling psychology
- Whether participants had studied or were studying psychology
- Different career interests including either psychology or counselling psychology
- Experience of school and underachievement of African Caribbeans
- Parental support
- African Caribbeans as mature students
- Postgraduate studies

Consideration was also given to the ordering of questions. They started general and became more focused. This was achieved by compiling the questions around the
different areas of interest. Compiling the questions in this way also meant that the ones that could be perceived as more personal were at the end (Aday & Cornelius, 2006).

The constructed questionnaire was distributed online and in paper format. This was devised by the researcher and created through Survey Gizmo. This questionnaire was exploratory by design. Its purpose was to gain information that would prove helpful in formulating questions for the second phase of the study. Three separate questionnaires were devised, one for each participatory group. The participants were asked to complete a questionnaire using a 5 point Likert type scale where 1 = “Strongly disagree”; 2 = “Disagree”; 3 = “Not sure”; 4 = “Agree” and 5 = “Strongly agree”.

A 5 point Likert type scale was used for this phase of the study because it is one of the most widely used scales in social science research. Its strength lies in its ability to capture various aspects of a person’s attitude extending from belief to behaviour or agreement to disagreement with fairly complex belief statements or attitudes (Manstead & Semin, 2001). Some research has been carried out regarding the optimum numbers of response alternatives that are needed for scale reliability (Matell & Jacoby, 1971; Weng, 2004). Although there has not been a clear answer emerging from the studies about this, the conclusion drawn is that a minimum number of four categories is needed to ensure reliability. It was noted that with fewer than four responses the validity and reliability decreased (Muniz, Garcia-Cueto & Lozano, 2000). Some studies argued that reliability can be maximized with seven response alternatives whereas some say five is the maximum (Matell & Jacoby, 1971; Weng, 2004). In fact the results showed no significant difference when the number of alternatives surpassed five or six (Lozano, Cueto & Muniz, 2008; Muniz, et al., 2000).

**Pilot study.** A pilot study was conducted before the survey was launched. This led to the wording in some of the questions being modified in order to improve clarity
(Chow, Quine & Li, 2010). Five participants (1 male and 4 female) completed this. None of these participated in the main study of this research.

**Measures.** Three questionnaires were administered. Each questionnaire varied slightly in the total number of items administered. All participants were asked to answer questions 1 – 7. Question 8 varied for undergraduate students. Questions 9 -16 were completed by all participants. Question 17 differed for parents. Questions 18 – 37 were completed by all participants. Questions 38 -39 only related to parents and undergraduate students. These two questions compared the experience of undergraduate participants between school and university. Of the 34 questions administered on the questionnaire ten (10) requested open responses from the participants.

On accessing the questionnaire the participants were given some information about the study and were asked to give their consent if they wished to complete the questionnaire. The completed paper copies were either returned to the researcher or a convenient time and place was arranged by the researcher to collect the questionnaire.

**Missing data.** The procedure as outlined in SPSS for coding missing data was adhered to.
Phase 2: Qualitative Methods

The second phase of this mixed methodology is the qualitative component. Its aim, in conjunction with the quantitative phase, is to provide a more comprehensive account of the research question (Bryman, 2006). Qualitative methods are suited to study different people groups, particularly those who are underrepresented in mainstream psychological assessments or within counselling psychology theory. It is also appropriate where there is a lack of research in a particular area (Richardson, 1996 cited in Sizq & Target, 2009). Secondly, qualitative research methods are less structured than the techniques used in quantitative methods and are appropriate when the research is exploratory in nature (Jarratt, 1996). Thirdly, qualitative methods relate very closely to counselling psychology practice (Yeh & Inman, 2007). It is a valuable approach in understanding the meaning that people attribute to their life experience or situation.

Qualitative research has been described as:

“an enquiry process of understanding based on distinct methodological traditions of inquiry that explore a social or human problem. The research builds a complex, holistic picture, analyses words, reports detailed views of informants, and conducts the study in a natural setting” (Creswell, 1998, p.15).

What is more, qualitative research can bring to the fore new or unexpected knowledge to areas that are less researched or unknown (Creswell, 1998; Ponterotto, 2002).

Rationale for using semi-structured interviews. For the second phase of the study semi structured interviews were used and analysed using a thematic analysis approach as outlined by Braun & Clarke (2006). Using semi structured-interviews allowed for a discussion of predetermined topics but also for new or unexpected topics that emerged. Participants were free to tell their story and share their points of view in their own words (Condelli & Wrigley, 2004; Strudwick, 2010). Using this method provided a
more in-depth knowledge of participants’ experiences, thoughts, beliefs and opinions (Tariq & Woodman, 2010; Teddie & Tashakkori, 2009).

Furthermore, Chenail (1997) viewed interviewing as a natural form of enquiry to be used due to the similar ways in which counsellor and therapist interact with their clients within sessions. As used in the therapy room, open-ended questions can be used for maximum benefit in the interviewing process. Asking questions gave flexibility to the researcher. It allowed the researcher to glean information in order to bring insight into areas or situations where relatively little is known (Robson, 2002). Furthermore, open ended questions provide the space to build rapport with the participants, gain trust and open up communication.

Although qualitative research offers more methodological freedom and increases the capacity for creativity and its methods is a useful tool to discover and understand the perspective of participants the researcher is aware of the possible downside of subjectivity; the influence of the researcher on the research design; conscious and unconscious biases with the participants as well as the interviewee and the potential to have generalisation of findings. However, Diefenbach (2009) asserts that “science in general is a human endeavour and one cannot have ideas, assumptions, theories, and formulas without the human factor” (p. 876). It is the ‘human factor’ in qualitative research which is akin to the ethos of counselling psychology that can be seen as its strength. For Yeh & Inman (2007) the researcher is “inextricably linked” (p.371) to the research process and cannot be separated. The researcher acknowledges this phenomenon through a reflexive process (Thorpe, 2013; Willig, 2013). That is the researcher reflects on the way in which her values, experiences and interests may have influenced the research process as well as exploring how the research may have affected and possibly changed the researcher (see Critical Appraisal).
Rationale for using Thematic Analysis. Thematic analysis is a qualitative method that is used “for identifying, analysing and reporting patterns within data” (Braun & Clarke, 2006, p. 79). It is also a process of “encoding qualitative information” (Boyatzis, 1998, p. vii). In this study, it was used to explore the gap in current counselling psychology literature regarding African Caribbeans choosing a career in this field by focusing on and identifying themes within the said community that might highlight or give understanding to this phenomenon (Fielden, Sillence & Little, 2011). Themes have been identified as capturing “something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set” (Braun & Clarke, 2006, p.82; Boyatzis, 1988). This is an exploratory study and as such is inductive in its approach, derived bottom-up from the researcher’s reading of the data. As a methodological tool, then, thematic analysis seeks out recurring patterns that are located within the data.

Using thematic analysis provides not only rich data but an interpretation of different aspects of the research topic, by extracting the salient themes and recurring patterns. A rich thematic description of the data can provide a sense of “the predominant and important themes” (Blacker, 2009, p.83).

Like pragmatism, thematic analysis is not dependent on a particular epistemological position, paradigm fit, or theoretical position but rather that it “matches what the researcher wants to know” (Braun & Clarke, 2006, p.80), thus making it a flexible research tool that can be used within different theoretical frameworks. This flexibility allows patterns or themes within thematic analysis to be identified in either an inductive or deductive way. This study does not have a hypothesis as it is not testing a theory. Rather it is seeking to explore probable ideas, concepts, reasons or beliefs that the
African Caribbean community may have about choosing a job as a Counselling Psychologist.

Although thematic analysis is widely used, some argue that it lacks clear guidelines about its use, or indeed, what it is. It is often viewed as a foundational tool rather than a specific method in its own right (Boyatzis, 1988). Essentially a lot of analysis is thematic but often researchers claim that it is something else (Attridge-Stirling, 2001; Braun & Clarke, 2006; Fielden et al., 2001). The question then is if a researcher does not report how data within a piece of research is analysed, it becomes difficult to evaluate the research or to draw comparisons with other similar research. Taylor & Ussher (2001) postulate that reporting solely that themes emerge from the data or the concept of ‘discovering themes’ is a passive way of accounting about the analysis process. Reporting in this manner denies the researcher from being involved in the identifying, selecting, as well as reporting of the themes and patterns that are of interest to the close nature of the topic between the researcher and the researched group.

Some scholars used to doing quantitative research have criticised qualitative research for having an “anything goes” type attitude and being unclear (Braun & Clarke, 2006, p. 95). It has at times been perceived as not real research. However, rigorous methods of analysis that can be adapted to the data do exist (Laubschange, 2000). The reporting of clear guidelines and the precise epistemological stance that is suited to the research question are very important in this regard (Crotty, 2009; Silverman, 2000; Yardley, 2000). The researcher has sought to follow this in this study.

**Consideration of other methods.** In conducting the qualitative aspect of this research the researcher considered using other methods. For example, careful thought was given to using an Interpretative Phenomenological Analysis (IPA) approach. IPA is a very popular choice with counselling psychology researchers both in Counselling
Psychology Review and doctorate studies. IPA is a form of phenomenological enquiry which seeks to explore individuals’ lived experiences and how individuals make sense of that experience; that is, the meanings that are attached to the experience (Rizq & Target, 2009; Starks & Trinidad, 2007). A typical sample size for an IPA study range from 1 to 10 persons. The aim of this research is to explore factors about a phenomenon that had not been part of the experience of the participants and to capture participants’ opinions and thoughts about a career in counselling psychology. In order to do this a bigger sample size was required. IPA did not fit with the research question.

**Recruitment and Selection of Participants – Qualitative Phase**

**Participants.** Using a mixed method study allowed the researcher to choose the same participants as in the first phase or to recruit new participants. Contact was made with some of the participants that had completed the first phase of the study (the questionnaire). However, none were available to participate in the interviews. Therefore, 10 new participants were recruited for the interview. Of the 10, 4 were 16-18 year olds; 4 were parents and 2 were undergraduate psychology students.

The initial research proposal submitted by the researcher did not account for 16-18 year old participants being interviewed. On reflection and discussing it with supervisors, it was agreed that it was important for the voice of these participants to be heard. An amendment was submitted to the Chair of the Ethics Committee and it was duly agreed that four 16-18 year olds could be added to the interview process (Appendix S). These participants were recruited from local church groups and hairdressing salons. Parents were selected through various contacts and organisations known to the researcher. The two undergraduate participants were recruited through the student participant pool at the University of Wolverhampton. Efforts were made by the researcher to make the sample representative of both males and females.
**Sample size.** The participants were recruited purposively for this study. These are participants who have experience of the key concepts being explored. Although writing from an American perspective, research suggests that underrepresented groups have historically been excluded from psychological research (Lions, Bike, Ojeda, Johnson, Rosales & Flores, 2013). Maximal variation sampling, a purposive strategy, allows the researcher to choose participants who may hold a different perspective on the Eurocentric viewpoint (Creswell, 2006). 16-18 year olds, parents and undergraduate students were chosen in order to hear their perspective on the research question. The aim of this study was to interview 4 participants from each group. Due to difficulties in recruiting undergraduate students the net result was 2 participants.

Table 2

**Demographic Information of Interview Participants**

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Gender</th>
<th>Marital Status</th>
<th>Educational establishment</th>
</tr>
</thead>
<tbody>
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<td>Single</td>
<td>N/a</td>
</tr>
<tr>
<td>Parent</td>
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<td>Single</td>
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<td>Married</td>
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</tr>
<tr>
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<td>Single</td>
<td>School</td>
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<tr>
<td>16-18 years</td>
<td>16</td>
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<td>30</td>
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<td>Single</td>
<td>University of Wolverhampton</td>
</tr>
</tbody>
</table>
Ethical Approval

Ethical approval for this study was given by the University of Wolverhampton Ethics committee (Appendix A) following minor amendments (Appendix B). Please see Appendix C for a copy of the RES 20A. Participants who took part in the survey questionnaire were advised that their participation was voluntary and that they were free to withdraw at any time. Ethical issues were further considered prior to conducting the semi-structured interviews. These issues were addressed both verbally and in the written instructions and consent forms given to the participants. Participants were advised about the nature of the study and what the researcher hoped to achieve from the study. No ethical issues arose from the survey questionnaire, semi-structured interviews or during the processing of the data.
Results
Quantitative Phase
Results

Analysis Results

Data analysis was performed using SPSS version 20. This test was preparatory in design. Its main purpose was to highlight the type of areas that were significant from the questionnaire. A series of One Way Analyses of Variance (ANOVA) was conducted to determine whether there were any significant differences between the means of the three independent (unrelated) groups; namely 16-18 year olds; parents and undergraduate students. When a significant effect has been found using analysis of variance, it is still not known which means differ significantly. Post hoc tests were carried out to find out where the differences lay (Bewick, Cheek & Ball, 2004).

The under-mentioned topics were highlighted from the ANOVA. None of the other questions revealed a significant level of difference at $p > 0.5$.

- Student of psychology
- Level of study
- Choosing a career in psychology
- Psychology as a professional career discussed in the home
- Knows the job of a counselling psychologist
- Counselling psychology is a professional career
- The subjects chosen reflect academic interests
- Support of parents
- School informed about psychology
- Creative career choice: music, dance and sports

The participants’ responses to each statement were given on a five-point Likert scale (1=strongly disagree; 5 =strongly agree). A series of One Way Analyses of Variance (ANOVA) was conducted to determine whether there were any significant differences
between the means of the three independent (unrelated) groups; namely 16-18 year olds; parents and undergraduate students.

**Student of psychology.** A one way between groups ANOVA was conducted to explore whether 16-18 year olds and undergraduates have studied or are currently studying psychology. Parents were asked to identify if their child/children were or had been students of psychology. There was a statistically significant difference between groups \[F (2, 118) = 62.01\] \(p = .000\).

Figure 4

**Student of Psychology**

![Bar chart showing positive score for 16-18 yrs: M = 1.31, SD = .468, UG: M = 2.00, SD = .000, Parents: M = 1.20, SD = .502.]

Figure 4 shows post hoc comparisons using the Tukey HSD test indicated a group difference between undergraduates \(M = 2.00, SD = .000\) and parents \(M = 1.20, SD = .502\) but not significantly different from 16-18 year olds \(M = 1.31, SD = .468\) These results suggest that parents and 16-18 year olds are saying that psychology is not a subject that this age group is studying/has studied. Undergraduate students score marginally higher because they are undergraduate psychology students and are likely to have studied psychology at AS/A level.
**Level of study of psychology.** A one way between groups ANOVA was conducted to explore the level of study of psychology for 16-18 year olds and undergraduates. Parents were asked indicate if their child/children had studied psychology. There was a statistically significant difference between groups \[ F(2, 118) = 252.64, p = 0.00. \]

Figure 5

*Level of Study in Psychology*

Figure 5 shows that post hoc comparisons using the Tukey HSD test indicated a group difference between undergraduates \( M = 5.00, SD = .000 \) who were studying psychology and parents \( M = 1.41, SD = .974 \) whose children were least likely to be students of psychology. The group difference between 16-18 year olds \( M = 1.62, SD = 1.016 \) and parents \( M = 1.41, SD = .974 \) were minimal.

*I would like to pursue a career in psychology.* A one way between groups ANOVA was conducted to explore whether 16-18 year olds and undergraduates were interested in pursuing a career in psychology. Parents were also asked if they would like their child/children to pursue a career in psychology. There was a statistically significant difference between groups \[ F(2, 17) = 46.32, p = .000. \]
Figure 6 shows that post hoc comparisons using the Tukey HSD test indicated a group difference between 16-18 year olds $M = 2.49$, $SD = 1.167$ and undergraduates $M = 4.51$, $SD = .711$. The scores suggest that undergraduates are more interested in a career in psychology compared to 16-18 years and parents seem more interested in psychology as a possible career choice for their child/children.

*Psychology has been discussed as a possible career choice at home.* A one way between groups ANOVA was conducted to explore whether participants discuss psychology as a career option at home. There was a statistically significant difference between groups $[F = 2, 113] = 31.41$, $p = .000$. 

![Figure 6: Participants Interest in a Career in Psychology](image-url)
Figure 7 shows that post hoc comparisons using the Tukey HSD test indicated a group difference between parents $M = 2.58$, $SD = 1.083$ and undergraduates $M = 3.85$, $SD = 1.226$. Scores appear to indicate that conversations at home are occurring more with undergraduate participants than 16-18 year olds. In this question, parents were asked if they held discussions at home, with their children, about pursuing a career in psychology. Parents’ score show that little discussion is being initiated by them.

I am aware of what a Counselling Psychologist does. A one way between groups ANOVA was conducted to explore participants’ knowledge about the role of a counselling psychologist. There was a statistically significant difference between groups $[F = 2.116] = 5.52$, $p = .05$. 
Figure 8 shows that post hoc comparisons using the Tukey HSD test indicated a group difference between parents $M = 3.78$, $SD = .791$ and 16-18 year olds $M = 3.21$, $SD = .991$. The difference is minimal between parents and undergraduates. These figures suggest of the groups, 16-18 year olds knew less about the job of a counselling psychologist.

_Counselling psychology is a professional career._ A one way between groups ANOVA was conducted to explore participants’ perception of counselling psychology as a professional career. There was a statistically significant difference between groups $[F = 2.117] = 7.36$, $p = .001$. 
Figure 9

*Participants’ Perception of Counselling Psychology as a Professional Career*

Figure 9 shows that post hoc comparison comparisons using the Tukey HSD test indicated a group difference between undergraduates $M = 4.40$, $SD = .545$ and 16-18 year olds. $M = 3.67$, $SD = .927$. This suggests that of the groups, 16-18 year olds were less certain about the professional status of counselling psychology.

*The subjects that I have chosen to study reflect my academic interests.* A one way between groups ANOVA was conducted to explore whether participants’ academic interests were reflected in the topics that they studied. Parents were asked whether the subjects chosen by their children reflected their own (parents’) academic interests. There was a statistically significant difference between groups [$F = 2.113] = 36.60$, $p = .000$. 
Figure 10 shows that post hoc comparison comparisons using the Tukey HSD test indicated a group difference between parents $M = 2.33, SD = 1.108$ and undergraduates $M = 4.23, SD = .742$. The inference is that parents indicated that they did not perceive that the choice of subject chosen by their children should reflect parental choice whereas it seemed more likely that subjects chosen reflected the academic interest of undergraduates.

*I know that I will have parental support in whatever work I choose to do.* A one way between groups ANOVA was conducted to explore whether participants believed that they would be supported by their parents in their chosen field of work. There was a statistically significant difference between groups [$F = 2.114] = 6.36, p = .002. 
Figure 11 shows that post hoc comparisons using the Tukey HSD test indicated a group difference between parents $M = 4.70$, $SD = .516$ and undergraduates $M = 4.10$, $SD = .995$. This suggests that parents perceived that they would be more supportive to their children compared to the perception held by undergraduates and 16-18 year olds.

*I was well informed at school about the subject of psychology.* A one way between groups ANOVA was conducted to explore how well the school informed participants about psychology. There was a statistically significant difference between groups [$F = 2,113] = 7.34$, $p = .001$. 

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**Parental Support in Career Chosen**

<table>
<thead>
<tr>
<th></th>
<th>Positive Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-18</td>
<td>4.13</td>
</tr>
<tr>
<td>UG</td>
<td>4.1</td>
</tr>
<tr>
<td>Parents</td>
<td>4.7</td>
</tr>
</tbody>
</table>

16-18 Yrs: $M = 4.13$, $SD = .935$

UG: $M = 4.10$, $SD = .995$

Parents: $M = 4.70$, $SD = .516$
Figure 12 shows that post hoc comparison comparisons using the Tukey HSD test indicated a group difference between parents $M = 2.21$, $SD = .951$ and undergraduates $M = 3.18$, $SD = 1.357$. $M = 2.78$, $SD = 1.031$. This suggests that parents were more likely to agree that the information given by the school about psychology was inadequate whereas undergraduates seemed to receive better information from the school.

*I would like to pursue a creative career such as music, dance, drama or sports. A one way between groups ANOVA was conducted to explore participants’ perspective about careers in music, dance, drama or sports. There was a statistically significant difference between groups $[F = 2.115] = 15.39$, $p = .000$.*
Figure 13

Scores relating to choosing creative careers: music, dance, sports.

