



The Black Psychologist and the White Client in a Racist Country

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Abstract

The article is part of a Master's thesis, completed in Brazil, 2021. The research aimed to study the intersubjective racial relations, arising from the transference relationship between Black psychologists and their White clients. The study deals with the encounter and clinical management of the mentioned dyad. This is a qualitative clinical research, using Bardin's content analysis, with ten interviews conducted in a remote environment. This paper analyzes interpersonal relationships in the construction of bonds with patients, as well as psychic structures, considering them crossed by structural racism. From the literature on racial relations, and especially on Whiteness, it also considers the symbolic care between Blacks and Whites. As a result, the authors highlight the need to deepen the studies, training and research of psychology on the topics mentioned making possible processes of intervention for a psychology attentive to the maintenance of mental health from the diversities and their singularities in the Brazilian structural racism.

Keywords: Racial Relations in Clinic; Structural Racism; Whiteness; Psychic Structures; Qualitative Study

Introduction

Brazil is a very mixed country (around 56% of the population declares themselves to be Black or Mixed Race) and it is also a very racist country. The local kind of racism operates with the colorism: the darker the skin color, the worse the racism. The more darker somebody is, more difficult is the life; differences and inequalities are naturalized, by their own denial. Racism is a subject that is rarely touched upon, which reinforces the myth of racial equality, while producing daily victims of violence [1-6].

The colorist racism interferes in the way the persons see and present themselves (racial identity), how they choose their friends and romantic relationships; and it is crucial to determinate the social opportunities. Historically, Afro-Brazilians were-and still are-pressured to be or look like White people and it is possible to identify as White despite having Black parents.

Considering these facts, psychologists must be attentive of the ways racism appears in their practice, reflecting upon the power dynamics that sustain the race based hierarchy of

Brazilian society, and sustain inequalities [7-9]. This article presents some results of a research that deals with the encounters and clinical maintenance of Black psychologists with their White customers, in the creation of both of their racial identities.

Psychology has pointed to the need for psychologists to deal with racial issues, a serious social and psychological matter [10-12]. This important issue has been addressed by the American Psychological Association [13] and by several scholars [14-16]. Although this, in Brazil, there is a lack of specific training in racial issues which is coherent with the denied racism.

The members within the dyad Black psychologists and White customers may have several transferences or counter transferences processes and responds to each other based on their racial identity and socialization experiences; all of which certainly may affect the therapeutic process. As Gouveia, et al. [17] pointed, the therapeutic relationship is treated as universal phenomena, which reflects one essentialist, abstract conception of the psychotherapy, as an encounter between two "human beings", maybe not affected for the injuries caused by social problems and diseases like racism. Although this idealization, the therapeutic relationship has the presence of pre-existing transferences that are racialized and that have important consequences in the psychotherapeutic process.

The present research aimed to study the intersubjective racial relations, arising from the transference relationship between Black psychologists and their White clients. The work also aims to propose a reflection about Whiteness - a system of privileges inherent in whiteness - from the clinical relationship between Black therapists and their White customers. It can be a thorny task, as White patients do not tend to be targets for research into racial themes [8,18-20] or to have negative experiences with the so called "racial stress" [21].

Methodology

The research was done in 2021 through a technological platform, working remotely, given the pandemic context. Bardin's Content Analysis [22] was used with ten semi-structured interviews with Black psychologists, men and women, in six Brazilian cities, considering two categories: Clinical Encounters and Clinical Maintenance.

Results

The bond of the clinical encounter brings the possibility that ambivalent feelings might arise, via destructive and positive behaviors. However, taking a patient in is not an unconditional act by the professional; it is usually a paid

activity. Because racism is so often denied even in a racist country such as Brazil, research has shown that for the creation of a bond during the clinical encounter, the Black psychologist occupies a place that in the imaginary of the White client is a place of Whiteness. For this reason, there might be a denial of the race of the clinical professional or a strong idealization of this psychologist [23].

