Ethnicity and culture: Maximising trainee counsellor learning

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How can student learning on ethnicity and culture best support counselling professionals to work confidently with diverse client groups?

*‘Sense of feeling that they [BME students] have to represent their ethnicity or culture – no one white is expected to do that!’*

**Aims and context**:

Small qualitative study aims to make sense of my process as only Black Minority Ethnic (BME) student in my cohort, relative to that of peers. Considers how training process delivers teaching and the impact of BME representation.

Counselling and psychotherapy professions are predominantly White, female and middle-class and Britain is increasingly diverse.

The bridge between profession and diverse client base is reliant on translation of ethical guidance into core therapeutic practice.

Existing BME community disadvantages have been exacerbated by the: adverse impact of austerity measures; Brexit leave campaign; rise in right wing ideologies; and, pervasiveness of institutional racism within public services and establishments.

How can a White profession, taught in a White institution, to a White student body ensure that multicultural needs are met once professionals graduate?

**Design methodology**:

Qualitative data from short 7 question survey on opinions on learning experience. Anonymous online access. Data analysis using inductive thematic analysis allowing for semantic interpretation. Restricted to course peers. Responses coded, themes defined and data assigned then analysed.

**Findings**:

Respondents highlighted what facilitated best learning outcomes these related to perceptions on BME representation. ‘*Direct quotations’ used* for illustration.

Thematic coding during analysis revealed six key themes connected to three areas of study.

These are detailed below:

**Counselling Diploma Study**

**Area 1 Course content and delivery**

Theme 1 Learning with BME – learning relationally through peer interaction

‘Shared lived experience has been a source of profound reflection’

Theme 2 Representing BME – exploring BME representation on the course

‘What it is that the course provides in terms of equity’

**Area 2 Student Experience**

Theme 3 Being BME – understanding of perceived issues

‘Alienating to be in the minority’

Theme 4 Meeting BME – reactions to BME course participants

‘Bringing a background that is not understood’

**Area 3 Professional and practice implications**

Theme 5 Knowing BME – being better informed on ethnicity and culture

‘I just don't really know much about different backgrounds’

Theme 6 Increasing BME – cultivating diversity in the profession

‘To shine a spotlight on the levels of prejudice and blind spots’

**Conclusions/Implications:**

Open honest exploration of racism and ethnicity would benefit trainees, white and BME, and clients:

* Relational interactions with BME peers highlight otherwise latent attitudes and feelings
* Appetite to further explore personal attitudes
* Structure to ensure student safety and wellbeing
* Go a long way to help alleviate fear of white trainees and isolation of BME trainees.

Support for practice development:

* Increasing representation during training – guest speakers, trainers, BME literature, case studies
* Additional support for BME students – access to specialist counselling organisations, information on issues relating to racism/discrimination and how these play out in an all-white environment restricted by a confidentiality agreement, ‘buddy’ support
* BME mentors from within the profession

**Research Limitations:**

Small restricted sample (12 respondents), participants known to researcher, findings may not generalise to other counselling courses/students and, question wording and coding may be influenced by personal bias.