Figure 13 shows that post hoc comparison comparisons using the Tukey HSD test indicated a group difference between 16-18 years M = 3.32, SD = 1.297 and undergraduates M = 1.90, SD = 1.033. This suggests that of the groups, 16-18 year olds were more likely to choose creative careers.
**Summary of Findings**

The findings from the quantitative phase of the study highlighted that psychology did not appear to be a popular subject to study in particular for 16-18 year olds and although parents appeared more interested in a career within psychology for their children, it was not an overwhelming response. This perspective was supported by comments which participants made when completing the open response questions. For example, the analysis from the open-ended responses showed that a significant number (N = 18) of 16-18 year olds of the total number (N = 39) reported that they were “not interested” in pursuing a career in psychology. Similarly, participants used words such as “not for me”, “don’t like it” and “pointless” to describe their opinion regarding a career in psychology. Of the 39 participants, one indicated an interest in psychology if prior plans do not materialise. Another said “I’m not sure if I would be as successful as other career choices”, suggesting a lack of confidence (see Appendix 4: Confidential Attachment for the above responses).

All participants indicated that parental support was available but parents mean score indicated that they agreed with it more than the other participant groups. Parents said that they would support their children if they wanted to pursue a career in psychology. Others did not respond to this question (N =9). Some parents indicated (N = 20) that they were not particularly influential in the career choices made by their children: words such as “times have changed children are taking careers then choosing without being told what and what they cannot do” or “all depends on what he/she wants to pursue” were used by parents (see Appendix 5: Confidential Attachment).

On the whole, participants professed knowledge about the role of a counselling psychologist. Parents indicated that they knew slightly more about the role compared to the undergraduates. This might be from personal knowledge or information gleaned...
from various sources, but, their answer to the open response for this question did not concur. A few parents omitted to respond to this question or simply said "Don’t really know what they do". Some parents viewed it as “providing a counselling service” (Appendix 5) and a few participants disclosed that they had benefited from having counselling. There was no indication from the participants that this was with a counselling psychologist.

Although parents and undergraduates were quite sure that counselling psychology is a professional career, their open responses did not always corroborate and 16-18 year olds appeared less certain about the claim. This was confirmed in the open responses that they gave. For example: “I don’t really know what they do”, and whilst others had heard about counselling psychology through their friends, teachers or looking at the UCAS website, a few “had never heard of it” (Appendix 4). One participant did not know anyone working in the field and still others said that they had received counselling.

On the whole undergraduates had knowledge about the job of a counselling psychologist: for example one participant said: “Counselling psychologists are a relatively new breed of professional applied psychologists”. In fact two participants indicated a possible career choice in this field. However, a number were unaware that such a career existed and a few were confused as to whether it was the same as psychiatry or counselling: “I’ve never quite heard it as ‘counselling psychologist’ but I know what a councillor does if that’s the same thing” (see Appendix 6: Confidential Attachment for responses).

School generally did not appear to be as good in its communication regarding giving information about studying psychology at GCSE and A-level. However undergraduates’ mean score indicated that they received more information than parents
or 16-18 year olds. Is it because 16-18 year olds lacked an interest in psychology that they did not access available information and therefore parents did not receive it, or are schools failing in their duty to provide a broad range of options to their students? Participants were asked if their chosen subjects reflected their academic interest and this was most likely with undergraduates. Parents were in agreement that the subjects chosen should reflect the choice of their offspring rather than themselves.

In terms of choosing a career in music, dance, drama or sports 16-18 year olds showed more interest than their parents. Undergraduates showed very little interest in this.
Phase 2: Qualitative Phase

The second phase of this mixed methodology is the qualitative component. Its aim in conjunction with the quantitative phase is to provide a more comprehensive account of the research question (Bryman, 2006). The qualitative method used was semi-structured interviews. These were analysed using a thematic analysis approach as outlined by Braun & Clark (2006).

Semi-structured interview questions. The construction of the questions used for the interview process came from the first phase of the study. A list of 25 questions was compiled by the researcher for both the undergraduates’ (Appendix T) and 16-18 year olds’ interviews (Appendix U). Questions that were asked to parents totalled 26 (Appendix V). Table 3 highlights the areas that were identified as significant from the quantitative data collected from the questionnaires that were completed by the participants.

Table 3
Areas Highlighted as Significant From the Questionnaires

- Student of psychology
- Level of study in psychology
- Would like to pursue a career in psychology
- Psychology as a career discussed at home
- Aware of the job of a counselling psychologist
- Counselling psychology is a professional career
- Chosen studied subjects reflect academic interest
- Parental support given
- Informed by school about the subject of psychology
- Choosing creative careers such as Music, Dance, Drama or Sports
Some supplementary questions were added by the researcher and although they did not come straight from the analysis of the questionnaire, they were considered prudent in terms of the research question. Questions relating directly to the perception of African Caribbeans to mental health issues and the type of service that is provided were added. Questions relating to learning at school were added. Further questions exploring the kind of careers that family members or friends pursued were included. Questions relating to parental perception about the type of career they envisaged for their child as well as whether or not participants had considered choosing a career in counselling psychology were also added.

Procedure. Individual face to face semi-structured interviews were conducted by the researcher. Each interview was digitally recorded. Prior to the interview the participants were given a pack containing an information sheet, a consent form, contact details form and also a list of possible agencies to contact if they were concerned by items raised in the interview (Appendix W). Each participant was asked to sign the consent form before the interview took place (Appendix X).

Interviews were conducted at a place best suited for the participants. The undergraduate participants were interviewed at the University of Wolverhampton. Of the 4 parents, 2 were interviewed in their homes and two were interviewed at the home of the researcher. On both occasions this was at the request of the participants. As a safety precaution the researcher ensured that family members were present and aware that the interviews were taking place. Doors were left ajar and the researcher had access to a mobile phone. Of the 16-18 year olds, 2 were interviewed at their homes; one was interviewed in a hairdressing salon and the fourth in a room within an office. The interviews lasted between 20 and 40 minutes. Prior to commencing the interviews the
participants were again told about the study and informed of their right to withdraw from the process at any time.

**Data analysis.** Following the recording of the interviews onto a digital recorder, the interviews were uploaded onto the computer and transcribed by the researcher (Appendix Y: see Confidential Attachment). Before commencing the typing of the transcript the lines were numbered. Pseudonyms were used for names and places throughout the transcript to ensure confidentiality and anonymity of all the participants.

The format used for the outline of the typed transcript was an adapted version of Silverman’s syntax of conversation analysis as adapted by Gubrium & Holstein (2002). This version was simplified: short pauses were indicated by a series of dots and longer ones were identified by placing ‘pause’ in parenthesis. Actions such as laughter, laughing, coughing were also identified in parenthesis. Using a more complicated system of codes could prove exhausting and difficult to read and understand (Gubrium & Holstein, 2002). Because of its flexibility, thematic analysis does not have a particular set of guidelines to follow but it does require the transcript to contain the necessary information and be verbatim, that is true to the original transcript (Braun & Clarke, 2006). This study aims to provide a “rich thematic description” (Braun & Clarke, 2006, p.83) of the data in order that its readers get a sense of the important themes that matter to the participants. This in turn can offer guidance and insight when considering the need for recruiting African Caribbeans.

All of the interviews were analysed using the six phase model outlined by Braun & Clarke (2006).

Phase 1: Familiarisation with the data. This involved the researcher reading and re-reading the data in order to become familiar with it, paying particular attention to any possible patterns that were occurring.
Phase 2: Generating initial codes. Coding identifies information which appears interesting to the researcher that may form the foundation of repeated themes across the data set. A systematic coding of interesting features relevant to the research question across all of the data was carried out. The coding was performed manually.

Phase 3: Searching for themes. This involved collating codes into themes and gathering all data relevant to that theme. Themes developed when ideas recurred in the text: for example the ‘school environment was not helpful’ or ‘I’ve not heard about it before’. Here the researcher began to gather some possible themes and wrote them down on pieces of paper. All codes that were considered relevant to the research question were incorporated (Appendix Z: see Confidential Attachment).

Phase 4: Reviewing themes. This involved checking that the themes corresponded and were appropriate for coded extracts. The generating of thematic maps for the analysis took place (Braun & Clarke, 2006). Here separate themes were amalgamated to form one theme. Re-reading of the data set was undertaken to ascertain whether the themes fitted well together and also to code any additional data that might have been initially missed.

Phase 5: Defining and naming themes. It was important that each theme was clearly refined and defined so as to try and convey the core meaning of each theme.

Phase 6: Producing the report. This was achieved by selecting the right extract to illustrate the themes and relating it back to the research question and the literature.

All three groups were analysed separately. Themes that emerged were checked against the transcript to ensure reliability (Strudwick, 2010). A thematic map was created for each group with a final map that drew together all the main themes from all three participant groups.
Findings from Thematic Analysis

This section outlines a summary of the thematic analysis from all three participatory groups. All of the themes mentioned had a number of sub themes within them. The themes arising from the interviews were so similar that they were placed under very similar main headings. Firstly, the themes that came from individual participatory groups are mentioned. Secondly, it is followed by a combined thematic map of themes and sub themes, and thirdly the findings from the over-arching themes are presented. All names and places have been changed to protect the identity of the participants.

Undergraduates. The main themes that emerged from the undergraduates’ transcripts related to: (1) concepts of psychology (2) school experiences (3) knowledge of counselling psychology and the likelihood of a career in counselling psychology (4) mental health (5) music dance and sports (6) mentors and (7) support. All of the main themes consisted of sub themes (Appendix 7).

16-18 year olds. The main themes that came from the 16-18 year olds’ transcripts were around: (1) perceptions of psychology (2) school experience (3) mentors (4) knowledge of counselling psychology and possible career in counselling psychology (5) attitudes to mental health (6) support and (7) careers in music dance and sports. All of the main themes consisted of sub themes (Appendix 8).

Parents. The themes that emerged from the parents’ transcripts were: (1) perception of psychology (2) experiences of school (3) perception of counselling psychology and career in that domain (4) mental health (5) career of family members (6) music dance and sports and (7) mentors (Appendix 9).
**Combined Results**

The over-arching themes significant across all three participatory groups were:

- Perception of psychology
- Studying psychology and making a career choice in psychology
- Knowledge of counselling psychology and choosing a career as a counselling psychologist
- Experiences of School
- Creative careers: music, dance and sports
- Mental health and service provision
- Family support and making career choices

Undertaking the thematic analysis process produced some key concepts that became apparent from the data. These themes are important in giving some probable understanding to the findings from the quantitative phase of the study. These findings are responses that were common across all three groups. The themes and sub themes are outlined below.

**Figure 14**

**Theme 1. Perceptions of Psychology**
This first theme, with its various sub themes, could be interpreted as a key component in terms of understanding whether African Caribbeans choose careers as counselling psychologists.

**Important and interesting.** A number of participants from all three groups acknowledged that psychology is important and interesting; “I do think it is important” (Andrea: 13) “it... gives...a greater understanding of how to help people” (Heather: 36-37) and being “used in the right way” (Wayne: 28) can be beneficial, particularly for helping some people cope with their problems or upbringing (Josephine: 16). Along with many others from the population, some participants described their concept of psychology as based on the stereotypical images portrayed on TV in programmes such as Cracker or pictures of the patient lying on the analyst’s couch (Mark: 5-6, 8).

**Intrusive and distrusting.** Notwithstanding the above, parents and some 16-18 year olds perceived psychology as being ‘controlling’ a sense of ‘trying to get into your head’ (Jade: 9-10; Wayne: 125) and ‘intense’ (Peter: 9). It appeared as if some participants felt uncomfortable with a level of perceived pressure about saying the right thing: ‘you need to have a lot of thought- going into whatever you are being asked...and it seems...like you are being put on the spot-... ’ (Peter: 9, 11, 13). This led to a measure of guardedness and distrust when thinking about psychology and meeting psychologists.

“...If I was to encounter one it would probably be a bit intimidating...because you get the feeling they can see,... inside you... See bits of you... you are probably not... comfortable ...revealing, I suppose” (Mark: 27, 29, 31, 33-34).

**Theory laden.** Of the four 16-18 years, three perceived psychology as containing a lot of theory and it became off-putting. One participant was “put off from the start” by the way in which psychology was described at school. The focus was mainly on “theory
and paper work” (Dan: 274-275) as well as having to remember everything (Rosie: 96-97; Andrea: 26). The sub theme around psychology as theory laden was also perceived as a negative factor from an undergraduate participant (Rosie: 92, 94) and from parents. One parent agreed that psychology was factual but felt that it was difficult to discover the facts.

“... I like dealing in facts....Psychology has got facts but they are not as easy to uncover” (Mark: 154, 156).

Anecdotally this was a comment raised by one African Caribbean law student that the researcher spoke to. She wanted facts and felt that psychology lacked that.

**Complex and difficult.** Together with the notion of the vast amount of theory, participants from all three groups perceived psychology to be a “very complex” and “very difficult” subject to study (Andrea: 17, 25; Peter: 85. The perceived complexity and difficulty appeared to be related to the various theorists and their theories. One 16-18 year old who had studied psychology at AS level but who did not intend to pursue it presented the rationale for her decision.

“It was very difficult and there was loads of...like...theories...to remember and...to analyse...and the...the experiments as well” (Andrea: 25-27).

Parents highlighted issues with the amount of theory but the language used to describe this was different. They seemed to imply that psychology was ‘technical’ (Peter: 24) and lacking ‘common sense’ (Wayne: 117, 120). Taken together, it gave the impression that studying psychology would require a lot of hard work and a great deal of studying because it was perceived as a “difficult subject to study” (Wayne: 114; Peter: 85; Mark: 141).
**Lacks diversity.** At different points during the interview process participants raised the fact that they were not aware of Black psychologists or counselling psychologists who were working in the field. For Dan, psychology like ‘horticulture’ was perceived as a ‘White’ thing to do’ (Dan: 355). Participants’ understanding of a psychologist, counselling psychologist or counsellor seemed to merge into one. No distinction was apparent but it seemed clear that these careers were not considered popular. One participant had a family member who worked as a counsellor, but this was seen as the exception rather than the rule. A parent suggested that historically this was not an area of work that Black people felt permitted to work in.

“...I feel that the world now has now opened up a great deal more now for Black people so that these lines of work I imagine NOW that they could fall into, but... years ago...it’s probably a domain that Black people didn’t think that they could get into” (Peter: 410-414).

Figure 15

**Theme 2. Interest in Studying Psychology and Pursuing a Career**

The second theme was around studying psychology and making a career choice in psychology. These themes were amalgamated as there appeared to be a good fit between the two.
**Interest in subject.** 16-18 year olds seemed to show some interest in studying psychology. Of the four 16–18 year olds, one interviewee was studying psychology, at A level, one had studied to AS level and another had considered it. For Dan, psychology had no appeal (17). Furthermore, due to the banding criteria in his school, psychology was not an option that was open to him, even if he wished to pursue it. One parent said that her children “had no interest in psychology” (Josephine: 22-23); whilst another’s son had studied psychology, albeit for a short while (Mark: 58, 60). Another perceived that “quite a lot of people do want to study psychology” (Andrea: 42-43) but were dissuaded from studying psychology because of the vast amount of theory that they perceived went with studying the subject and the probability of having to learn it, particularly at exam times.

Undergraduate students were of course students of the subject. Surprisingly, both participants described a route towards studying psychology that had twists and turns that appeared to be centred in a lack of confidence in at least one student’s academic ability.

“...at first I wanted like to help vulnerable people...I started looking into social work-...Then I looked into mental health-....nursing...then the... counselling route to psychology” (Rosie: 28-29, 31, 33, 38, 44).

It appeared that this participant was unaware that she could still help others even if she trained as a psychologist.

**Subject not taught at early age.** Some participants suggested that learning about psychology should be a choice that is given earlier during school life so that students can become familiar with the subject. One parent commented that children often choose careers in areas where they have had some knowledge or experience.
“…she plays rugby at quite a high level...they get looked after by physiotherapists...and she has experience of that...she quite likes that...so she decided that it is something she wants... to...pursue” (Mark: 896-897, 899, 901, 903, 906, 908).

When parents were asked if their children were or had been students of psychology, the results were mixed. One parent’s child was in year 5 and therefore not of age. Notwithstanding that, he suggested that she knew nothing about psychology, because she had not been taught about it, yet felt that she knew a great deal about subjects such as maths and languages (Peter: 113-114,116,118,). Participants believed that schools should become more open to introducing psychological concepts to children at an earlier age, thereby creating an interest in the subject.

‘Open doors’ (Josephine: 620; Dan: 296) was a phrase that was used by a number of the participants. It was used in the context of providing wider choice and more knowledge about psychology in order that it can be considered along with other options when careers are being considered. Participants seemed to acknowledge that the Government concentrates on what it thinks is right, yet it seems to be missing the benefits that psychology can offer to pupils if it is introduced in a child friendly manner into the school curriculum.

“Maths, English ... the Sciences... those are the things that the government put down... psychology is when you get to a certain age ... maybe if they start teaching them earlier it would give the children ... a choice,-... not when they get to Sixth form, or Year...10...when they begin to make choices.” (Josephine: 145-146, 148-149, 156-157, 159-161).

Career in psychology. When it came to thinking about a career in psychology, the majority of parents did not indicate an interest in pursuing a career in psychology for
themselves or their children. One parent described psychology as a “soft science” (Mark: 103) intimating that was his reason for not considering a career in the field. Another, a university graduate, had studied politics and sociology, but not considered psychology (Wayne: 70-71, 81-82). One parent had an interest in psychology but did not pursue it (Josephine: 36).

About his child, one parent said “No, No. No. No” (Wayne: 45) as to a career in psychology but appeared unsure as to the applicability of psychology professionally;

“... I’m not too sure whether you use psychology in nursing... I’ve got a daughter that does nursing... maybe she might use psychology... in that to... become a Nurse” (47-48, 50, 52, 54, 56).

The undergraduate students were naturally more enthusiastic about a career in psychology: “I just, I just find it fascinating. I really do” (Heather: 142). 16-18 year olds did not see psychology as a way forward. “... I just...I wouldn’t think that route is for me.” (Andrea: 36-37). For Holly it was a definite “…no” (Holly: 23), even though she was studying it at A level.

Figure 16

Theme 3. Knowledge of Counselling Psychology and Choosing a Career as a Counselling Psychologist
The third theme seemed critical in gaining some insight in terms of the research question.

**Knowledge about counselling psychology.** Ten participants were interviewed and only one (16-18 year old) had some knowledge about counselling psychology. A common phrase used by all participants was “it’s not really something I’ve heard of before” (Holly: 149; Andrea: 243). Counselling psychology was an unknown phenomenon to these participants and they were unaware of what being a counselling psychologist would entail or mean. For the majority, they were hearing about it for the first time: “Until you mentioned it... I didn’t know that there was such a job” (Mark: 584-585). Surprisingly even the undergraduates just had “a general idea” (Heather: 565); or explained “I don’t know too much” (Rosie: 313).

**Confusion with other professions.** It appeared that participants were more familiar with the job of a counsellor (Josephine: 485-486; Dan: 220), but there was some confusion with regards to the difference between a psychiatrist, a counsellor and a counselling psychologist (Andrea: 189; Jade: 220).

...“I...guess that it is kind of like being a psychiatrist, is it not? (laughing) I’m not sure... I don’t know much” (Andrea: 191-192).

**Not well publicised.** Participants perceived that counselling psychology should be more accessible and visible so that it did not seem as if a person had to struggle to find information about it.

“...It’s a subject that people need to know more of...it’s not something that you would go on....say a normal Uni’s site and see... unless you proper search for it” (Andrea: 244-247).
**Counselling psychology is a professional career.** Despite the lack of knowledge about counselling psychology, participants on the whole seemed to imply that they perceived counselling psychology to be a professional career that was important and one that was equal to any career (Dan: 250-253; Holly, 148). Some of the reasons cited for this were the length of training, as well as a ‘lucrative’ salary (Peter: 368).

**Becoming a counselling psychologist.** When participants were asked whether they had considered a career as a counselling psychologist, only one parent showed an interest and suggested that had she “heard about it before, and I knew how to get on it” (Josephine: 572), she would have given it consideration. The majority of participants answered a resounding no! “In all honesty no, no.” (Peter: 386). Holly appeared ashamed that she didn’t want a career in the field: “Not really” (laughing embarrassed) (Holly: 180). For Jade (251, 256) and Holly (149, 151) a lack of knowledge about counselling psychology was a contributory factor in not considering a career in the profession. Heather seemed to be saying that she was not interested in a career in counselling psychology:

“... personally...no...I don’t really want people’s problems” (546-547).