The research also showed that Black psychologists many times have no means to attempt clinical maintenance, since the beginning of their work as therapists, due to racist projections of the clinical encounter. This is shown in a more marked way in seven reports about White customers, with strong rejections to their Black psychologists:

I remember a patient that realized I was Black as I opened the door, and she immediately went: sorry, I don't need the service, I'm going to deal with intimate issues and I wanted a White psychologist (CO).

Eight reports from Black psychologists about their White clients reported unconscious mechanisms related to racism, understood as manifested behaviors such as: changing the subject, omitting things and distorting answers, silences and uncomfortableness when patients become aware of their racism.

Still on the clinical encounter, some of the interviewed brought up the matter of racialization as something that does not reach White patients, who do not see themselves as part of a race or part of an oppressive racial group, and do not make a careful observation of their bond with a Black therapist, in their conscious and unconscious mechanisms as observed in therapy.

All the interviewed, in some way, spoke of some experience of racism in their lives, and eight of them declared themselves as having racial awareness as Black. The possibility to speak about White customers was a way to face the experiences of racism experienced in their personal relationships, in their family lives, and of course, in their practices. Some psychologists signaled that they took these reflections to their own therapists. They sought to deal with these issues, considering racism not only in their practices but to understand their self-esteem and self-knowledge.

Discussion

According to Cardoso [20] and Schucman [5] there is in Brazil a certain awkwardness around the fact that research might focus on Whiteness, removing Blackness as part of the problem. This is made even more complicated when the researchers are Black themselves [10,20].

Academic knowledge needs to assume that Black subjects, in their process joining universities, face difficulties that usually remain there through the whole way. The same author emphasizes democratic education, from an engaged pedagogy, instigating critical consciousness and reflection about dominating structures and overcoming them, focusing on social justice and considering gender, race and class.

The psychologist or psychoanalyst has a fundamental role presenting to their clients what is shown in manifestations or latency in their verbal and non-verbal contents, presenting a truth that they still do not know about themselves. It is the unsaid that will become the material about racism. If racism is present there, it will arise, and it is up to the therapist to point it out when it comes up, helping the patient to talk about it, to name and understand that which is silent in racist society.

Although race is a biological fiction, racialization is real and in Brazil it takes place due to appearance [2,5]. Darker skin color means less chances there will be for social mobility and the more difficulties faced; as well as more associations to danger, exclusion, rejection and violence attributed to their character [24]. The Black phenotype will open or close doors, according to the perception to the discriminating perception, in considering Black physical traits, gestures, accent, the way they dress, culture and other elements.

In Brazil, according to Nogueira [25], relationships, although built by admiration and affection, are cut through by prejudice which was called by the author as a “brand” and that Gonzalez [26] called “disguised racism or denial”, as White subjects keep their alleged position of superiority and discrimination. The marked prejudice will determine a dismissal, in which Black people’s social class, as well as the tone of their skin might bring them more access, as a benefit or an exclusion, according to the situation and the gaze of others in endless judgment. The White gaze to the Black body involves the imaginary attributed to their color, as said by Franz F [27]: “For Black people there is a myth to be faced. A deeply rooted myth. Black people ignore it as their existence goes on among themselves, but at the first white gaze they feel the weight of their melanin” (pp: 125).

Faustino, et al. [28] define Whiteness as a result of colonialism, where the subject place is that of Whiteness, and Black people cannot also claim subjectivity. “Whiteness structures both the power dynamics, at their best and worst moments, but more than that, Whiteness structures the struggle spaces against those power relations” (p. 89). A comfortable place [1,23,29], from where one does not attribute to themselves that which they attribute to others. It proposes narcissistic pacts and the maintenance of material and symbolic privileges between White people, in their

reproduction of a certain order; to obtain and ensure gains [10,30-32].