**Personal specifications for the job.** This sub theme disclosed the type of personality that participants thought would best fit the job of a counselling psychologist. It was very revealing in terms of whether they saw themselves as a suitable candidate. The candidate had to be strong minded (Heather: 636-637; Dan 251-252); able to sympathise and possess the ability to bracket issues as appropriate as well as remaining emotionally detached (Wayne: 357, 361-362). Further skills that were deemed effective were the ability to show patience and have sufficient curiosity about a potential client’s circumstances, without getting emotionally involved (Mark: 639-640, 646). In most
cases, the participants seemed to suggest that they were not the right type of person for the job. It appeared that they felt inadequate in some way to consider it as a choice.

**Don’t know anyone working in the field.** Participants did not know one person who was working as a counselling psychologist. The impressions given were as if counselling psychology was some type of mystery:

“...I’ve been in this world a little bit long... and...don’t readily see people from that field......don’t know any psychologists...I guess most people you know are of the same ilk; unless they know someone who does it, IS it a line of work that you readily think about? I don’t think it is” (Peter: 323-325, 339, 391-393).

Knowing someone working in the field seemed important for participants. That was what they reflected on when thinking about the role of a counselling psychologist. Some participants observed that a probable reason why so few African Caribbeans choose counselling psychology is the fact that:

“... it’s not as.. out there, as, say, being the next Jay-Z... or the next Beyoncé ... it’s not in your face as much (Heather: 707-708, 710, 712)

and neither is there a familiar ‘face’ (Heather 717-718); for if there was a “... a famous Black Counselling Psychologist, I think it might ... change a few people’s perceptions (Heather: 714-716) to the profession because it will be a face to whom people can relate.

**Discussing options at home.** With regards to discussing career options at home, counselling psychology was not on the agenda for any of the participants. The participants perceived that training to become a counselling psychologist would involve long periods of study as well as difficult and hard work and this seemed to be a deterrent for some:
“...people are thinking, and I’m thinking, psychologists must study a LOT... seems a lot of hard work and hard grafting” (Peter: 346-347, 349-350).

**Concerns about counselling psychology.** Some concerns were raised about the personal safety and well-being of the psychologist. It appeared that some participants perceived the job to be stressful coupled with personal risk. A further participant described the job as having the potential to be “stressful and dangerous” because of the perceived client group that a counselling psychologist would work with (Wayne: 305-306, 315-319). One participant raised concerns about the type of techniques that a counselling psychologist would use. She believed that it had the potential to be damaging to the client (Andrea: 202-203).

Figure 17

**Theme 4. Experiences of School**

This fourth theme depicted an important period in the participants’ life and its perceived impact on their future life and goals.

**The school environment.** While some participants indicated that their school experience was pleasant (Peter: 128, 130-131; Josephine: 171; Holly: 54), many parents (particularly males) believed that their experience was negative and they felt unsupported by the school environment and by teachers.
“...I didn’t get the most out of it because the environment wasn’t...very good...it wasn’t...very disciplined...and whilst it shouldn’t matter...it probably does” (Mark: 237-238, 240, 242).

One 16-18 male indicated that his teachers were not clear in outlining the benefits of an education and the importance of being at school and learning. For some, learning was not just about passing exams but it encompassed learning life skills as well as achieving academically. Participants suggested that this was missing from their school experience. In some cases participants suggested that they became lackadaisical in their attitudes towards studies and school and some did not start learning until they left school.

“...It was more of a burden to study...it was not put forward as a necessity...they didn’t make you see...they didn’t explain it...enough...it wasn’t until after I finished school...that I realised, “yeah, I should’ve been in them classes” (Dan: 97-98, 104-105, 108, 110).

There was a definite sense by three of the four 16-18 years old that school was not what they hoped it to be. On one hand participants said that they enjoyed school but on the other the school environment was not as they expected.

“...I think they can put more effort into being there for the kids and helping them...to study better and put them in a better environment” (Andrea: 73-74).

**Attitude of teachers.** Some participants spoke about a lack of support that was received from some of their teachers.

“... the teachers, ... they have a million and one thing to do but...they’re negative...if you don’t do certain stuff...they put you down...it makes you...fall back on your studies...it doesn’t motivate you quite a lot” (Andrea: 82-86).
“...It’s like they are kinda giving up. They’ve said “we have given you all that I can give you”…like they don’t want to know…anything else...They are more like...“you know what to do... just do it”” (Jade:107-110).

Although some participants felt that their school experience was negative, others believed that they had a good relationship with their teachers and that the teacher was helpful. It appeared that those who were helped tended to achieve more.

“... I don’t think that I was individually encouraged... but there were...study sessions...that kind of encouragement and for A level...my psychology class was encouraged...my teacher did put in...a lot of work and stuff” (Rosie: 190, 192, 194-195, 197).

One parent spoke about how much she loved school as a child in the Caribbean and elaborated on the difference between the two countries. Still another parent described them as some of the happiest days of his life.

**Revision, exams and homework.** The general consensus between undergraduates and 16 – 18 year olds was that studying was difficult and they struggled with exams, homework, revision and concentration.

“I weren’t too good... when it came to exams....I was terrible at...revision... absolutely terrible.” (Heather: 219, 222).

“I’ve never done homework and now it’s got to the point where I have to, I find it a bit difficult like...keeping concentration” (Jade: 86-88).
Media stereotypes. All three groups were in agreement that, in the main, the media in the form of television portrayed African Caribbeans in stereotypical roles, namely sports and music and that it has an effect on the career aspirations of African Caribbeans, particularly young men. One parent said that the media gave out the wrong message about the abilities of African Caribbeans.

“...it’s…the stereotyping thing isn’t it? When...you look at the TV and the TV is churning out...reality TVs...and...the garbage that it is trying to force Afro Caribbeans into it leaves a perception that we are only good at dancing...music...and that’s the only thing we can get involved in...I think...the TV gives out the wrong message” (Wayne: 395-397, 399-401, 405, 407).

One student concurred that the way in which the media portrays Black Artists is not helpful.

“...basically Black people seem to see Hip Hop, and video girls as...the way to be...it’s very rare to find a group of young Black people that don’t see...THAT’S the way forward” (Heather: 659-662).
**Fame and recognition.** Participants seemed to be suggesting that the glitzy celebrity type lifestyle portrayed by the media appeared to epitomise what success might look like for Black people and that set a tone for the way forward for some.

“The fact that ...you can get famous from it... people know your name... I’ve accomplished something, this person knows my name.” (Jade: 309, 311, 317).

“...you see someone like...Usain Bolt...with Caribbeans you see... athletics and a more prominent thing like...cricket...You see the NBA with...black players. When it comes to music you see, Jay-Z, see all these big Rappers. It seems like the ‘in thing’ and more people are drawn towards that” (Dan: 304, 306-307, 309-310, 312-313, 315-316).

**Instant rewards.** Some participants appear to suggest that it is not just the ‘celebrity like’ status that many African Caribbean young men and women aspire to but it is also the concept of overnight success.

“all the bigs who I don’t listen to; ...its forcing ...or its ...steering Black people into the bling, bling, bling, girly, girly culture and the great big car...and the easy way of getting something, instead of working at achieving what you need to achieve” (Wayne: 412-413, 415, 417 419, 421-423).

An interesting phenomenon that was highlighted was the length of time that it takes to be trained as a counselling psychologist against the time that it would take to earn millions of pounds as a footballer. It would appear that the length of time that it takes to qualify is a deterrent.

...“within 2-3 years you are earning millions of pounds. You are still studying in your psychologist. Cos it’s half way through your job... you have not even started...It's instant rewards, I think” (Peter: 425-427, 429, 431).
Counselling psychology lacks prestige. Participants did not equate the status given to the job of a counselling psychologist with the same parity as a career in sports, music or dance.

“...you could be famous by being a pop star, by being a movie star ... by being a dancer ... but you are not going to be famous by being a psychologist, you understand what I’m saying?” (Wayne: 437-440).

An undergraduate participant evaluated that:

“...they (Black young men) probably are not even aware of how much money a Counselling Psychologist makes.... I think they just see it as a money thing and a status thing...Whereas, if they probably looked into it, they probably make more being a Counselling Psychologist than just being a basic Rapper” (Heather: 700-701, 703, 705-707).

Natural talent. There appears to be an assumption that using one’s natural talent means being free to “express yourself” which might imply that a career as a counselling psychologist may be perceived as restrictive and potentially the loss of one’s identity.

Statements made by two participants alluded to this. Firstly Rosie said:

“it’s just expressing yourself doing what you...want to do... whereas if it’s like counselling maybe like the people that they are introduced to it’s not really for them and they might feel a bit trapped whereas music if you don’t like something just go onto the next thing and you might stay into that. Whereas counselling you can’t really choose your patients.” (Rosie: 440,441-443-447).

Secondly Jade said:
“It’s… something that you...like... That’s more like research and like knowing the ...all the terms and stuff...sports is more yourself...like you’re yourself when you want to improve your body...you do it yourself” (288-289, 291-293).

**Part of culture.** While many of the participants agreed that a career in music dance and sports is popular because the media highlights it and the desire for fame, recognition and rewards, some felt that dance and music were embedded within Caribbean culture and it was something that came naturally to many people of Caribbean descent. Culture, natural talent and ability were seen as making a career in music; sports and dance appear more appealing. This view was expressed by Mark. He pointed out that “music and performing and that sort of thing is in African Caribbean people’s blood” (724-725). However, there was a sense of another parent distancing herself from that notion.

“...this is something some of them are born with, they have the ability to do, there are some, but it is not ALL Caribbean... people you find do that” (Josephine: 612-615).

**Greater exposure of subjects at school.** Unlike studying psychology, parents and 16-18 year olds mentioned the fact that music, dance, and sports have been activities that have been taught to children from a young age. As well as being a part of cultural heritage, it has been part of the school curriculum throughout the school experience. Therefore it was probable that individuals had the opportunity to develop a love for those subjects. This was contrasted with studying psychology which is introduced in year ten.

The findings show that African Caribbeans may well choose more creative careers because of natural talent and ability. However, some participants enter it because it is perceived as “not hard work” (Rosie: 436) and because academics are not involved.
**Perceived expectations.** On another level, Holly seems to speak about possible disappointment from the school experience that might cause individuals to withdraw and hold back, which in turn might mean that a person’s ability to achieve has been hampered.

“They felt that they couldn’t achieve...academic success so they’d rather go into something where they would be more accepted....Maybe they thought that they’d be happier there because of maybe bad experiences at school... and in education... so they thought to go further than that wouldn’t probably be best for them” (Holly: 192-194, 196-197,199,201-202).

There seemed to be a sense in which a perceived lack of inspiration or high expectancy levels meant that some pupils failed to achieve or fulfil their potential. Rather stereotypical views inhibited success and in turn led to feelings of failure. For some African Caribbeans, as for many people, trying to function in a domain in which he or she is not comfortable can present a big challenge and the temptation can be to remain where it feels safe.

“Well there’s always been,...a study like that...Black men... or young boys do the worst in school so they probably thought okay, what’s the point in me doing that if I’m going to be the worst anyway.... There’s always been the racial stigma of course that...Black people are less than other races...so they probably wouldn’t want to expose themselves to that” (Holly: 219-220, 222-224, 226-227, 229, 231-232).
**Figure 19**

**Theme 6. Mental Health Issues and Service Provision**

**Taboo subject.** The majority of participants disclosed that mental health was a subject that was not talked about within their families or friendship groups. The subject appeared to be a taboo for a variety of reasons:

**Stigma and shame.** One participant spoke about the shame that her friend was made to feel because she tried to get some professional help but also the stigma that is associated with the illness.

"...we’ve not really spoke about it. My friend she really like likes it, but say if people like even in their younger years they, people aren’t really; like “oh... you go to sessions and something like that, so there’s something wrong with you”" (Jade: 168-171).

For Heather there was a sense of some family members disowning a relative who had a mental illness (398). It was perceived “that there’s nothing wrong with them” (383-384) but rather something to get over. For others it appeared that their perception of mental illness changed when members of their own family had mental health issues. One was “scared” before (Mark: 425) whereas after it felt less frightening. For another “…attitudes and perceptions of mental illness...totally changed” (Wayne: 265-266) since it affected family members.
Considering that it was a subject not talked about, three of the ten interviewees spoke about personal contact with mental health issues. One had a brother; the other an uncle and one a close relative. One 16-18 year old also had a friend with mental illness. They spoke about the difficulties that the family encountered both in acceptance of the illness and the challenge in knowing what to do or where to gain information and how to help family members when they felt that everything was well but it clearly was not.

**Powerlessness.** A sense of powerlessness was quite tangible for one participant.

“…I’ve got a brother who has mental health issues… it’s… difficult because unless they seek help… they won’t get help…. If my brother said to me, … take me to the hospital, I want to get sectioned, the service is great… if brother says I don’t want to go to hospital, there is nothing wrong with me, I feel that the service lets him down, fails him.” (Wayne: 235, 237-238, 240, 288-290, 292-294)

For another there was concern about the …”amount of medication” (Mark: 435) that was given to his relative but a seeming feeling of helplessness that anything could be done about it.

Despite the perceived difficulties that some participants outlined regarding speaking about mental health illness, one parent’s experience was very different. Both she and her family were able to discuss mental illness in an open and mature manner. They felt that this was the best way of dealing with it. The parent did not disclose whether she had personal experience of dealing with mental illness.

**Service provision.** In the main, participants perceived that the service offered by mental health providers was good. One participant attributed this to not hearing anything bad said; for another personal experience of the system appeared satisfactory.
“...my cousin...and that’s the only experience I have -...of somebody-...being treated by...and I can’t remember anything particularly negative” (Mark: 463, 467-468, 472-473)

It was intimated that help was available for individuals but it was not necessarily straightforward or easy. That is when individuals were in denial about their mental state and problems were evident, participants did not seem to know what to do.

**People helpers.** The afore-mentioned participant and others who were open about mental health issues appeared more open to working with individuals who had mental health difficulties. For one participant, when asked what she would need to know about counselling psychology to consider it as a career option she replied “Will it help me to help others…will I be able to pass it on to others what I have learned?” (Josephine: 515, 518).

Figure 20

**Theme 7. Family Support and Making Career Choices**

![Family Support and Career choices](Diagram)

The seventh theme and its sub themes reflect the support that participants felt that they received, particularly from significant others, but also highlights the decision making process when it comes to choosing a career path for the participants.
**Mothers.** Mothers were credited by many of the 16-18 year olds and undergraduate students as the primary parent whose support was most prominent. The findings also showed a great deal of reference to parental ‘pushing’. The ‘push’ from parents was described as very important to African Caribbeans in trying new and/or different activities, careers or exploring other possibilities.

“... If your parents are not pushing you towards academics... then you’ll see dance, where you see you don’t need much academics, or with the music, because they’re...seen as natural talents.... So you don’t explore other things” (Dan: 396-397, 399-401, 403).

**Careers: whose choice is it? Children choose.** An interesting phenomenon that was highlighted by parents is their willingness to encourage their children but advocating that the choice of career rests firmly with the child. This was very evident in the responses that parents gave when asked if counselling psychology was discussed as a possible career choice at home. One said: “it’s a good thing to do. .. erm .. but it would have to come from them”. (Mark: 572-573). Another stated that a discussion around counselling psychology as a career would not take place “...unless…it…is something that they wanted-... to get involved in” (Wayne: 303, 305).

In some instances parents felt that they had little or no input in the career choice of their children. However, what seemed important is the fact that parents wanted their children to know what options were available so as to help them make informed career choices, even if it was not their preferred choice.

“...Definitely not us...we didn’t tell them what to do...but ...we encouraged them to make sure they made choices...the dreams they have is going to take money” (Josephine: 802, 824-827).
Some 16-18 year olds supported the idea that the career paths that they are pursuing are their choice. Dan pointed out that “…Mum wanted me to go my own way” (208-209) so that his “creative side” (210) could be developed and he would feel more fulfilled. Moreover, both Jade and Andrea indicated that their mothers supported their choice even if they were not wholly convinced that it was the right thing to do.

“Mum…she is quite worried because it is a tough...industry to get into...she is kind of iffy on it, and she will sometimes try and lead me, like, “No, like, do this instead” (Andrea: 321-326).

Interestingly, Holly remarked that her parents had created an environment conducive to studying, albeit a strict one and it had provided the opportunity for her to choose a career path whilst she is still young. Independent career choices were also highlighted by the undergraduate students. They too indicated that they were left to make their own decision about career choices, even if it was not what their parents would have chosen for them.

**Family career choices.** The most popular professions that participants’ friends and family work in are business, low level management, Law and Accountancy. One participant (parent) had a family member who was a counsellor but he described it as being an exception rather than the rule.

**Trailblazing.** ‘Open doors’ has been used to refer to creating more choice in terms of studying psychology, but it has also been used by participants in terms of African Caribbeans themselves becoming motivated enough to branch out into new fields of work just as past generations have done:
“...like I said, the Civil Rights Movement, there came a stage where people were breaking out. During the Civil Rights, people were breaking out and doing different stuff” (Dan: 324-327).

It is also used to describe the creating of opportunities, just as those whom they seek to emulate have done.

“...In Drama, you see more Black actors coming through so... you move towards that, because someone has already opened the door for you.... Not many people think to open the door for themselves like the people that they are watching did” (Dan: 316-318, 320-321).

Drama appears to be a new domain in terms of African Caribbeans’ involvement and there was very little mentioned about this career. Perhaps it has not been sufficiently tested to desire it as a career. This was alluded to by Dan:

“If you’ve seen people doing different stuff like Blacks in the army, then you’d go towards the army. But, if you don’t see it, then you ...don’t do it, just to be safe...” (344-347).

In the field of psychology it appears that the doors have not been opened and it is as if individuals are waiting for that to take place.

“You might have a talent in Psychology but you’ve not seen Psychologists about” (Dan: 377, 378).

Similarly in counselling psychology, participants are looking for a role model or mentor – someone of the “same ilk” (Peter: 345).

“...if there was a famous Black Counselling Psychologist…it might...change a few people’s perceptions. Because it seems to be as soon as you have a ‘face’ to a
certain career, or a certain profession that you can relate to, then that’s when you’re looking, more favourably. So, it could be that”. (Heather: 708-713).
Discussion
Summary and Integration of Findings

This study set out to explore whether choosing a career as a counselling psychologist would appeal to people from the African Caribbean community. Seven themes emerged from this study. From the literature search there was a lacuna of research in this particular area. This study used a mixed methods design with thematic analysis for its investigation. Previous research addressing the under-representation of BME psychologists within mental health services in the UK has, in the main, focused at the shortage within clinical psychology.

Choosing a career is a very important decision and there are many factors that influence that decision making process. Several career theories have been developed in an attempt to guide this. According to Super’s self-concept theory (1953), a person’s sense of self is an important factor in individuals’ choosing a profession because it allows an expression of one’s self concept (Osakinle, 2010; Topkaya & Uztosun, 2012). Holland (1997), on the other hand, claimed that a good occupational choice is not solely dependent on individuals’ accurate self-knowledge but also their personality type along with accurate occupational knowledge. In other words, besides developing self-awareness, individuals should also know about the characteristics of the occupation so as to have an idea of whether it is suitable for them.

In this study finding out participants’ thoughts and views about psychology and if they were studying or interested in studying psychology was an important factor in considering whether a career as a counselling psychologist was even possible.

Unsurprisingly, the findings from the quantitative phase showed that undergraduate psychology students produced significant scores in terms of studying psychology. They were psychology students. However, for 16-18 year olds and parents it appeared that they were not connecting with the subject in a meaningful way. A lack of interest was
cited by some participants for this and there also appeared to be a lack of belief in how psychology might benefit the participants. This view of psychology is comparable with the way in which A-level psychology has been criticised by parts of the media as a soft study option (Jarvis, 2011). The BPS has strongly refuted such claims but the view of psychology as a non-traditional and thus a less valid subject remains (Banyard, 2013).

In fact questions are being asked by the BPS (Psychology Education Board) itself regarding whether A-level psychology is fit for purpose.

The main benefits of studying psychology were seen as preparation for employment and higher education (Jarvis, 2011). Studying psychology as argued by Hylton (2010) is the study of “oneself” and those who are “nearest and dearest” (p.8). A student of psychology learns and develops a broad range of skills ranging from reasoning and problem-solving skills to independent and critical thinking skills (BPS Briefing Paper, 2013). Transferable skills are highly valued and are looked upon favourably, particularly in the labour market. Conveying the usefulness of these and other benefits of psychology to African Caribbeans is vital in capturing the attention of more pupils to this subject and conducting evidence based research is essential in this regard.

This is a small exploratory study and some researchers (Diefenbach, 2008) criticise the use of semi-structured interviews citing its subjectivity and inability to generalise findings. However, it is the personal views, stories and lived experiences of individuals and how that impacts his or her world that counselling psychology holds important (Yeh & Inman, 2007).

Findings from the thematic analysis showed that all three participant groups described psychology as a hard and difficult subject to study. Particular mention was given to difficulty in determining facts as well as studying large amounts of theory which they perceived was hard to remember. This supports earlier studies where
students were surprised by the rigour involved in studying psychology and subsequently dropped out because there was a mismatch between expectation and actual experience (Rowleya, Hartleya & Larkin, 2008; Toal, 2007). This, however, appears to be a generic concept of many psychology students irrespective of ethnicity (Turney, 2006 cited in BPS, 2013).

Contrastingly, previous studies showed that psychology was a popular subject that was studied at this level and at undergraduate level (BPS: Briefing Report, 2013; Hylton, 2012; Turpin & Coleman 2010; Turpin & Fensom, 2004). Interestingly, 16-18 year olds from the qualitative phase appeared to have engaged more with the subject; three of the four had either studied it, were studying it or were considering studying it. Concurring with previous studies (Radford & Holdstock, 1999), some participants described psychology as an interesting and important subject in that it gives insight into people’s difficulties. However, when the said participants were asked about pursuing a career in psychology no interest was shown. Similarly, respondents from the above study perceived that a career as a psychologist ranked low in terms of prestige and progressive career prospects. A study among psychology students in South Africa also conceived that a psychologists’ position would offer low pay and lacked prestige and those who considered pursuing it did so for various reasons, the main reason being altruistic in nature (Mudhovozi, Sodi & Amusa, 2014).

Based on this, individuals who chose a career in psychology would, according to Holland’s (1997) personality career theory (Realistic, Investigative, Artistic, Social, Enterprising, Conventional) have a more ‘social’ personality type; that is having an interest in helping others. The responses given by some participants seemed to concur in that enquiries were made about the usefulness of counselling psychology in terms of training competency (Josephine: 515, 518). For others, listening to people’s problems
was considered a definite no. Some studies concur with Holland (1997) by indicating that African Caribbean women are over-represented in public health and education service occupations whilst the men are over-represented in transport and communication type occupations (Mirza, 1992; Speed, 2007; TUC, 2006; Wrench & Modood, 2000).

Findings from this study showed that low levels of expectation (particularly from teachers) and lack of information when choosing options potentially influenced the choices that were made by some participants. Studies by Bhavnani, (2006); Kirton, (2009); and Nabi et al., (2005) appear to support this. They argue that many African Caribbeans find themselves either dissuaded from following a particular career path, or are given insufficient information to make an informed choice. They are encouraged to follow ones that are not as interesting, or as engaging. Such segregation leads to a disproportionate number of minority ethnic people in certain types of work and not others (Dunkwu, 2000; Fitzgerald, Finch & Nove, 2000; Owen, Green, Pitcher & Maguire, 2000; Strategy Unit, 2003).

Schneider’s (1995) attrition-selection-attraction (ASA) model described a framework by which an organisation selects and attracts people with attributes (defined as attitudes, personality and values) that are similar to those held by the organisation (attrition). The cycle of attrition, selection and attraction consequently leads to an organisation with a homogeneous group of people sharing similar attributes that produce similar kinds of behaviour. Employees are more likely to stay within such an organisation if the organisational values fit the individuals (Nelson & Billsberry, 2008).

Some participants in this study seemed to agree with the findings that psychology was not perceived as a profession that Black people traditionally pursued. This seems to be the reversal of what Powell & Butterfield (2002) referred to as a “job holder scheme” (p 401) where one race or gender dominates either a particular job that is being
considered so much that decision makers assume a mental model mode that perceives a managerial vacancy for example is best suited to the group that most occupies the position. Here participants view a profession whose demographics in the main consist of White people (Wakeling, 2010; Turpin & Fensom, 2004) as a profession most suited to that particular group. Numerous studies (Kenny & Briner, 2013; Missa & Ahmed, 2011; Ross, 2003) have been highlighted which pinpoint the shortage of BME personnel in various professions including psychology (Turpin & Coleman, 2010; Turpin & Fensom, 2004; Wright, 2008).

If justification was required to conduct further research to explore the fit between psychology and African Caribbeans then the over-representation of African Caribbeans within mental health and the rhetoric pertaining to making the workforce more diverse seems a good enough reason. The thought that many African Caribbeans may be missing a great opportunity to belong to a professional body ‘that applies scientific methodology to explain human behaviour’ (BPS, 2014); something that is applicable to each and every one because it is not perceived as a possible career option because of one’s ethnicity would be a great shame. Embedded in the profession of psychology’s equality and diversity plan is the aim to have a greater understanding of the communities it serves and to encourage people from the under-represented communities to apply for jobs within the profession (BPS, 2008). That sounds great but if some individuals from one of the under-represented communities believe that they are excluded because they belong to a particular community then some dialogue is necessary. A gap needs bridging between the profession of psychology and the said community in terms of showing that psychology is for all people (Hylton, 2010).

Some participants were of the opinion that if psychology was introduced into the school curriculum at an earlier age there is likelihood that more people would be
familiar with the subject. This concurs with a study reported by Rea (1998) where the discipline of psychology was promoted to younger people by a university in Canada. They psychology aspect of the programme was ranked very successful to the participants. This is in contrast to Rowley & Dalgarno (2010) who implied that not teaching psychology to students less than 16 years as a compulsory National Curriculum subject may have added to its popularity.

The pathway to a career as a counselling psychologist is one that appeared mixed in terms of the level of knowledge regarding counselling psychology. Findings from the quantitative study showed a significant number of participants knew about the job of a counselling psychologist, with parents indicating that they were slightly more aware than undergraduates. 16-18 year olds knew less than parents and undergraduates. Furthermore, there appeared to be some ambivalence between parents and 16-18 year olds (from the quantitative phase) concerning the professional status of counselling psychology. Participants from the qualitative phase recognised counselling psychology as a professional career but were unanimous in stating that they knew nothing about counselling psychology and were unaware that such a career existed. The researcher expected undergraduate psychology students to be informed about the different areas of psychology and to have some knowledge about a career in counselling psychology. The assumption was that this would be a component of their course curricula. In reality they knew very little.

Counselling psychology as a career was a new concept to both parents and 16-18 year olds. A parent indicated that if she had known about it, she may well have given it consideration. Participants also appeared to be confused about it: was it the same as a psychiatrist or a counsellor? Participants were aware of the role of a psychiatrist but unaware of a counselling psychologist. Previous research (Sloman et al., 2005)
indicated that African Caribbeans were familiar with counselling and its benefits. However, although participants were familiar with the area of counselling, it was not a career that family members or friends on the whole pursued. One parent had a family member who worked as a counsellor but he emphasised that this was the exception rather than the rule. At no time was counselling psychology mentioned as an alternative therapy treatment or career choice.

Participants from Sloman’s (2005) study appeared willing to train as counsellors if a culturally relevant course was available. They seemed to emphasise their preference in having more talking therapists who were from the Black community (Allen et al., 2006; McLean, Campbell et al., 2003). This view supports advocates of ethnic matching who propose that having a therapist who is of the same cultural, racial or ethnic background makes the therapeutic bond stronger (Cabral & Smith, 2011). However, the reality is that therapist and clients although from the same ethnic group will be dissimilar based on a number of factors and whilst it is beneficial for some clients it is not suitable for everyone (Edge, 2011). Moller (2011) argues that as counselling psychology in the US has led the way in “creating a knowledge base for working with multicultural populations” (p.14), counselling psychology in the UK in having a commitment to diversity can create a socially important research focus and be distinct in working with diverse others. How to recruit and retain more African Caribbeans and other BME individuals is an essential part of the process.

Participants suggested that the profile of counselling psychology needs to be raised because people in the African Caribbean community are not aware of it. This was confirmed by Andrea, a 16-18 year old. She had never heard about counselling psychology and suggested that the course should be promoted more. It was felt that counselling psychology is an important subject and that people should know more about
it, as they do perhaps with clinical psychology, (DOH, 2003; Williams, Turpin & Hardy, 2006), without having to search for it. There are various ways to publicise counselling psychology. Organised events such as recruitment fairs and open days have been used by the Division of Clinical Psychology as well as the British Psychological Society as a means to recruit more BME students to clinical psychology. Good publicity is important. However, studies carried out in the US showed that this method of recruitment is only marginally successful. This was due to the fact that many of the Black students were not aware of where the events were being held and many did not attend because they assumed that they would not be admitted to the programme (Garcia, 1980).

Studies have documented the negative experiences that African Caribbeans have endured from psychiatry (Keating, 2007). Could this fact coupled with the anonymity of counselling psychology be perceived negatively by association when considering a career in counselling psychology? Studies (Dabydeen et al., 2007; Guthrie, 1976/1998) have shown that psychologists in the past have supported racist theories pertaining to Black people generally. It has damaged the image of psychology and participants and members of the public may well be aware of this (Bradshaw-Maynard, 2013; Kenny & Briner, 2007). In the UK there is some reluctance to discuss ethnicity or race issues and with the paucity of current research and information on such matters it becomes a difficult area to address. Participants seemed to point to the absence of role models or trailblazers as a possible reason. Qualitative participants spoke about not knowing someone in this field of work and the importance that knowing a face (implying a Black face) would make in terms of encouraging others to think about this profession. Past research, (Bender & Richardson, 1990; Patel & Fatimilehin, 2005; Turpin & Daiches, 2010) have raised the issue of the shortage of BME psychologists working in mental health and how little seems to have changed. The disproportionately small number of
Black and Minority individuals working at higher levels within the profession of psychology and more specifically counselling psychology departments when compared to their White counterparts and the fact that those at professorship level are usually White and men (Wakeling, 2010) could be interpreted as some participants perceive it; that is not a profession that Black people go into.

Aforementioned studies have described would-be therapists in such terms as a ‘wounded healer’ (Jung 1951; Martin, 2011; Moodley, 2010) or perceived as “strong and without significant problems” (Barnett, 207, p. 258). Some participants had their own idea about the type of person that would fit the role of a counselling psychologist. Like Barnett (2007) some perceived that a suitable candidate for the position should be strong minded, patient and sympathetic. It is these very qualities that some participants seemed to be saying they lacked which would disqualify them from the profession. The finding relates to research by Lipton, O’Connor, Terry & Bellamy (1991) on occupational stereotypes. They described occupational stereotyping as a “preconceived attitude about a particular occupation, about people who are employed in that occupation or about one’s suitability for that occupation” (p.129). Gottfredson (2002) defined it as: “images of occupation” (p.88) that become cognitive maps of occupations. This means that occupations can be categorised for example, by level of prestige, masculinity-femininity. Bearing in mind that participants acknowledged that they knew little about the job of a counselling psychologist it is bemusing that they would assume that they do not meet the criteria. If as purported by Gottfredson (1981) that making a career choice is a developmental process that starts in childhood, it is important then that individuals are introduced to as many careers as possible so as to help inform the selection process.
Another important factor in making a career choice according to Gottfredson (2002) is based on a person’s self-concept, the way one views oneself. That is a person may show a preference to an occupation by assessing how it compares to their image of themselves. Negative stereotypes exist of the intellectual ability and competence of Black people of Caribbean origin (Kenny & Briner, 2013). Could it be that some African Caribbeans view themselves through the eyes of others and that perception becomes embedded into their own personal concept of self which in turn leads to a lack of motivation to succeed? Corrigan (2004) stated two types of stigma: public stigma and self-stigma. Self-stigma relates to the view the individual has of him or herself based on the negative perception that others, for example, society has of that person.

Research on cultural factors with regards to occupational stereotypes is scarce (Lipton et al., 1991). However, the recent culture and diversity strategy (2013) approved by the DCoP Divisional Committee (among other goals) to “provide a platform” (p.3) to discuss topics of concern or interest, and to encourage research and subsequent publications pertaining to Black and Minority individuals is a good sign that something is being done.

Participants had concerns about counselling psychology which may also contribute to the idea that it was not suitable as a career. Some participants spoke about fears regarding their physical and psychological well-being whilst one shared concerns about psychological techniques that were used in therapy which seemed to leave her friend in a worse psychological and emotional state. The fear that participants spoke about appears different to the cycle of fear (Sainsbury Centre for Mental Health, 2002) that it is claimed African Caribbeans experience towards engaging with mental health services. What seems clear is that there is a level of discomfort in this area.
By contrast with the lack of interest in a career in counselling psychology, findings from this study showed that careers in music, dance and sports were particularly popular among 16-18 year olds. Past research into career choices of African Caribbeans also concurred with this. They indicated that African Caribbeans were more likely to opt for, and were interested in, careers in music, sports, media, culture and accountancy (Bhavnani, 2006; Nabi et al., 2005). Interestingly, these were not career areas that undergraduates in this study were interested in pursuing. They preferred the academic route. Parents too, identified that these were not careers that they envisaged for themselves or their children. They were more concerned with their children following an academic route or, if they desired to pursue a career of their own choosing, having a back-up plan was crucial if hopes and aspirations were not met. The encouragement from parents to pursue a profession and have a back-up plan was also deemed important from parents in a previous study (Nabi et al., 2005).

The role of the media has been criticised by participants for promoting these professions as something to aspire to above other careers. In fact, some participants from the qualitative study saw this as African Caribbeans being stereotyped into a particular career role that could be interpreted as a “Black” thing to do. This can be contrasted with the concept of careers that Black people felt they were unable to consider because they would be in the minority (Cousins, 2010; Steele, 2002).

The analysis carried out from the interviews provided some possible explanations for the attraction such a career might create for 16-18 year olds. Natural talent and ability has been attributed to participants choosing this career. Some participants remarked on the fact that subjects such as music, dance and sports have been activities that have been learned from a young age. They form an integral part of the school curriculum, but much more than that, music and dance are part of a cultural heritage for
African Caribbeans. ‘It’s in the blood’ is how one parent described it. For others it was appealing because it was perceived as not being academically difficult. It was not hard work. As a subject to study, psychology, by contrast, was seen as difficult and hard work and perhaps not worth the effort. Others felt that African Caribbeans were interested in the above careers because of the success, fame and recognition that became associated with it. In comparison, counselling psychology was perceived as lacking prestige and not well paid. The finding is consistent with studies by Mudhovozi et al., (2014) that showed psychology students ranked prestige and respect and Sherrill (2004) perceived financial remunerations as key factors when choosing a career.

The recruitment of more counselling psychologists from the African Caribbean community entails not only an interest in psychology but adequate A-C grades at A-level (or equivalent) in order to study at undergraduate level so as to achieve the GBC chartership to pursue postgraduate studies. The study explored participants’ experience of studying at school as a means of gauging factors that might contribute to educational success.

Evidence from past research emphasises failure, underachievement, teacher discrimination and low expectations (Coard, 1971; Mac an Ghiall 1998; Rollock, 2007; Thomas, Caldwell, Faison & Jackson, 2009) for African Caribbean pupils. The findings from this study showed a contrast in the responses from the questionnaire and the semi-structured interviews in terms of the school experiences of all participant groups which subsequently affected their educational achievements. On the whole, participants from the quantitative phase did not find studying at school particularly difficult. In the main, participants indicated that they felt encouraged by their teachers at school. Nonetheless, the thematic analysis revealed that although some participants really enjoyed school,
and like Peter counted the days as some of the best of their lives (Peter, 111, 113-114), others described their experiences of school as difficult.

Similar to previous findings (National Union of Students Black Students campaign, 2010), participants from all three groups of the qualitative phase identified that they did not find the school environment conducive to study. Some identified lack of teacher encouragement, difficulties with homework, lack of competency in study skills and poor instructions as factors in their not achieving as well as they might. For example, one 16-18 year old commented that the banding of classes meant that his group was not eligible to study psychology, even if he wanted to. This confirmed studies by Mirza (1992) and comments from Radway (June 2013. See Appendix 3) that indicated that pupils in the lower bands were not given the opportunity to choose the subjects they prefer. Radway (2013) suggested that many African Caribbean students are often directed towards careers in hairdressing, beauty, sports, drama or fashion designing rather than being encouraged to attend further or higher education. She advocated that careers like counselling psychology would be hidden from the students. Bhavnani (2006) studied BME pupils aged 16, from schools in Greater Manchester, Birmingham and London. She explored the career interests and factors that influenced the career choices of the students. She too argued that respondents claimed that the career advice that they received was narrow and they were not aware of the wide range of careers that were available to them, if they wanted to pursue it, and thus fulfil their potential.

Notably, none of the participants explicitly spoke about experiencing racial discrimination at school or college. However, the expression of the experiences of some participants appeared very similar to many other African Caribbean students who have described their experiences in the education system (Abbott, 2012; Mac an Ghaill, 1988).
Parental support and influence on career choices was another factor that emerged from this study. When participants were asked about parental support both quantitative and qualitative findings showed that all participants believed that parental support would be given in. Interestingly, parents perceived that their level of support was more than that attributed to it by the other two groups. Previous studies indicated that parental choice plays a major role in the choice of careers that BME individuals pursue. Furthermore, parents of BME individuals did not envision their offspring pursuing a career in psychology. It was held in low esteem (Meredith & Baker, 2007; Turpin & Fensom, 2004). The analysis from this study supported previous studies. Parents did not perceive that their children would pursue a career in psychology but parents in this study commented that they would support their child/children in whatever career they chose. Consistent with previous research findings showed that African Caribbean parents did not influence their children’s career choice. The findings showed that although parents desired their children to pursue more academic based subjects and follow more traditional type careers, they felt that their children/child were free to follow their own career paths. Parents used words such as “times have changed. Children are taking career then choosing without being told what and what they cannot do to describe this phenomenon.

An unexpected but not surprising theme that came from the study was the important role that women, and in particularly mothers, occupied for participants. One of the attributes assigned to mothers was that of an encourager. Edge (2013) argues that African Caribbean adopt personas as ‘Strong-Black-Women’ (p.45) and that somehow they are able to foster a sense of well-being despite much adversity. Perhaps it is that fortitude and determination that seemed appealing to participants.
Thoughts around mental health were explored in the interviews. Participants revealed that it was not a subject that was generally spoken about in the family or within friendship groups. This was unexpected, particularly in view of statistics that show one in four people have a mental health illness, but also because there seemed to be an endemic amount of literature regarding the level of mental health illness and the treatment of African Caribbeans within the mental health system. There appeared to be a certain taboo about it. This was surprising. African Caribbeans enjoy debating about a lot of things and family occasions are seen as important and a time when debates would take place.

Why is that? Clearly families were dealing with this issue. Of the ten semi-structured interviews carried out, two interviewees disclosed that family members were suffering from mental health illnesses. They also spoke about the refusal on the part of family members and the individuals concerned to accept the situation. This supports the findings from current research that highlights the sense of shame and stigma that many families, irrespective of ethnicity, face in terms of dealing with mental health issues (De Maynard, 2009; Galbraith & Galbraith, 2008; Keating, 2006; Lowenethal et al., 2012; Vogel et al., 2007) as well as being perceived as mad or crazy (Baboolal et al., 2006).

Participants described difficulty in knowing how to access help and information. One parent spoke about the effects that the medication was having on his family member and his feelings of helplessness because he did not know who he could speak to about his concerns. Furthermore, what do you do or where do you turn for help if a family member is in denial about their mental illness? This was a dilemma that one parent spoke about.

Is it shame or is it fear that has prevented these participants from discussing mental health issues? A report by the Sainsbury Centre for Mental health (2002) referred to a
cycle of fear that pervades many within African Caribbean communities. It argued that fear stops people from engaging with services because they perceive that engagement might lead ultimately to loss of their lives. There are a myriad of recommendations that stem from this report. The training and development of “Black primary care staff” (p.6) so as to become bridge builders between the community and mental health services is one of the recommendations. Counselling psychology’s stance as a discipline that values subjectivity, personal growth, and one in which the therapeutic relationship with the client is paramount, has much to offer in response to the above.

Notwithstanding the concept of fear, some participants perceived that the service offered by mental health providers was fairly good and that help was available; the issue seemed to be about appropriate help.