Psychic Structures

The fact is that very little is spoken about the dint in the White personality as a former slaver; this is almost a taboo, a manifestation of the silence agreed on by Whiteness that remains there thanks to structural racism, which normalizes racist attitudes [33,34]. From this notion of dint, Partindo desta noção de deformação, Faustino, et al [28] emphasize.

The very idea of Whiteness, the very ideal of subject is a castrated idea of subject, is a subject that tosses away, tosses to Blackness the elements that are also theirs. Thus, when White subjects face a Black body, that body is threatening because in this colonial myth, Whiteness is reason and Blackness is a body (p. 81).

According to Nogueira, et al. [35], talking about color and the unconscious mind, the psychic structures are contaminated by what they receive from an unconscious state. Thus, they are assimilated and incorporated to the *modus vivendi* of each person, producing a process of identification where the subject internalizes, imitates and incorporates the “Other”, as a beloved or hated object, or a source for both feelings. For psychoanalysis, this phenomenon is called identifying the properties of the object. If to a racist society being Black recalls being inferior; internalizing Whiteness would come as an identification with the colonial aggressor and a social and psychic attempt of survival; a search for permanence in their existence, removing from Black subjects their Blackness, their racial identity and the rejection of their origins [33].

Du Bois [36] and Fanon [27], among others, show that this Whiteness introjection into the Black psyche reinforces Whiteness in structural racism and White psyche. Du Bois [36] points out that racism creates a cloudy consciousness, blocked by the veil of racism, which keeps them from seeing the world as it is. Thus, stigmas are created that keep the veil of racism in place, which puts Blackness in the place of “Other” as an incarnation of evil.

By killing Blackness in themselves, there is a neurosis established in the Black psyche. This can lead to self-loathing, which is one of the racist impacts on Black mental health, by the fact they struggle to accept themselves as Black, as the Black subject realizes and understands the extent to which their skin tone damages them socially. This is double conflict; Black subjects wish to be White and take on their Whiteness, and hate themselves for not having it, and not having what they do. The beloved object becomes Whiteness as an ego ideal and a desire for equal rights.

As for White subjects, through Whiteness, the opposite takes place: White subjects reject identification with Blackness, because they feel superior to them. Blackness is not the object of their identification, because, in being “The Other”, they are inferior, different, and threatening. Their target in the Black body is nothing but its darkest aspects, which it cannot deal with, that involve fear and the struggle to keep intact; a psychic phenomena [37].

According to Schucman [5], there is also, in relation to Whiteness, a psychic defense mechanism of “denial”, removing Blackness of its origin and putting it somewhere else, of “Whitening”, because the problem is not skin color, it is the fact that the color is associated with African and Black heritage and considered inferior.

Final Considerations

Listening to psychologists in this research was important, as well as being an unprecedented field. To look into White customers in relation to the Black psychologist pointed out to the reflective and critical gaze that Whiteness occupies in the transference relationship during the therapeutic environment. Racism is subtle and often denied because, on some level, it is clear what is shameful and distorted about it. Even the White customer of lower social incomes experiences social inequality, but does not experience racism and has privileges for being White.

Psychology must be open to recognition and expression of racism in its practices [38]. Taking care of the Black and White psyche in a compromised way as a science, observing the relationship between in a historically racialized way, contributes to a possible subsequent psychological violence, causing many emotional damages [12].

Clinical maintenance relates to the material brought up by the client, which in turn goes through mediations about the racial theme, but it also has to do with how both therapist and client lived those themes in their life stories generally. It is up to the therapist not to pathologize racism. Racism is not an illness; it is the psychic functioning of a person, situated in a certain social context and as part of a certain history. It would be more interesting to suggest that psychologists open their clinic to diversity, and not reproduce isolation, segregating their clinic work to just a certain group.

Although caring for the psychic state of a White body, political, economical and social factors are directly connected to the issue of classification and recognition of Black bodies in the social imaginary, in the issue of structural racism. Thus, what is to be Black and what is to be White in a country as racist as Brazil, that in spite of all evidence, keeps up the pretense of being a racial democracy?.

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