**Recommendations for Counselling Psychology, Clinical Training and Further Research**

African Caribbean participants from this study are unaware of counselling psychology as a career choice or it seems as a therapeutic mode of working with their emotional or psychological distress. Sections of the African Caribbean community themselves would like to see more health professionals from a BME background. There is some evidence (Allen et al., 2006; Turner, 2009) that suggests African Caribbeans are more likely to engage with therapy if there is a therapist of the same ethnic or cultural background group and whilst this is not applicable to every person, the over representation of particularly African Caribbean men within mental health services suggests it is a matter to be explored. The ideal of the NHS workforce reflecting the communities it seeks to serve also embodies this.

The study showed a need for ‘someone of the same ilk’ to help to raise the profile of both psychology and counselling psychology. Open dialogue about this issue and
finding creative ways of engaging BME psychologists and counselling psychologists already working in the field would be a positive step forward. Studies suggest that incorporating issues that pertain to BME individuals, conducting research with evidence based BME individuals, and the recruiting of BME staff members, may go some way in addressing this (Chandler, 2011; Helm, 2002; Rogers & Molina, 2006).

Having ‘someone of the same ilk’ might suggest that there are individuals waiting to fulfil this role; this is not so. The results indicate that on the whole psychology did not really have a “WOW” factor for the participants. 16-18 year olds were the group that showed the least interest in psychology. This raises a new issue and that is how to make psychology attractive to young people from the African Caribbean community and perhaps other BME individuals - particularly those on the cusp of making decisions about subjects to study. There is a role for BPS in this. Schools and colleges need to be contacted and purposefully targeted with relevant information pertaining to the profession. Consideration is required as to how psychology is portrayed and perceived. Furthermore, African Caribbean young people can be made aware of the opportunities and rewards of pursuing a career within counselling psychology. Career Advice Services within schools can be strategic in this.

There are complex variables that contribute to underachievement, some of which are briefly mentioned in this study. However, for some participants pre-tertiary education, in particular secondary education, does not seem to be adequately preparing or providing African Caribbean and other BME individuals with the necessary skills, opportunities and self-belief that are required to fulfil individual potential.

Many African Caribbean individuals are fearful of coming into mental health services and often only engage in services when they are at crisis point. The reasons for this are already outlined. Additionally, many are unaware of where they can access
resources. The promotion of psychology as a useful community resource could help in this matter. The Division of Counselling Psychology could benefit from facilitating meetings with agencies that are currently working within the African Caribbean community, so as to engage on a personal level, to hear their concerns and to raise the profile of counselling psychology. Counselling psychologists value the therapeutic relationship with the person over diagnosis and this is achieved by concentrating on the whole person. That is a message that needs to be heard.

Past research suggests that to become a wounded healer the therapist first has to work through his or her own emotional and psychological distress. If, as claimed by some studies (De Gruy, 2005; Smith 2,000; Thompson-Miller & Feagin, 2007; Ward & Hickling, 2004), the legacy of slavery is still impacting on the lives of Black people, how will it be addressed and is it even recognised/considered by mental health professionals? As mentioned, talking about and addressing race and race issues and its impact on the therapeutic process has already been perceived as difficult for some White mental health workers (Keating, 2007; Street, et al., 2004; Thomson et al., 2004). How does one even begin to grasp or understand what the impact of slavery might mean to African Caribbeans and other Black individuals who have not experienced it? DeGruy (2005) refers to this as post traumatic slave syndrome which has among its legacy multigenerational oppression perpetuated by ongoing racism. Some researchers (Bombay, Matheson & Anisman, 2009; Smith 2000; Turner, 2009) posit that socio-economic disadvantage, fear, difficulties forming intimate relationships and the telling and retelling of traumatic events are a few of the lasting legacy of slavery. DeGruy (2005) posits that the impact of racism on the psyche of the Black person has never been measured or consideration given to what it is like living in a hostile environment.
Black people are not the only individuals, who have suffered atrocities from fellow human beings, it is still happening. However, this seems to be long and protracted and whilst it might be a difficult and uncomfortable thing to do, open dialogue about such issues is needful. The inclusion of Black issues onto course curriculums might be a way to address this and it would speak volumes to the African Caribbean community and other communities. It may act as a trade-off between the perceptions of being theory laden that participants spoke about.

Since the inception of this study a group named Black and Asian in Counselling Psychology has been formed within the Division in order to “provide a sense of belonging for Black and Asian Counselling Psychologists within the established community of The Division of Counselling Psychology” (Division of Counselling Psychology website: BACPG, 2013). One of its objectives is to raise the profile of Black and Asian Counselling Psychologists and to explore how respective communities can be served. It also exists as a support network for its members. This suggests that at some level Black and Asian Counselling Psychologists are themselves seeking acceptance and are attempting to find their place within the Division. Perhaps this group can be a means by which the Division can have access to African Caribbean communities and both therapists and community members alike can experience some sense of being understood.

A further difficulty encountered whilst undertaking this study was the unwillingness of some Black Church ministers to allow youths from the church to take part in the research. One minister was concerned about the negative effect that it might have on the youth. If Black churches are advising young people to stay away from psychology it may well add to the belief that it is not a worthwhile subject or career to pursue. Traditionally, spirituality, attending church and worship has been an integral part of the

This is anecdotal but some churches frown upon psychology. It is perceived as the devil’s work and therefore to be shunned rather than embraced. Inadvertently this message could have an adverse effect on members. If for example, worshippers are discouraged from seeking psychological help because it is perceived as unspiritual, potentially it could lead to individuals accessing services when they are in crisis and thus affect their sense of control over the type of treatment received. The concept was not addressed in this study but further research into this area could provide much needed understanding in terms of how this group perceives such matters and its possible consequence when thinking about a career in this field of work (Edge, 2013).

From research that has been carried out, African Caribbeans do study psychology at undergraduate level, but there is little research to indicate whether they go on to study psychology at postgraduate level. Conducting research exploring this would also be useful. In exploring possible contributory factors, the study has in the main highlighted barriers that might hinder African Caribbeans entering into the profession. There are of course African Caribbeans who are counselling psychologists and further studies exploring factors that influenced their decision to enter the profession would provide valuable insight in terms of recruitment as well as visibly stating that contributions from these individuals and other BME community members are welcomed and necessary (Rogers & Molina, 2006; Vasquez & Jones, 2006).

Whilst researching for this study, the researcher has struggled to find UK based research that had been carried out exploring the perceptions of BME individuals, but
particularly African Caribbeans, about psychology and in particular counselling psychology. Promoting research that explores African Caribbeans’ understanding and perception of psychology, as well as possible barriers to choosing a career in this field is very important. The more that this area is researched the greater the understanding in addressing the needs.

**Conclusion**

This mixed methods research set out to explore whether African Caribbeans were interested in pursuing a career in counselling psychology. Why was this necessary? Research indicates that among all Minority Ethnic groups, African Caribbeans are disproportionately represented within mental health services but often only engage in services when they are at crisis point. A relationship of fear and mistrust between some African Caribbeans and mental health workers are probable causes for the lack of engagement.

Would a workforce that is representative of the communities it serves help in this regard? The Department of Health’s agenda suggests that a diverse workforce is necessary. Sections of the African Caribbean community themselves would like to see more health professionals from a BME background. Psychology is the scientific study of human behaviour and therefore it seems appropriate to have more BME individuals trained as psychologists. Counselling psychologists work within the NHS both in primary and secondary care, forensic settings, within education and many other fields was important. Counselling psychologists emphasise the importance of the therapeutic relationship and the subjective experience of the individual. Is it a career that is attractive to African Caribbeans?

There is a lack of research that has explored the interest of African Caribbeans to work within psychology and/or counselling psychology and this study has been useful
in bringing to awareness the fact that psychology is not perceived as being relevant to
the participants. Secondly, the profile of counselling psychology needs to be raised.

Prior to the interviews, participants in this study were not aware that counselling
psychology existed as a career choice. The paucity of African Caribbeans and other
BME individuals working within the field of psychology means it is unlikely to be
considered as a first choice career. Participants, it seems, would like to see more
diversity in the workforce of psychology before some would even start to consider it.
Critical Appraisal
Limitations of the Study

A considerable amount of interesting data was produced from this study that would have been insightful in understanding aspects of the psyche of the African Caribbean person. The decision to focus on a particular population has been beneficial in terms of obtaining information and identifying specific needs within the said group. That is contrasted with research that has no significant interest in the researched group per se but rather fulfilling an official role in conducting the research (Higginbottom & Serrant-Green, 2005). However without a control group the researcher was unable to ascertain whether some of the responses given were pertinent to African Caribbeans or whether they were more generic responses. A further possible limitation of the study can be found in the recruitment process of participants. The difficulty in recruiting undergraduate psychology students for the semi-structured interviews means that the findings cannot support general inferences as to how this participant group perceives a career as a counselling psychologist.

On a methodological level, the statement “I am aware of what a Counselling Psychologist does” was asked to participants in the questionnaire. This gave licence to varying interpretations as to what the researcher might have meant, with parents appearing to know more about it than psychology students. Further corroboration would be needed to look at the different meanings.

The educational requirements for undertaking postgraduate studies are not covered in this study. The educational under achievement of African Caribbean pupils particularly boys is widely researched and hotly debated. As the researcher it was an area that I felt would feature in this study but it was not considered a significant topic by the participants who completed the questionnaire. In fact some of the open responses were forthright in denying such claims. It may well be that a shift is occurring within
the community or it may be that such a view was not a position held by some African Caribbean themselves. Further exploration around this topic would be very useful.

**Reflections on the Research Process**

Research topics are chosen for various reasons and right from the outset some people knew exactly what they wanted to research. When we began to discuss the whole idea of choosing a research topic, I was not sure what I wanted to research. I have an on-going interest in working with children and particularly adolescents and my initial reaction was to choose a topic within that field. As I began my search through journals, books, and speaking to others, I realised that there seemed to be a saturation of research that had already been carried out pertaining to the stigma attached to young people and help seeking behaviour. Finding a topic within that area, which would produce something original and that would keep me motivated and interested, did not appear feasible.

I was convinced that I did not want to research a race-related topic. It felt as if that was a topic that many BME people pursued and I did not want to be categorised into that mould. My initial thoughts around a research topic were about exploring the paucity of Black men who engaged in therapy and who trained as therapists. After speaking to some individuals and conducting some further research around the topic I discovered that research around counselling psychology and African Caribbeans in the UK was nil. The discipline of counselling psychology was new to me. I discovered it as I searched for a course that was compatible with the counselling training that I had already completed coupled with my interest in psychology. The fact that I stumbled across it led me to wonder how many African Caribbeans were familiar with the term counselling psychology.
Having attended a number of work related conferences I have been both surprised and disappointed to find myself as a lone minority in a crowd of psychologists and have pondered as to what the reasons might be. Often it left me to ponder: where were the BME and African Caribbean therapists? In part this research has been about those wonderings.

Critical Reflections on the Research Experience

“The pot carries its maker’s thoughts, feelings, and spirit. To overlook this fact is to miss a crucial truth, whether in clay, story, or science” (Krieger, 1991, p. 89 cited in Finlay, 2002).

The above quote is a reminder that the process of conducting research that has a qualitative component means that the researcher is a central figure in the process (Finlay, 2002). Growing up in a West Indian community I was already aware of the statistics concerning underachievement and African Caribbeans; the stereotypes and the name calling. I have family members who work in education and mental health services. I ruminated about the ethical implications and the efficacy around researching a topic in which I as the researcher had personal knowledge and some experience. Could I be objective in my quest? How might I ensure that I did not create a bias in the work that I would undertake? These concerns were what some researchers referred to as ‘insider/outsider’ ethical and methodological dilemmas (Foster, 2009; Gair, 2012; Ochieng, 2010). That is should researchers be a member of the population that they are researching? (Dwyer & Buckle, 2009). These were hard questions that I had to ask myself.

Whilst quantitative research stresses the need to minimise as much as possible researcher effects on the research process, qualitative research acknowledges that researchers do influence the research process (Higginbottom & Serrant-Green, 2005).
Foster (2009) regards research as “a product of human thought and meaning making, including that of the researcher” (p. 18). I concur with other researchers who have carried out research with participants with whom they share similar experiences or ethnicity in terms of the difficulties, challenges but opportunities that it might present (Serrant-Green, 2002).

The possibility of conducting research and adding to the body of counselling psychology literature was very appealing. The concept of conducting research that might possibly be helpful in the recruiting, training and keeping of African Caribbean Psychologists sounded phenomenal. At that time, I was aware of studies addressing the issue in America and that plans and policies were in place to address the lack of minority ethnic individuals in counselling psychology. This helped in firming my decision.

This has been a very challenging project to undertake. I did not fully appreciate the depth of the process. The design of the questionnaire was my first ever attempt at producing a questionnaire and on reflection I think that the some of the questions were too general and more specific questions particularly relating to counselling psychology were needed. For example, I did not directly ask a question that asked whether the participant personally considered counselling psychology as a career. Also, there were a lot of questions (34 in total) as well the box for open comments. This may have deterred participants from taking part. In fact some participants answered only the Likert type questions, and a few online respondents did not finish the questionnaire. Content validity in any research is crucial and ensuring that all the questions are relevant to the research question was constantly in my mind when designing the questionnaire (Morrow, 2005).
I had anticipated that it might take some time to recruit participants to the study, what I did not fully consider was the length of time that it would take. I chose three participatory groups for the study because it felt important to get a breadth of insight from different perspectives. Related studies had been conducted but these concentrated on the perspectives and experiences of undergraduate psychology students only. I was particularly interested in the points of view of 16-18 year olds because they were on the cusp of making decisions regarding future studies and courses and, for some, career choices. Parents were chosen because I wanted to hear their points of view regarding counselling psychology. Would their opinions be very different from the young people and undergraduate students? Some research (Alika, 2012; Bhavnani, 2006; Kniveton, 2004) suggests that parents are influential in the career choices that their children make. I was curious as to what they might think about a career as a counselling psychologist. All parents, regardless of whether their child was of school leaving age were included in the study. Ideally involving parents and 16-18 year olds of the same family would have been the preferred option. It may have contributed a greater richness to the data because a more accurate comparison between offspring and parent could be achieved.

The decision to administer an online version of the questionnaire was made because it was the best option in the time available to recruit undergraduate African Caribbean psychology students. This was conducted in two ways. I was looking to recruit 40 undergraduate students, a sufficient sample size that would give some degree of generalizability to whatever the findings were. Participants were recruited from the student pool at the University of Wolverhampton and emails were sent out to Heads of Psychology Departments in various universities. The study at the University of Wolverhampton was set up as a one-part study and although this worked well for the questionnaire, it would have been more advantageous to set it up as a two-part study so that when I was conducting the interviews the participants would be already there. I had
to repeat the process of setting up the study, gaining approval and recruiting participants. Due to time constraints and a lack of volunteers, I had to settle for only two undergraduate students for the interview.

After making contact with Heads of Psychology Departments, I was completely reliant upon their goodwill to forward the details of the study to their respective students. I had no way of knowing whether this was done and because the response was slow, I found myself emailing Heads of Department two and three times requesting them to forward the information. I pondered over this many times particularly because I knew that universities would give preference to the needs of their own students first. Initially this felt the most effective way to recruit undergraduate students but I am not sure that it was the best. On reflection, making use of and joining different social media sites such as Facebook and advertising further afield, might have helped in this process.

From as far back as I can remember I have struggled with maths and anything to do with figures. Studying and understanding statistics was one of the biggest hurdles I knew that I would have to face whilst doing the Doctorate. Ten years previously, when I studied at undergraduate level, I chose a qualitative study for my dissertation because of this. During the course of my therapeutic work with clients, I became challenged about my insecurity and fear of working with numbers. It felt quite hypocritical working on behavioural experiments and modifications with clients whilst my own fears remained unabated. I wanted to face my fear and try and deal with it. I took on one of the biggest challenges that I have done in a long time. I chose to use a method that was not my strength and one that I was unfamiliar with. I used a mixed methodology.

Analysing the quantitative data was very challenging. Familiarising myself with lessons taught in my first semester, attempting to control my anxieties and fear levels about statistics and using SPSS for the collating of the quantitative data took a
considerable amount of time and energy. The large number of participants (N =121) meant that there was a lot of data to input which also took time. A lot of the research literature refers to the length of time involved in conducting a mixed methods study and advises that it is beneficial for a team to be involved in the process rather than one single person (Cresswell, 2007; Tariq & Woodman, 2010). Problems with my computer not saving data added to the high levels of stress that I was already feeling and at times it felt overwhelming. The end results indicate moderate success in eliciting data that can be translated into recommendations that can be added to the body of researched knowledge towards a more diverse workforce in Counselling Psychology.

Although the number of males who completed the questionnaire was outside of my control, I was disappointed with the overall outcome. I hoped to have a more balanced ratio between men and women and participants so as to have a consensus of points regarding psychology and counselling psychology. Perhaps this was totally unrealistic particularly in the light of the shortage of men irrespective of ethnicity generally working in psychology and related fields of work. Despite the unequal ratio of males to females who completed the questionnaire, I found that among the parents, more males than females were keener to be interviewed. There was a curiosity among the men and they wanted to put their point of view forward whereas the females were more reticent.

Contrastingly was the response of young people towards being interviewed. Although it was hard to recruit 16-18 year olds to complete the questionnaire recruiting participants for the interviews seemed a lot harder. Many young people seemed to develop an aversion to being recorded and were unwilling to be interviewed because of this, even though originally they had agreed and were verbally told about what would be involved in the study. Furthermore the interviews themselves tended to be rather short for this group. There was one that I could not use because it only lasted ten minutes. On
reflection I wondered whether a focus group for this age group consisting of 6-8 individuals may have worked better. On the one hand it would have provided a safety in numbers for those who felt shy or embarrassed to speak but on the other hand there was the possibility that the presence of having strong characters in the group would prevent everyone’s voice being heard.

So much of getting participants for my study depended upon getting the timing right around the academic timetable. I was always aware of this but it became a real issue in recruiting for all aspects of the study but in particular the interviews. Some parents were reluctant for their child to take time away from studying for their exams to conduct interviews and students themselves did not see it as a priority.

Notwithstanding that, the interviewees showed a real interest in the subject of the research study and I was very eager to hear their points of view. During this process, I was again very much aware of the potential of my own biases and possible influences. I tried to address this by asking interviewees to say more about what they meant by statements that they made rather than putting my own interpretation on what they were saying.

Finally, I found Braun & Clarke’s (2006) thematic analysis provided the framework upon which the themes that emerged from the data could be analysed. It was flexible to use. I really enjoyed reading and working with the transcripts. Even as I typed, I found myself making notes of interesting pieces of conversation that the participants were saying.
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Appendices
Appendix A
University of Wolverhampton Ethics Approval Letter

September 17th 2012

k.i.manktelow@wlv.ac.uk

Dear,

This is to confirm that the Behavioural Sciences Ethics Committee (BSEC), a subgroup of the School of Applied Sciences Ethics Committee, finally approved the proposal of Ivet White, entitled What are the factors determining whether African Caribbeans choose careers as counselling psychologists? An exploratory study using a mixed methods approach on April 18th 2012.

Yours sincerely,

Ken Manktelow
Professor of Psychology
Chair (to August 31st 2012), BSEC
Appendix B
Amendments to Research Proposal from Behavioural Sciences Ethics Committee

For the Attention of the Committee Chair

The following amendments were requested to my research proposal:

4.4  Ivet White
RES20A, “What are the factors determining whether African Caribbeans choose careers as Counselling Psychologists? An exploratory study using a mixed methods approach.”

1. There were many inconsistencies between the application and the appendices in what the researcher proposed to do (e.g. states 15 questions in survey when there are actually 17).

2. Inconsistency in terminology. For example on the survey, question 1 says black males but question 2 says Afro-Caribbean.

3. The recruitment process for all groups is unclear.

4. A letter of support for using the website as a means of recruitment is required.

5. Information sheet and consent form contain leading material – ‘factors that prevent’. More neutral wording is required: “factors that influence whether” rather than “factors that may prevent”, for instance.

6. No interview schedule is included

Those items have been amended. The amendments can be found on:

Pages 2-3

Appendices C – G and O – Q.

Ivet White
Appendix C

RES 20A
(October 2003)

School of Applied Sciences
Behavioural Sciences Ethics Committee:
submission of project for approval

- This form must be word processed – no handwritten forms can be considered
- ALL sections of this form must be completed
- No project may commence without authorisation from the Divisional and School Ethics Committees

CATEGORY A PROJECTS:
There is no significant interference with participants’ physical or psychological wellbeing. In detail:

- The research procedure is not likely to be stressful or distressing.
- The research materials are not of a sensitive, discriminatory or otherwise inappropriate nature.
- The participants are not members of a vulnerable group, such as those with a recognised clinical or psychological or similar condition.
- The research design is sufficiently well-grounded so that the participant’s time is not wasted.

Projects involving access to confidential records may be considered Category A provided that the investigator’s access to these is part of his/her normal professional duties.

Category A projects will be approved by the Behavioural Sciences Ethics Committee and monitored by the School Ethics Committee. The School Ethics Committee will not normally examine individual Category A projects but receives a record of projects that have been approved at subcommittee level.
<table>
<thead>
<tr>
<th>Title of Project:</th>
<th>What are the factors determining whether African Caribbeans choose carers as Counselling Psychologists? An exploratory study using a mixed methods approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Supervisor: (for all student projects)</td>
<td>Dr R Darby</td>
</tr>
<tr>
<td>Name of Investigator(s):</td>
<td>Ivet White</td>
</tr>
<tr>
<td>Level of Research: (Module code, MPhil/PhD, Staff)</td>
<td>Doctorate</td>
</tr>
<tr>
<td>Qualifications/Expertise of the investigator relevant to the submission:</td>
<td>BSc</td>
</tr>
</tbody>
</table>
| Participants: Please indicate the population and number of participants, the nature of the participant group and how they will be recruited. | A sample of individuals totalling 128 who describe themselves as “African Caribbean or who are of African Caribbean” decent will be used for this study. The three sample groups that will be used for this study are:-  
1. Teenagers aged 16-18  
2. Undergraduate psychology students  
3. Adults who are parents  
120 participants will be asked to participate in a survey and the remaining eight will be invited to participate in a semi structured interview. This will consist of four parents and four undergraduate psychology students. Both male and female participants will be used.  
The four undergraduate participants for the semi structured interview will be recruited from the University of Wolverhampton. If there are insufficient undergraduate psychology students to do this the researcher will obtain participants from other Universities in the region.  
A letter will be sent to the respective Head of the Psychology Department requesting permission to contact the students.  
The adult participants for the semi structured interviews will be recruited from various West Indian Association Organisations, hairdressing salons, church groups or barber shops.  
The structure for the interview questions will be guided by the findings from the survey questionnaire.  
The number of teenagers aged 16-18 who will take part in the questionnaire is 40. These participants will |
be recruited from schools and colleges within the West Midlands and Northamptonshire regions. A letter requesting permission to speak to the teenagers will be sent to Head Teachers and Principals of various colleges.

The teenagers will be asked to complete 18 questions. This should take no longer than 15 minutes.

The number of undergraduate students who will take part in the questionnaire will be 40. The students will be recruited from Universities within the west Midlands and further afield. A letter will be sent to the respective Head of the Psychology Departments requesting permission to contact the students.

The students will be asked to complete 18 questions. This should take no longer than 15 minutes.

No age restriction will be placed on the sample from the Universities and the researcher will seek a mixture of male and female participants.

The number of parents who will take part in the questionnaire will be 40. Their status can either be single or married. The adult participants will be recruited from various West Indian Association Organisations, church groups, hairdressing salons and barber shops.

The parents will be asked to complete 18 questions. This should take no longer than 15 minutes.

This study will follow ethical guidelines as set down by the British Psychological Society. It is not envisaged that this study will be distressing or stressful and therefore a Category A submission approval is being sought.

Please attach the following and tick the box* provided to confirm that each has been included:

*in the case of undergraduate projects, this should be done by supervisors to confirm that each part is properly constituted

<p>| Rationale for and expected outcomes of the study |  |
| Details of method: materials, design and procedure |  |
| Information sheet* and informed consent form for participants |  |
| *to include appropriate safeguards for confidentiality and anonymity |  |</p>
<table>
<thead>
<tr>
<th>Details of how information will be held and disposed of</th>
</tr>
</thead>
<tbody>
<tr>
<td>Details of if/how results will be fed back to participants</td>
</tr>
<tr>
<td>Letters requesting, or granting, consent from any collaborating institutions</td>
</tr>
<tr>
<td>Letters requesting, or granting, consent from head teacher or parents or equivalent, if participants are under the age of 16</td>
</tr>
<tr>
<td>Is ethical approval required from any external body? NO (delete as appropriate)</td>
</tr>
<tr>
<td>If yes, which committee?</td>
</tr>
</tbody>
</table>

*NB. Where another ethics committee is involved, the research cannot be carried out until approval has been granted by both the School committee and the external committee.*

<table>
<thead>
<tr>
<th>Signed:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Investigator)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signed:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Supervisor)</td>
<td></td>
</tr>
</tbody>
</table>

Except in the case of staff research, all correspondence will be conducted through the supervisor.

FOR USE BY THE SCHOOL ETHICS COMMITTEE

<table>
<thead>
<tr>
<th>Subcommittee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approval Granted:</td>
</tr>
<tr>
<td>(Chair of Behav Sci Ethics Committee)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Granted:</td>
</tr>
<tr>
<td>(Chair of School Ethics Committee)</td>
</tr>
</tbody>
</table>
Appendix D
Email Letter to Heads of Psychology Departments

Dear

My name is Ivet White and I am a Practitioner Doctorate student in Counselling Psychology at the University of Wolverhampton. In fulfilment of the Doctorate Programme I am conducting a piece of research looking at possible reasons that may contribute to the paucity of people from the African Caribbean community who choose Counselling Psychology as a career choice. Although Black and Minority Ethnic community groups form a substantial part of the population in the UK current research suggests that they are underrepresented in the field of Applied Psychology. Within the discipline of Counselling Psychology African Caribbeans are noticeable by their absence.

I am writing to ask whether it will be possible for your undergraduate psychology students to take part in my doctoral research project. I am interested in students who describe themselves as Black and of African Caribbean descent.

I am conducting an online survey questionnaire with undergraduate students studying psychology to ascertain their thoughts on this subject. I envisage this to be carried out through your internal system. Ethical approval has been received from the University of Wolverhampton. Please see the attached information sheet with an online link for your perusal.

When the research is complete, my hope is that awareness will be raised so that those who run training courses may have some insight into both the recruiting and training of African Caribbean Counselling Psychologists.

Please find attached an information sheet with an online link to the questionnaire for your perusal. If consent is given by you for the pupils to take part in this study, I would like to make arrangements to visit the school so that we can discuss the best way forward. This would be at your convenience.

If you require any further information please do not hesitate to contact me. My email address is Ivet.White@wlv.ac.uk. If you would like to speak to my Research Supervisor please feel free to contact him. His details are:

Dr Richard Darby
Research Supervisor
University of Wolverhampton Psychology Division
Wulfruna Street
Wolverhampton
WV1 1SB
Thank you for your assistance in this matter and I wait to hear from you in the near future.

Yours sincerely

Ivet White
Counselling Psychologist in Training
CALL FOR PARTICIPANTS

PURPOSE OF STUDY
I am a practitioner doctorate student in counselling psychology at the University of Wolverhampton. I am conducting research exploring factors that may influence whether African Caribbeans choose careers as Counselling Psychologists. A mixed methods approach will be used for this study. I will be using a survey and semi structured interviews. This research has been granted ethical approval by the University of Wolverhampton.

PARTICIPANTS NEEDED
If you describe yourself as African Caribbean or of African Caribbean descent and you are an undergraduate psychology student your assistance is required.

WHAT YOU HAVE TO DO
You will be required to complete a survey questionnaire. It should take approximately 20 minutes to complete. Participation in this survey is voluntary and you have the right to withdraw at any time. However, if you decide to take part in this study you are helping to advance the knowledge of research in this area which is very limited.

WHAT NEXT
If you would like to participate in this study please click on the link below and follow the instructions to access this survey:
If you would like further information please contact me at Ivet.White@wlv.ac.uk or School of Applied Sciences, University of Wolverhampton Psychology Division, City Campus, Wulfruna Street, Wolverhampton, WV1 1SB.
Appendix F
Undergraduate Survey Questionnaire

What factors determine whether African Caribbeans choose careers as Counselling Psychologists?
undergraduate survey

Introduction

Survey questionnaire

Hello Participant

Thank you for taking the time to read about this survey. My name is Ivet White. I am a second year practitioner doctorate student at the University of Wolverhampton.

This survey forms part of a doctoral research study. Its purpose is to explore possible factors that may contribute to understanding why so few African Caribbeans choose to study Psychology and in particular pursue a career in Counselling Psychology. It should take approximately 20 minutes to complete this questionnaire.

There are no right or wrong answers – just your opinions and thoughts. If you feel that you are unable to answer a question please feel free to move on to the next one. Participation in this research is completely voluntary and you have the right to withdraw at any time. If you wish to do so, please click cancel at the bottom of the particular page that you are on.

By taking part in this study you are helping to advance the knowledge of research in this area which is currently very limited. This study has been ethically approved by the Ethics Committee of the University of Wolverhampton.

Please note that all your answers will be collected and stored anonymously. The information will be stored securely in line with Survey Gizmo privacy policy and confidential statement. Access will be available to the researcher, her supervisors and examiners of this research.
If you would like some further information about this research project please contact:

Email: Ivet.White@wlv.ac.uk

Supervisor: Dr. Richard Darby. Email address: R.Darby@wlv.ac.uk

If you would like to participate in this survey please select below.

1) I would like to participate in the survey.*
   ( ) Yes
   ( ) No

Demographic information

2) 

Please complete the following by selecting your appropriate age group.

   ( ) 18-24
   ( ) 25-34
   ( ) 35-54
   ( ) 55+

3) Please indicate marital status

   ( ) single
   ( ) married
   ( ) divorced
   ( ) widowed
4) Please indicate gender

( ) male
( ) female

5) What is the highest level of education you have attended so far?

( ) School (up to 16)
( ) College (16-18)
( ) Access course

______________________________________________________________________________

INSTRUCTIONS: Please indicate how you feel about the statements below by selecting the appropriate option.

6) I am aware of what a Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

7) Do you know any professional Psychologists?

( ) Yes
( ) No

8) What is the name of your award title? E.g. BSc (Honours) Psychology, Psychology with Sociology, Psychology with English Language and Communication
9) I would like to pursue a career in Psychology.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

10) What are your reasons for this answer?

11) Psychology has been discussed as a possible career choice in my home.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

12) I am aware of what a Counselling Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

13) Could you briefly explain your answer?

14) How do you think a Psychologist differs from a Counselling Psychologist?
15) **Counselling Psychology is a professional career.**

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

16) What are your reasons for this answer?

17) **The topics that I have chosen to study reflect my academic interests.**

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

18) What are your reasons for this answer?

19) **I prefer educational courses which have a more academic basis. For example, Maths, English, Science and Law.**

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree
20) I am more likely to have a fulfilling career if I do well at academic subjects

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

21) What are your reasons for this answer?

22) I would like to pursue a professional career such as a Doctor, Teacher, Lawyer or Accountant

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

23) I am more likely to have a fulfilling career if I do well at practical subjects.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

24) I would like to pursue a creative career in areas such as Music, Dance, Drama or Sports.

( ) Strongly disagree
( ) Disagree
25) I know that I will have parental support in whatever work I choose to do.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

26) My experience of school/college was a positive one.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

27) What are your reasons for this answer?

28) I was well informed from school/college about the subject of Psychology.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree
29) I have felt encouraged by my teachers to succeed.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

30) I found studying at school difficult.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

31) What are your reasons for this answer?

32) When I have finished my current degree, I am interested in pursuing further studies at postgraduate level.

( ) Yes
( ) No

33) What are your reasons for this answer?

New Page

34) African Caribbean males are more likely to underachieve in school and college compared to their peers.
35) What are your reasons for this answer?

36) African Caribbeans are more likely to attend university when they are older rather than going to university straight from school or college.

37) What are your reasons for this answer?

38) African Caribbean students prefer to attend Sixth Form College outside of school rather than completing sixth form within a school environment.

39) What are your reasons for this answer?
40) My experience as an undergraduate student in education has been more positive than when I was at school/college.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

41) What are your reasons for this answer?

Thank you

Thank you for taking part in this study. I am investigating the relationship between education, counselling psychology and the African Caribbean community and how these three factors affect each other. The main focus of this study is examining why there are relatively few African Caribbeans who follow a career as Counselling Psychologists.

If you are interested in the findings of this initial phase of the study please contact Ivet White (Ivet.White@wlv.ac.uk) after 1 January 2013. For the findings of this and the second phase contact me after 31 July 2013.

Please be aware that due to the anonymity of this survey we are unable to provide individual feedback.
Appendix G
List of Universities Contacted for Student Participation in Questionnaire

1. Aston University
   Psychology, School of Life & Health Sciences,
   Aston Triangle, BIRMINGHAM B4 7ET
   Contact: a.p.burgess@aston.ac.uk.

2. University of Aberdeen
   School of Psychology, King's College,
   ABERDEEN, AB24 3FX
   Contact: c.n.macrae@abdn.ac.uk

3. Bangor University
   Department of Psychology, Brigantia Building,
   BANGOR, Gwynedd, LL57 2DG
   Contact: psychology@bangor.ac.uk

4. University of Bath
   School of Psychology, Claverton Down, Bath,
   North East, SOMERSET, BA2 7AY
   Contact: b.verplanken@bath.ac.uk

5. University of Bedfordshire
   Department of Psychology, University Square,
   LUTON, LU1 3JU
   Contact: joseph.adonu@beds.ac.uk

6. Birkbeck University of London
   Department of Psychological Sciences, Malet Street,
   LONDON, WC1E 7HX
   Contact: mike.oaksford@bbk.ac.uk

7. University of Birmingham
   School of Psychology, University of Birmingham, Edgbaston,
   BIRMINGHAM, B15 2TT
   Contact: hos.psychology@contacts.bham.ac.uk

8. Birmingham City University
   Division of Psychology, 3rd Floor Dawson Building,
   City North Campus, BIRMINGHAM, B42 2SU
   Contact: craig.jackson@bcu.ac.uk
9. University of Bolton
   Psychology Department, Deane Road,
   BOLTON, BL3 5AB
   Contact: pr4@bolton.ac.uk

10. Bournemouth University, Psychology Department, Poole House,
    Talbot Campus, POOLE, BH12 5BB
    Contact: smcdougall@bournemouth.ac.uk

11. Bradford University
    Centre for Psychology Studies, University of Bradford,
    Richmond Road, BRADFORD, BD7 1DK
    Contact: g.marks1@bradford.ac.uk

12. University of Bristol
    Department of Experimental Psychology, 12a Priory Road,
    BRISTOL, BS8 1TU
    Contact: j.noyes@bristol.ac.uk

13. Brunel University
    Psychology Department, UXBRIDGE, UB8 3PH
    Contact: taeko.wydell@brunel.ac.uk

14. The University of Buckingham
    Psychology Department, Hunter Street,
    BUCKINGHAM, MK18 1EG
    Contact: alan.martin@buckingham.ac.uk

15. Canterbury Christ Church University
    Department of applied psychology, Salomons Campus,
    Broomhill Road, Southborough, KENT, TN3 0TG
    Contact: chris.pike@canterbury.ac.uk

16. University of Cardiff
    School of Psychology Research Ethics Committee,
    Tower Building, Park Place,
    CARDIFF, CF10 3AT
    Contact: Natalie Moran, psychethics@Cardiff.ac.uk
17. City University, London
   School of Arts and Social Sciences,
   Northampton Square,
   LONDON, EC1V 0HB
   Contact: M.Poirier@city.ac.uk

18. Coventry University
   Department of Psychology & Behavioural Sciences,
   Faculty of Health and Life Sciences, Priory Street,
   COVENTRY, CV5 6FB
   Contact: aa2557@coventry.ac.uk

19. De Montfort University
   School of Applied Social Sciences, The Gateway,
   LEICESTER, LE1 9BH
   Contact: slyttle@dmu.ac.uk

20. Derby University
   Institute of Behavioural Sciences, Faculty of Education, Health and Sciences,
   Kedleston Road, DERBY, DE22 1GB
   Contact: j.montague@derby.ac.uk

21. Essex University
   Department of Psychology, University of Essex,
   Wivenhoe Park, COLCHESTER, CO4 3SQ
   Contact: psy-hod@essex.ac.uk

22. Exeter University
   Department of Psychology, Washington Singer
   Laboratories, EXETER, EX4 4QG
   Contact: m.levine@exeter.ac.uk

23. University of Gloucestershire
   Faculty of Applied Sciences, The Park, CHELTENHAM,
   Gloucestershire, GL50 2RH.
   Contact: jcollins@glos.ac.uk

24. Goldsmiths, University of London
   Department of Psychology, Whitehead Building, New Cross,
   LONDON, SE14 6NW
   Contact: e.hill@gold.ac.uk
25. University of Greenwich London
   School of Health and Social Care, Eltham,
   LONDON, SE9 2UG
   Contact: p.f.maras@greenwich.ac.uk

26. University of Hertfordshire
   Department of Psychology,
   HATFIELD, AL10 9AB
   Contact: a.holland@herts.ac.uk,

27. Huddersfield University
   School of Human & Health Sciences, Queensgate,
   HUDDERSFIELD, HD1 3DH
   Contact: d.b.palmer@hud.ac.uk

28. University of Hull
   Department of Psychology, Fenner Building,
   Cottingham Road, HULL, HU6 7RX
   Contact: m.reid@hull.ac.uk

29. Keele University
   School of Psychology, KEELE,
   Staffordshire, ST5 5BG
   Contact: m.murray@keele.ac.uk

30. The University of Kent
   Department of Psychology,
   CANTERBURY, CT2 7LZ
   Contact: psyhos@kent.ac.uk

31. Kingston University, London
   Faculty of Arts and Social Sciences, Penrhyn Road
   Kingston upon Thames, SURREY, KT1 2EE
   Contact: c.uller@kingston.ac.uk

32. Lancaster University
   Department of Psychology, Bailrigg,
   LANCASTER, LA1 4YF
   Contact: c.lewis@lancaster.ac.uk
33. University of Leeds
   Faculty of Medicine and Health, Institute of Psychological Sciences
   LEEDS, LS2 9JT
   Contact: d.b.o’connor@leeds.ac.uk

34. Leeds Metropolitan University
   School of Health & Human Sciences, Faculty of Health & Environment,
   City Campus, LEEDS, LS1 3HE
   Contact: m.hardman@leedsmet.ac.uk

35. University of Leicester
   Clinical Psychology Unit, 104 Regent Road,
   LEICESTER, LE1 7LT
   Contact: mw125@le.ac.uk

36. University of Lincoln
   Brayford Pool, LINCOLN, LN6 7TS
   Contact: rbretherton@lincoln.ac.uk

37. University of Liverpool
   School of Psychology, Eleanor Rathbone Building,
   Bedford Street South, LIVERPOOL, L69 7ZA
   Contact: down@liv.ac.uk

38. Liverpool John Moores University
   School of Natural Sciences and Psychology, Tom Reilly Building,
   Byrom Street, LIVERPOOL L3 3AF
   Contact: courses@ljmu.ac.uk

39. London Metropolitan University
   Department of Psychology, Calcutta House, Old Castle Street,
   LONDON, E1 7NT
   Contact: e.charman@londonmet.ac.uk

40. The London School of Economics and Political Science
   Houghton Street, LONDON, WC2A 2AE
   Contact: s.lahlou@lse.ac.uk

41. London South Bank University
   Arts and Human Sciences/Psychology, Southwark Campus,
   Borough Road, LONDON, SE1 OAA
   Contact: alberyip@lsbu.ac.uk
42. Loughborough University
   School of Sport, Exercise and Health Sciences
   LOUGHBOROUGH, Leicester, LE11 3TU
   Contact: A.Brindley@lboro.ac.uk

43. University of Manchester
   Oxford Road, MANCHESTER, M13, 9PL
   Contact: geoff.beattie@manchester.ac.uk

44. Manchester Metropolitan University
   Department of Psychology, Elizabeth Gaskell Campus, Hathersage Road,
   MANCHESTER, M13 0JA
   Contact: c.horrocks@mmu.ac.uk

45. Middlesex University
   Department of Psychology, School of Health and Social Sciences,
   The Burroughs, Hendon, LONDON, NW4 4BT
   Contact: o.vandenakker@mdx.ac.uk

46. Newcastle University
   School of Psychology, 4th Floor, Ridley Building,
   Queen Victoria Road, NEWCASTLE UPON TYNE, NE1 7RU
   Contact: vicki.bruce@ncl.ac.uk

47. Newman University
   Department of Psychology, Genners Lane, Bartley Green,
   BIRMINGHAM, B32 3NT
   Contact: S.Ross@staff.newman.ac.uk

48. Newport, University of Wales
   School of Health and Social Sciences, Caerleon Campus, Lodge Road,
   Caerleon, NEWPORT, NP18 3NT
   Contact: uci@newport.ac.uk

49. University of Northampton
   Park Campus, Boughton Green Road,
   NORTHAMPTON, NN2 7AL
   Contact: Graham.Mitchell@northampton.ac.uk
50. University of Nottingham
   School of Psychology, University of Nottingham,
   NOTTINGHAM, NG7 2RD
   Contact: Charlotte.Langham@nottingham.ac.uk

51. Nottingham Trent University
   Division of Psychology, Burton Street,
   NOTTINGHAM, NG4 4BU
   Contact: mark.griffiths@ntu.ac.uk

52. The Open University, Psychology Department, Social Sciences Faculty,
   Walton Hall,
   MILTON KEYNES, MK7 6AA
   Contact: www.open.ac.uk/socialsciences

53. Oxford Brookes University
   Headington Campus, Gipsy Lane,
   OXFORD, OX3 0BP
   Contact: margaretharris@brookes.ac.uk

54. University of Plymouth
   Drake Circus, PLYMOUTH, PL4 8AA
   Contact: S.Handley@plymouth.ac.uk

55. University of Portsmouth
   Department of Psychology, University of Portsmouth,
   King Henry Building, King Henry 1 Street,
   PORTSMOUTH, PO1 2DY
   Contact: sherria.hoskins@port.ac.uk

56. University of Reading
   School of Psychology and Clinical Language Sciences,
   Whiteknights, PO Box 238,
   READING, RG6 6AL
   Contact: p.m.riddell@reading.ac.uk

57. Regent’s University London
   Inner Circle, Regent’s Park,
   LONDON, NW1 4NS
   Contact: exrel@regents.ac.uk
58. University of Roehampton
   School of Psychology, Roehampton Lane,
   LONDON, SW15 5PU
   Contact: enquiries@roehampton.ac.uk

59. Royal Holloway, University of London
   Department of Psychology, Egham Hill,
   EGHAM, TW20 0EX
   Contact: Paula.nicolson@ac.uk

60. University of Sheffield
   Department of Psychology, SHEFFIELD, S10 2TP
   Contact: P.Norman@sheffield.ac.uk

61. Sheffield Hallam University
   City Campus, Howard Street, SHEFFIELD,
   S10 2BP
   Contact: enquiries@shu.ac.uk

62. University of Southampton
   Department of Psychology, Faculty of Social and Human Sciences,
   Building 44, Highfield Campus,
   SOUTHAMPTON, S09 5NH
   Contact: S.V.Stevenage@soton.ac.uk

63. London South Bank University
   Department of Psychology, Faculty of Arts and Human Sciences,
   103 Borough Road, LONDON, SE1 0AA
   Contact: alberyip@lsbu.ac.uk

64. University of Staffordshire
   Department of Psychology, School of Sciences, College Road,
   STOKE-ON-TRENT, ST4 2DE
   Contact: peter.jones@staffs.ac.uk

65. University of Sunderland
   Department of Psychology, Faculty of Applied Sciences,
   St. Peter's Campus, SUNDERLAND, SR6 0DD
   Contact: d.sanders@sunderland.ac.uk
66. University of Surrey
   Faculty of Arts and Human Sciences, AD Building,
   GUILDFORD, Surrey, GU2 5XH
   Contact: p.hegarty@surrey.ac.uk

67. University of Sussex
   School of Psychology, Falmer,
   BRIGHTON, BN1 9QH
   Contact: p.g.clifton@sussex.ac.uk

68. University of Swansea
   Psychology Department, College of Human and Health Sciences,
   Vivian Tower, SWANSEA, SA2 8PP
   Contact: m.t.blagrove@swansea.ac.uk

69. Teesside University
   School of Social Sciences and Law, Tees Valley,
   MIDDLESBOROUGH, TS1 3BA
   Contact: s.becker@tees.ac.uk

70. University of Warwick
   Department of Psychology, COVENTRY, CV4 7AL
   Contact: Psychology@warwick.ac.uk

71. Queen Mary University of London
   Mile End Road, LONDON, E1 4NS
   Contact: p.hajek@qmul.ac.uk

72. University of West London
   School of Psychology, Social Work and Human Sciences,
   Paragon House, Boston Manor Road, Brentford,
   MIDDLESEX, TW8 9GA
   Contact: learning.advice@uwl.ac.uk

73. University of East London
   Docklands Campus, University Way,
   LONDON, E16 2RD
   Contact: d.g.moore@uel.ac.uk
74. University of Westminster
   Chair of the University Research Ethics Committee, 309 Regent Street,
   LONDON, W1R 8AL
   Contact: D.Husbands1@westminster.ac.uk

75. University of the West of England
   Department of Psychology, Faculty of Health & Life Sciences,
   Frenchay Campus, Coldharbour Lane, Frenchay,
   BRISTOL, BS16 1QY
   Contact: tony.ward@uwe.ac.uk

76. University of York
   Department of Psychology, Heslington,
   YORK, YO10 5DD
   Contact: quentin.summerfield@york.ac.uk
Appendix H
African Caribbean Societies Contacted for Undergraduates Survey

1. City University London, African Caribbean Society
   Contact: Secretary/President: acs@city.ac.uk
   Contact: Secretary/President: acs.oxforduniversity.gmail.com
3. University College London, African Caribbean Society
   Contact: Secretary/President: ucluacs.yahoo.com
4. University of Leeds, African Caribbean Society
   Contact: Secretary/President: leedsacs@gmail.com
5. University of Bradford, African Caribbean Society
   Contact: Secretary/President: bradfordacs@yahoo.co.uk
6. University of Sheffield, African Caribbean Society
   Contact: Secretary/President: sheffieldacs@gmail.com
7. Queen Mary University, African Caribbean Society
   Contact: Secretary/President: Qmul.Acs@gmail.com
Appendix I
Email Letter sent to Head of Sixth Form Schools and Colleges

Dear

My name is Ivet White and I am a Practitioner Doctorate student in Counselling Psychology at the University of Wolverhampton. In fulfilment of the Doctorate Programme I am conducting a piece of research looking at possible reasons that may contribute to the paucity of people from the African Caribbean community who choose Counselling Psychology as a career choice. Although Black and Minority Ethnic community groups form a substantial part of the population in the UK current research suggests that they are underrepresented in the field of Applied Psychology.

I am conducting a survey questionnaire with 16-18 year olds to ascertain their thoughts on this subject. Either an online link or a paper copy of the questionnaire is available. I am writing to you, to enquire if some of your students aged 16-18 could take part in this. I am interested in students who describe themselves as Black and of African Caribbean descent. Ethical approval has been received from the University of Wolverhampton.

When the research is complete, my hope is that awareness will be raised so that those who run training courses may have some insight into both the recruiting and training of African Caribbean Counselling Psychologists.

Please find attached an information sheet with an online link to the questionnaire for your perusal. If consent is given by you for the pupils to take part in this study, I would like to make arrangements to visit the school so that we can discuss the best way forward. This would be at your convenience.

If you require any further information please do not hesitate to contact me. My email address is Ivet.White@wlv.ac.uk. If you would like to speak to my Research Supervisor please feel free to contact him. His details are:

Dr Richard Darby
Research Supervisor
University of Wolverhampton Psychology Division
Wulfruna Street
Wolverhampton
WV1 1SB
Thank you for your assistance in this matter and I wait to hear from you in the near future.

Yours sincerely

Ivet White
Counselling Psychologist in Training
Appendix J
16-18 Year Old Survey Questionnaire

What factors determine whether African Caribbeans choose careers as Counselling Psychologists? 16-18 years

Introduction

Survey questionnaire

Hello Participant

Thank you for taking the time to read about this survey. My name is Ivet White. I am a second year practitioner doctorate student at the University of Wolverhampton.

This survey forms part of a doctoral research study. Its purpose is to explore possible factors that may contribute to understanding why so few African Caribbeans choose to study Psychology and in particular pursue a career in Counselling Psychology. It should take approximately 20 minutes to complete this questionnaire.

There are no right or wrong answers – just your opinions and thoughts. If you feel that you are unable to answer a question please feel free to move on to the next one. Participation in this research is completely voluntary and you have the right to withdraw at any time. If you wish to do so, please click cancel at the bottom of the particular page that you are on.

By taking part in this study you are helping to advance the knowledge of research in this area which is currently very limited. This study has been ethically approved by the Ethics Committee of the University of Wolverhampton.

Please note that all your answers will be collected and stored anonymously. The information will be stored securely in line with Survey Gizmo privacy policy and confidential statement. Access will be available to the researcher, her supervisors and examiners of this research.
If you would like some further information about this research project please contact:

Email: Ivet.White@wlv.ac.uk

Supervisor: Dr. Richard Darby. Email address: R.Darby@wlv.ac.uk

If you would like to participate in this survey please select below.

1) I would like to participate in the survey.*

( ) Yes
( ) No

Demographic information

2) Please complete the following by selecting your appropriate age group.

( ) 16-17
( ) 18-24
( ) 25-34
( ) 35-54
( ) 55+

3) Please indicate marital status

( ) single
( ) married
( ) divorced
( ) widowed
4) Please indicate gender

( ) male
( ) female

5) What is the highest level of education you have attended?

( ) School (up to 16)
( ) College (16-18)

INSTRUCTIONS: Please indicate how you feel about the statements below by selecting the appropriate option.

6) I am aware of what a Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

7) Do you know any professional Psychologists?

( ) Yes
( ) No

8) Have you studied/currently studying psychology?
If yes at what level?

( ) No
( ) Yes
( ) G.C.S.E.
( ) A.S. level
( ) Advanced (‘A’) level
9) I would like to pursue a career in Psychology.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

10) What are your reasons for this answer?

11) Psychology has been discussed as a possible career choice in my home.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

12) I am aware of what a Counselling Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

13) What are your reasons for this answer?

14) How do you think a Psychologist differs from a Counselling Psychologist?
15) **Counselling Psychology is a professional career.**

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

16) What are your reasons for this answer?

17) **The topics that I have chosen to study reflect my academic interests.**

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

18) **I prefer educational courses which have a more academic basis. For example, Maths, English, Science and Law.**

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

19) **I am more likely to have a fulfilling career if I do well at academic subjects**

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree
20) What are your reasons for this answer?

21) I would like to pursue a professional career such as a Doctor, Teacher, Lawyer or Accountant

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

22) I am more likely to have a fulfilling career if I do well at practical subjects.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

23) I would like to pursue a creative career in areas such as Music, Dance, Drama or Sports.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

24) I know that I will have parental support in whatever work I choose to do.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree
New Page

25) My experience of school/college so far is a positive one.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

26) What are your reasons for this answer?

27) I was well informed from school/college about the subject of Psychology.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

28) I have felt encouraged by my teachers to succeed.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

29) I found studying at school difficult.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

30) What are your reasons for this answer?
31) I am interested in continuing my studies to degree and postgraduate levels.

( ) Yes
( ) No

32) What are your reasons for this answer?

---

New Page

33) African Caribbean males are more likely to underachieve in school/college compared to their peers.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

34) What are your reasons for this answer?

35) African Caribbeans are more likely to attend university when they are older rather than go to university straight from school/college.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

36) What are your reasons for this answer?

37) African Caribbean students prefer to attend Sixth Form College outside of school rather than completing sixth form within a school environment.
38) What are your reasons for this answer?

Thank you

Thank you for taking part in this study. I am investigating the relationship between education, counselling psychology and the African Caribbean community and how these three factors affect each other. The main focus of this study is examining why there are relatively few African Caribbeans who follow a career as Counselling Psychologists.

If you are interested in the findings of this initial phase of the study please contact Ivet White (Ivet.White@wlv.ac.uk) after 1 January 2013. For the findings of this and the second phase contact me after 31 July 2013.

Please be aware that due to the anonymity of this survey we are unable to provide individual feedback.
CALL FOR PARTICIPANTS

PURPOSE OF STUDY
I am a practitioner doctorate student in counselling psychology at the University of Wolverhampton. I am conducting research exploring possible factors that may influence whether African Caribbeans choose careers as Counselling Psychologists. A mixed methods approach will be used for this study. I will be using a survey and semi structured interviews. This research has been granted ethical approval by the University of Wolverhampton.

PARTICIPANTS NEEDED
If you describe yourself as African Caribbean or of African Caribbean descent and you are aged 16-18 your assistance is required.

WHAT YOU HAVE TO DO
You will be required to complete a survey questionnaire. It should take approximately 20 minutes to complete. Participation in this survey is voluntary and you have the right to withdraw at any time. However, if you decide to take part in this study you are helping to advance the knowledge of research in this area which is very limited.

WHAT NEXT
If you would like to participate in this study please click on the link below to access this survey:

If you would like further information please contact me at Ivet.White@wlv.ac.uk or School of Applied Sciences, University of Wolverhampton Psychology Division, City Campus, Wulfruna Street, Wolverhampton, WV1 1SB.
Appendix L
List of Schools, Colleges and Youth Centre Contacted 16-18 Year Old Participants

Wolverhampton Contacts

1. Colton Hills Community School a Specialist Language College
   Jeremy Road, Goldthorn Park,
   WOLVERHAMPTON, WV4 5DG

2. Deansfield Community School, Specialists in Media Arts
   Deans Road, WOLVERHAMPTON, WV1 2BH

3. Heath Park School
   Prestwood Road,
   WOLVERHAMPTON, WV11 1RD

4. Highfields School
   Boundary Way, Penn,
   WOLVERHAMPTON, WV4 4NT

5. North East Wolverhampton Academy (Foxley Site)
   Marsh Lane, Fordhouses
   WOLVERHAMPTON, WV10 6SE

6. North East Wolverhampton Academy (Northwood Site)
   Northwood Park Road, Bushbury
   WOLVERHAMPTON, WV10 8EP

7. South Wolverhampton and Bilston Academy
   Dudley Street, Bilston
   WOLVERHAMPTON, WV14 0LA

8. Moseley Park School
   Holland Road, Bilston
   WOLVERHAMPTON, WV14 6LU

9. Base 25
   Castle House, Wheeler's Fold
   WOLVERHAMPTON, WV1 1HN
Northamptonshire Contacts

10. Abbeyfield School
   Mereway,
   NORTHAMPTON, NN4 8BU

11. Kingsthorpe Community College
   Boughton Green Road,
   NORTHAMPTON, NN2 7HR

12. Malcolm Arnold Academy Secondary School
   Trinity Avenue,
   NORTHAMPTON, NN2 6JW

13. The Northamptonshire Academy
   Billing Brook Road,
   NORTHAMPTON, NN3 8NH

14. Northampton School for Girls
   Spinney Hill Road,
   NORTHAMPTON, NN3 6DG

15. Thomas Becket Catholic School
   Kettering Road North,
   NORTHAMPTON, NN3 6HT

16. Weston Favell Academy
   Booth Lane South,
   NORTHAMPTON, NN3 3EZ

17. Northampton School for Boys
   Billing Road,
   NORTHAMPTON, NN1 5RT

18. Moulton School and Science College
   Pound Lane, Moulton
   NORTHAMPTON, NN3 7SD

19. Overstone Park School
   Overstone Park, Overstone
   NORTHAMPTON, NN6 ODT

20. Moulton College
   West Street, Moulton
   NORTHAMPTON, NN3 7RR
21. Northampton College
   Booth Lane North,
   NORTHAMPTON, NN3 3RF

22. Tresham College of Further and Higher Education
   Windmill Avenue,
   KETTERING, Northamptonshire, NN15 6ER

Bristol Contact

23. St Brendans 6th Form College
   Broomhill Rd,
   BRISTOL, Avon BS4 5RQ
CALL FOR PARTICIPANTS

PURPOSE OF STUDY

I am a practitioner doctorate student in counselling psychology at the University of Wolverhampton. I am conducting research exploring possible factors that may influence whether African Caribbeans choose careers as Counselling Psychologists. A mixed methods approach will be used for this study. I will be using a survey and semi structured interviews. This research has been granted ethical approval by the University of Wolverhampton.

PARTICIPANTS NEEDED

If you describe yourself as African Caribbean or of African Caribbean descent and you are a parent your assistance is required.

WHAT YOU HAVE TO DO

You will be required to complete a survey questionnaire. It should take approximately 20 minutes to complete. Participation in this survey is voluntary and you have the right to withdraw at any time. However, if you decide to take part in this study you are helping to advance the knowledge of research in this area which is very limited.

WHAT NEXT

If you would like to participate in this study please click on the link below and follow the instructions to access this survey:

If you would like further information please contact me at Ivet.White@wlv.ac.uk or School of Applied Sciences, University of Wolverhampton, Psychology Division, City Campus, Wulfruna Street, Wolverhampton, WV1 1SB.
Appendix Q
Parents Survey Questionnaire

What factors determine whether African Caribbeans choose careers as Counselling Psychologists? Parents survey

Introduction

Survey questionnaire

Hello Participant

Thank you for taking the time to read about this survey. My name is Ivet White. I am a second year practitioner doctorate student at the University of Wolverhampton.

This survey forms part of a doctoral research study. Its purpose is to explore possible factors that may contribute to understanding why so few African Caribbeans choose to study Psychology and in particular pursue a career in Counselling Psychology. It should take approximately 20 minutes to complete this questionnaire.

There are no right or wrong answers – just your opinions and thoughts. If you feel that you are unable to answer a question please feel free to move on to the next one. Participation in this research is completely voluntary and you have the right to withdraw at any time. If you wish to do so, please click cancel at the bottom of the particular page that you are on.

By taking part in this study you are helping to advance the knowledge of research in this area which is currently very limited. This study has been ethically approved by the Ethics Committee of the University of Wolverhampton.

Please note that all your answers will be collected and stored anonymously. The information will be stored securely in line with Survey
Gizmo privacy policy and confidential statement. Access will be available to the researcher, her supervisors and examiners of this research.

If you would like some further information about this research project please contact:

Email: Ivet.White@wlv.ac.uk

Supervisor: Dr. Richard Darby. Email address: R.Darby@wlv.ac.uk

If you would like to participate in this survey please select below.

1) I would like to participate in the survey.*

( ) Yes
( ) No

Demographic information

2) Please complete the following by selecting your appropriate age group.

( ) 18-24
( ) 25-34
( ) 35-54
( ) 55+

3) Please indicate marital status

( ) single
( ) married
( ) divorced
( ) widowed
4) Please indicate gender

( ) male
( ) female

5) What is the highest level of education you have attended?

( ) School (up to 16)
( ) College (16-18)
( ) FE college (post 18)
( ) Access course
( ) University

INSTRUCTIONS: Please indicate how you feel about the statements below by selecting the appropriate option.

6) I am aware of what a Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

7) Do you know any professional Psychologists?

( ) Yes
( ) No
8) Has your child studied/currently studying psychology?
If yes at what level?

( ) No
( ) Yes
( ) G.C.S.E.
( ) A.S. level
( ) Advanced ('A') level
( ) Degree level
( ) Postgraduate level

9) I would like my child/children to pursue a career in Psychology.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

10) What are your reasons for this answer?

11) Psychology has been discussed as a possible career choice in my home with my child/children.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree
12) I am aware of what a Counselling Psychologist does.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

13) Could you briefly explain your answer?

14) How do you think a Psychologist differs from a Counselling Psychologist?

15) Counselling Psychology is a professional career.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

16) What are your reasons for this answer?

17) The topics that my child/children have chosen to study reflect my academic interests.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree
18) I prefer my child/children to choose educational courses which have a more academic basis. For example, Maths, English, Science and Law.

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

19) My child/children are likely to have a fulfilling career if he/she does well at academic subjects.

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

20) I would like my child/children to pursue a professional career such as a Doctor, Teacher, Lawyer or Accountant

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree

21) My child/children more likely to have a fulfilling career if he/she does well at practical subjects.

( ) Strongly disagree  
( ) Disagree  
( ) Not sure  
( ) Agree  
( ) Strongly agree
22) I would like my child/children to pursue a creative career in areas such as Music, Dance, Drama or Sports.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

23) I know that I will give parental support in whatever work my child/children choose to do.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

New Page

24) Thinking about your own experience of education:
My experience of school/college was a positive one.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

25) What are your reasons for this answer?

26) I was well informed by my child/children’s school/college about the subject of Psychology.
27) I felt encouraged that my child/children were encouraged by teachers to succeed.

28) Thinking about your own experience of education: I found studying at school difficult.

29) What are your reasons for this answer?

30) I am interested in my child/children continuing his/her studies to degree/postgraduate level.
31) What are your reasons for this answer?

New Page

32) African Caribbean males are more likely to underachieve in school/college compared to their peers.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

33) What are your reasons for this answer?

34) African Caribbeans are more likely to attend university when they are older rather than going straight from school/college.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

35) What are your reasons for this answer?

36) African Caribbean students prefer to attend Sixth Form College outside of school rather than completing sixth form within a school environment.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

37) What are your reasons for this answer?

38) If your child/children is studying at Degree level:
The experience of my child/children as an undergraduate student has been more positive than at school/college.

( ) Strongly disagree
( ) Disagree
( ) Not sure
( ) Agree
( ) Strongly agree

39) What are your reasons for this answer?

Thank you

Thank you for taking part in this study. I am investigating the relationship between education, counselling psychology and the African Caribbean community and how these three factors affect each other. The main focus of this study is examining why there are relatively few African Caribbeans who follow a career as Counselling Psychologists.

If you are interested in the findings of this initial phase of the study please contact Ivet White (Ivet.White@wlv.ac.uk) after 1 January 2013. For the findings of this and the second phase contact me after 31 July 2013.

Please be aware that due to the anonymity of this survey we are unable to provide individual feedback.
Appendix R
Email Letter Sent to Church Leaders to Recruit Parents

Dear

My name is Ivet White and I am a Practitioner Doctorate student in Counselling Psychology at the University of Wolverhampton. In fulfilment of the Doctorate Programme I am conducting a piece of research looking at possible reasons that may contribute to the paucity of people from the African Caribbean community who choose Counselling Psychology as a career choice. Although Black and Minority Ethnic community groups form a substantial part of the population in the UK current research suggests that they are underrepresented in the field of Applied Psychology.

I am conducting a survey questionnaire with parents who describe themselves as Black and of African Caribbean descent to ascertain their thoughts on this subject. I am writing to you, to enquire if you would like to take part in this. Ethical approval has been received from the University of Wolverhampton to carry out this research.

Please find attached an information sheet with an online link to the questionnaire. If you prefer, a paper copy of the survey questionnaire is also available.

When the research is complete, my hope is that awareness will be raised so that those who run training courses may have some more insight into both the recruiting and training of African Caribbean Counselling Psychologists.

If you require any further information please do not hesitate to contact me. My email address is Ivet.White@wlv.ac.uk. If you would like to speak to my Research Supervisor please feel free to contact him. His details are:

Dr Richard Darby
Research Supervisor
University of Wolverhampton Psychology Division
Wulfruna Street
Wolverhampton
WV1 1SB

Thank you for your assistance in this matter and I wait to hear from you in the near future.

Yours sincerely

Ivet White
Counselling Psychologist in Training
Appendix S
Request to Amend Research Proposal to Include 16-18 Year Old Participants for Semi Structured Interviews

D.Chadwick@wlv.ac.uk
Thu 28/03/2013 12:13

Dear Darren

I would like to make a request for an amendment to my research proposal. On page 2 of the RES 20A: under participants section: I would like to amend my total number of participants from 128 to 132. Based on the quantitative data analysis, the amendment will enable me to include 16-18 years in the interview process.

I have spoken to Richard, my supervisor and he has agreed this.

Thanks very much
Ivet

Reply
Thu 28/03/2013 16:08
To: White, Ivet;
Cc: Sarai, Mandeep;
Hi Ivet

That's fine I can chair's action that and add it to the next ethics minutes (Mandy could you include this under the Chair's actions please when you put them together).

Best wishes

Darren
Appendix T
Semi Structured Interview Questions

Undergraduates

1. (a) What thoughts or images come to your mind when you think about psychology?
   (b) How might that make you feel about psychology?

2. How did you decide to study psychology?

3. To become a qualified psychologist means studying to postgraduate level. Is that something you have considered? Can you elaborate?

4. What factors might make psychology attractive to study?

5. Some people say psychology is a difficult subject to study: what has been your experience?

6. Do you think that psychology is as rigorous an academic subject as say Maths, English or a natural Science? PROMPT: What are your reasons for this?

7. How would you describe your experience of school? PROMPT What are the reasons for your answer?

8. How did you get on with your studies at school?

9. In what ways were you encouraged by your teachers to succeed in your studies?

10. Some research suggests that African Caribbeans prefer to attend sixth form at a college rather than at school: What would cause a person to choose one over the other?

11. What is your attitude towards mental health and mental health issues?

12. What does your family and friends think about mental health?

13. What are your thoughts about the service provided by Mental Health Services?

14. If you discuss your career options at home: Is a career in Counselling Psychology considered as an option for him/her? PROMPT Can you elaborate on your answer?

15. Can you tell me: What do you know about the job of a Counselling Psychologist?

16. What would you need to know about Counselling Psychology if you were to consider it as a career choice?

17. What are your perceptions of Counselling Psychology as a professional career?

18. What personal qualities do you believe are required, if you wished to pursue a career in Counselling Psychology?
19. Have you ever considered pursuing a career in Counselling psychology?

**PROMPT** What are the reasons for your answer

20. Pursuing a career in areas such as music, dance, drama or sports seems to be a popular choice for some African Caribbeans. What do you think are the reasons for this?

21. What would make the above career choices more popular than say a career as a Counselling Psychologist?

22. Does having a career in creative arts such as dance music sports or drama relate to your idea of success?

23. What kind of career choices have members of your family pursued?

24. What or whom has provided the greatest impact in terms of help, support and guidance in you making a career choice?

25. In what ways have your parents influenced/supported your career choice so far?

We have come to the end of this interview. Thank you for taking part in it.
Appendix U

Semi Structured Interview Questions

16-18 year olds

1. (a) What thoughts or images come to your mind when you think about psychology? 
   (b) How might that make you feel about psychology?
2. Is psychology a subject that you study/have considered studying? 
PROMPT: Reasons and if yes what level?
3. To become a qualified psychologist means studying to postgraduate level. Is that something you have considered? Please elaborate.
4. What factors might make psychology attractive to study?
5. Some people say psychology is a difficult subject to study: what do you think?
6. Do you think that psychology is as rigorous an academic subject as say Maths, English or a natural Science? 
PROMPT: What are your reasons for this?
7. How would you describe your experience at school? 
PROMPT What are the reasons for your answer?
8. How have you got on with your studies at school?
9. In what ways have you been encouraged by your teachers to succeed in your studies?
10. Some research suggests that African Caribbeans prefer to attend sixth form at a college rather than at school: What would cause a person to choose one over the other?
11. What is your attitude towards mental health and mental health issues?
12. What does your family and friends think about mental health?
13. What are your thoughts about the service provided by Mental Health Services?
14. If you discuss your career options at home: Is a career in Counselling Psychology considered as an option for you? 
PROMPT Can you elaborate on your answer?
15. Can you tell me: What do you know about the job of a Counselling Psychologist?
16. What would you need to know about Counselling Psychology if you were to consider it as a career choice?
17. What are your perceptions of Counselling Psychology as a professional career?
18. What personal qualities do you believe are required, if you wished to pursue a career in Counselling Psychology?
19. Have you ever considered pursuing a career in Counselling Psychology?
   **PROMPT** What are the reasons for your answer?

20. Pursuing a career in areas such as music, dance, drama or sports seems to be a popular choice for some African Caribbeans. What do you think are the reasons for this?

21. What would make the above career choices more popular than say a career as a Counselling Psychologist?

22. Does having a career in creative arts such as dance music sports or drama relate to your idea of success?

23. What kind of career choices have members of your family/friends pursued?

24. What or whom has provided the greatest impact in terms of help, support and guidance in you making a career choice?

25. In what ways have your parents influenced/supported your career choices so far?

We have come to the end of this interview. Thank you for taking part in it.
Appendix V
Semi Structured Interview Questions

Parents

1. What thoughts or images come to your mind when you think about psychology?
   (b) How might that make you feel about psychology?

2. Is psychology a subject that your child has studied/is studying? **PROMPT:** Reasons and if yes what level?

3. To become a qualified psychologist means studying to postgraduate level. Is that something you have considered? Can you elaborate?

4. What factors might make psychology attractive to study?

5. Some people say psychology is a difficult subject to study: what do you think?
   (b) How would you encourage your child if he or she showed an interest in studying psychology?

6. Do you think that psychology is as rigorous an academic subject as say Maths, English or a natural Science? **PROMPT:** What are your reasons for this?

7. How would you describe your experience of school? **PROMPT** What are the reasons for your answer?

8. How did you get on with your studies at school?

9. In what ways were you encouraged by your teachers to succeed in your studies?

10. Some research suggests that African Caribbeans prefer to attend sixth form at a college rather than at school: What would cause a person to choose one over the other?

11. What is your attitude towards mental health and mental health issues?

12. What does your family and friends think about mental health?

13. What are your thoughts about the service provided by Mental Health Services?

14. If you discuss career options at home with your child: Is a career in Counselling Psychology considered as an option for him/her? **PROMPT** Can you elaborate on your answer?

15. Can you tell me: What do you know about the job of a Counselling Psychologist?

16. What would you need to know about Counselling Psychology if you were to consider it as a career choice?

17. What are your perceptions of Counselling Psychology as a professional career?
18. What personal qualities do you believe are required, if you wished to pursue a career in Counselling Psychology?

19. Have you ever considered pursuing a career in Counselling psychology?
    **PROMPT** What are the reasons for your answer

20. Pursuing a career in areas such as music, dance, drama or sports seems to be a popular choice for some African Caribbeans. What do you think are the reasons for this?

21. What would make the above career choices more popular than say a career as a Counselling Psychologist?

22. Does having a career in creative arts such as dance music sports or drama relate to your idea of success?

23. What kind of career choices have members of your family pursued?

24. What has influenced the career choice that your child has made?

25. In what ways have you influenced/supported your child's career choices?

26. What career would you like your child to pursue?

We have now come to the end of this interview. Thank you for taking part in it.
INFORMATION SHEET FOR PARTICIPANTS

Dear Participant

Thank you for volunteering to take part in this research study. My name is Ivet White. I am currently studying towards a practitioner doctorate in Counselling Psychology at the University of Wolverhampton.

African Caribbeans with other Minority Ethnic individuals make choices regarding their future careers every day. However, few choose Counselling Psychology as a career choice. The purpose of this research is to explore possible factors that might influence the decision making process of African Caribbean individuals to Counselling Psychology. The results of this study will hopefully provide information that can inform the recruiting and training process for African Caribbeans and others from Black and Minority Ethnic communities.

Participation in this study will involve a face to face interview which will last for approximately 30 minutes. The interview will be arranged at a time and place that is convenient to you. The interview will be digitally recorded and transcribed. The transcription will be used for analysis. The transcript will be seen by Ivet White the researcher, her supervisor and the examiners of the research study. Transcripts will be stored securely by the University of Wolverhampton Psychology Department.

The research will follow the British Psychological Society’s code of ethics and conduct, ensuring that all research material is treated confidentially. Furthermore, your identity will be anonymised in all of the interview material. After examination of the research study the recording of the interview will either be destroyed or returned to you. Please specify your preference on the consent form. Also, if you would like to receive a summary of the findings at the completion of the study please indicate on the contact details form.

Please be aware that your participation in this interview is voluntary. You can decline to answer any question that you do not wish to answer. You have the right to withdraw at any time.
This study has been granted ethical approval by the Ethics Committee of the University of Wolverhampton and is supervised by Dr. Richard Darby, Head of Department – Psychology (Acting), University of Wolverhampton. If you have any questions you can contact the supervisor at R.Darby@wlv.ac.uk or the researcher at Ivet.White@wlv.ac.uk.

Thank you once again for taking part in this research.
CONSENT FORM FOR PARTICIPANTS IN RESEARCH STUDY

Title of Study: What factors determine whether African Caribbeans choose careers as Counselling Psychologists? An exploratory study using a mixed methods approach

- I confirm that I have read and understand the details presented about the study.
- I agree to take part in this study and to the digital recording of the interview.
- I agree that the transcript of my interview can be used by the Researcher and to the use of anonymised direct quotes both in the study and subsequent publications.
- I understand that the transcript will be seen by the Supervisor and Examiner for the purpose of the study. I agree to transcripts being stored securely, safely and anonymously.
- I understand that the information that I provide will be treated as confidential and my identity will be anonymised.
- I understand that my participation is voluntary. I can decline to answer a question if I want to. I am free to withdraw at any time.
- I am happy to disclose my contact details.

Name of Researcher: ......................................................................................

Signature: .....................................................................................................

Name of Participant: ......................................................................................

Signature: .....................................................................................................

Date: .............................................................................................................
Appendix W
Information Pack – Semi Structured Interviews

CONTACT DETAILS FOR RESEARCH PARTICIPANTS

Name..............................................................................................................
Age...................................................................................................................
Male/Female....................................................................................................
Marital Status...................................................................................................
Name of School/University if applicable
......................................................................................................................

My preferred method of contact:
Email/Telephone. (Please delete as appropriate)

Please provide your
Email address: .................................................................

OR

Contact Telephone Number


Upon completion of the study I would like to receive a summary of the findings:

YES/NO (Please delete as appropriate)

I would like the digital recording destroyed

OR

I would like the recording returned to me
Appendix W
Information Pack – Semi Structured Interviews

Referral Information Sheet

Dear Participant

If you feel that you have been affected in any way as a result of taking part in this interview, please find below contact details for Agencies that might be able to help you.

1. Service Six – Northampton’s Premier Youth Service Provider
   Email or MSN: help@servicesix.co.uk
   Telephone or text: 0332 400716/07833 305273

2. Manna House Counselling Services
   73 St Giles Street
   NORTHAMPTON, NN1 1JF
   Email: mhcs@mannahouse.org.uk
   Telephone: 01604 633304

3. Northampton Samaritans
   2 St. Michaels Avenue
   NORTHAMPTON, NN1 4JQ
   Telephone: 08457 90 90 90

4. Student Counselling Services
   MB Building, City Campus
   University of Wolverhampton
   WOLVERHAMPTON, WV1 1LY
   Email: counsellingservices@wlv.ac.uk
   Telephone: 01902 322572
CONSENT FORM FOR PARTICIPANTS IN RESEARCH STUDY

Title of Study: What factors determine whether African Caribbeans choose careers as Counselling Psychologists? An exploratory study using a mixed methods approach

- I confirm that I have read and understand the details presented about the study.
- I agree to take part in this study and to the digital recording of the interview.
- I agree that the transcript of my interview can be used by the Researcher and to the use of anonymised direct quotes both in the study and subsequent publications.
- I understand that the transcript will be seen by the Supervisor and Examiner for the purpose of the study. I agree to transcripts being stored securely, safely and anonymously.
- I understand that the information that I provide will be treated as confidential and my identity will be anonymised.
- I understand that my participation is voluntary. I can decline to answer a question if I want to. I am free to withdraw at any time.
- I am happy to disclose my contact details.

Name of Researcher: ..........................................................................
Signature: ..........................................................

Name of Participant: ...........................................................................
Signature: ..........................................................................................

Date: ..................................................................................................
Email: BACP

From: Michael Pearson <michael.pearson@bacp.co.uk>
Sent: 29 May 2013 16:38
To: White, Ivet
Subject: RE: Stats for Counsellors of African Caribbean heritage

Hi Ivet,

Thank you for your email.

Please note our records are not completely accurate as it is not compulsory for all our members to disclose details such as their ethnic backgrounds. From the information we do have I can confirm we currently have 39970 individual members. This breaks down into ethnic groups as follows:

- Bangladeshi: 56
- Black African: 279
- Black Caribbean: 657
- Chinese: 104
- Indian: 442
- Pakistani: 142
- White: 29658
- Other: 1146

I hope this helps.

Michael Pearson
Membership Supervisor
Figure 14. Thematic map – Undergraduates

School Experience
- Lessons difficult
- Took part in subjects I liked, but not others
- Low GCSE grades
- Hard to sit and read books
- Studies difficult
- Terrible at revision
- Stereotypical view of person lying on a couch
- Not sure it’s a professional career

Perception of Psychology
- Lots of theory and a lot to remember
- It helps to understand people
- Knows someone changes views
- Not discussed at home, I’m not interested
- Not out in the public domain
- Strong person
- Not a lot of paperwork

Mental Health
- The science part difficult
- Not discussed about, not discussed
- Not talked about, not discussed
- Fairly good service
- Help is there for people
- Knowing someone changes views

Career as a Counselling Psychologist
- If you have a ‘face’ that you relate to in a career – that helps
- Could be a fun career but I don’t know about it
- Not seen as academic
- Career choice
- Management and business
- Trailblazers needed
- Work ethos of family

Support/Careers
- Money and status
- Instant rewards
- Expression of self
- Teacher
- Parents but especially mothers
- Not sure it’s a professional career

Interest in counselling
- Young Black people see what media shows as the way to be
- Not a lot of paperwork
- Support/Careers
- Not seen as academic
- Career choice

Music, Dance, Drama and Sport
- Instant rewards
- Expression of self
- Teacher
- Parents but especially mothers

Money and status
- Trailblazers needed
- Work ethos of family

Strong person
- Family closed minded towards it
- Not talked about, not discussed
- Not seen as academic
- Not a lot of paperwork

Mentors
- Trying to teach son to focus more on academics
- Work ethos of family

Fairly good service
- Help is there for people
- Knowing someone changes views
- Not discussed at home, I’m not interested
- Not out in the public domain

Not talked about, not discussed
- Not seen as academic
- Not a lot of paperwork

Stereotypical view of person lying on a couch
- Not sure it’s a professional career
- Not a lot of paperwork
- Career choice

Exams difficult
- Low GCSE grades
- Hard to sit and read books
- Studies difficult
- Terrible at revision
- Stereotypical view of person lying on a couch
- Not sure it’s a professional career

Not discussed at home, I’m not interested
- Not out in the public domain
- Strong person
- Not a lot of paperwork

Could be a fun career but I don’t know about it
- Not seen as academic
- Career choice
- Management and business
- Trailblazers needed
- Work ethos of family

Not talked about, not discussed
- Not seen as academic
- Not a lot of paperwork

Family closed minded towards it
- Not talked about, not discussed
- Not seen as academic
- Not a lot of paperwork

Not discussed at home, I’m not interested
- Not out in the public domain
- Strong person
- Not a lot of paperwork

Not talked about, not discussed
- Not seen as academic
- Not a lot of paperwork

Terrible at revision
- Stereotypical view of person lying on a couch
- Not sure it’s a professional career
- Not a lot of paperwork

Low GCSE grades
- Hard to sit and read books
- Studies difficult
- Terrible at revision
- Stereotypical view of person lying on a couch
- Not sure it’s a professional career

It helps to understand people
- Not a lot of paperwork
- Career choice
- Money and status
- Support/Careers
- Parents but especially mothers

Lots of theory and a lot to remember
- It helps to understand people
- Not a lot of paperwork
- Career choice
- Money and status
- Support/Careers
- Parents but especially mothers
Figure 15. Thematic map – 16 – 18 years

- School Experience
  - Homework difficult
  - Didn’t really do work at school, started now but it’s a bit too late
  - Revision is hard. I don’t know how to do it
  - Importance of studying not explained enough
  - Teachers quite negative and that doesn’t motivate you
  - Feel like teachers are giving up
  - More effort needed to help kids to study
  - Can’t comment because I don’t know enough about it

- Perception of Psychology
  - Feeling controlled
  - Very difficult and loads of theory to remember
  - Trying to get in your head
  - Important subject but difficult and complex to study
  - Interesting subject
  - Early introduction into the school curriculum needed
  - Important subject but difficult and complex to study

- Knowledge about Counselling Psychology
  - It’s not something you come across everyday
  - Something wrong with you
  - Not talked about
  - Don’t know what it is (confusion with other professions)
  - You need a strong mind
  - Black role models shown within Sport and Music on TV
  - Can be very damaging and not helpful
  - Never heard about it before
  - Professional career
  - Just don’t hear about it, it’s not well known
  - People know your name
  - Media
  - Natural talent
  - Exposure to Music, drama and sports at an early age develops a love for it.
  - Seen as something to do because you’ve seen others do
  - Parent’s to ‘push’ towards academics
  - People need to open door for themselves
  - Have skill in area, but not seeing any Black Psychologist

- Career as Counselling Psychologist
  - Professional career
  - Not much academics needed
  - Seen as something to do because you’ve seen others do

- Attitude to Mental Health
  - Services are good
  - Not discussed at home

- Services are good

- Figure 15. Thematic map – 16 – 18 years
Appendix 9
Parents Thematic Map