Black identity and workplace oppression

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This paper is primarily aimed at counselling and psychotherapy practitioners who meet issues of workplace conflict in their practice and the resulting stress and trauma faced by their clients. I define workplace conflict as complex and enduring situations arising from diverse forms of harassment. These include bullying, scapegoating and other discriminatory and oppressive practices that affect health, esteem and work performance. This paper reports the findings from my doctoral research project which investigated and sought to understand the specific experience and nature of workplace conflict for black workers in three institutional settings: the National Health Service (NHS), education and social services. The inspiration for this research came from psychotherapy practice, where it was repeatedly observed that black workers appeared to be suffering significantly more negative and damaging effects of workplace stress and trauma than white workers. I describe these experiences as workplace oppression and differentiate them from other workplace conflicts.

The participants in this study are 30 black workers. Black is used here to describe people with known African heritage and others who experience discrimination because of the colour of their skin or culture. These workers were drawn from the NHS, education and social services. The research process was undertaken by conducting semi-structured interviews with those who responded to my formal invitation to share their experiences in the workplace. The invitations were first discussed and approved by the organisations before they were circulated to the black staff population. My formal requests to interview within the NHS were not favourably met and so I used a more informal, word of mouth approach. Education and social services were largely (though cautiously) welcoming and interested in the study. Five men and 25 women came forward, their ages ranging from 28 to 59 with the majority in their late 30s to early 40s. Of the 30 respondents, 15 were managers and 15 were in non-managerial positions. Eighteen worked in educational services (psychology departments and college or university settings); six were from social services (children and families, mental health and training departments), and the remaining six were from the NHS (nurses, midwives, health visitors). About half the respondents working in education and social services settings had previously held jobs in the NHS as students and qualified nursing staff. The overwhelming majority of participants were black Caribbean, black African and black British born (in this order), three of whom were from mixed parentage backgrounds. There was also one Chinese man and two Asian women.

The interview questions were devised with the help of 10 colleagues who are counsellors and psychotherapists. As a group they were invited to discuss the research project and contribute to the process of creating a questionnaire with the minimum of bias, to help respondents tell their work stories. The interviews took place over six months. Each lasted an hour and was taped and transcribed to capture the respondents' own words. The responses were carefully scrutinised for emerging themes. As my theoretical perspectives are rooted in a psychodynamic tradition with an intercultural perspective, I was interested in the workings of black/white relations along with the dynamics operating in the workplace and within the individuals themselves.

I chose a qualitative research approach, using

What does this study explore?

■ The experience of being black in the workplace

■ The impact of this experience on the wellbeing of the worker

phenomenology, hermeneutics and heuristic principles. This combined approach mirrored the process of counselling and psychotherapy as the therapist embarks on an unknown journey with their client. Phenomenology boundaried me and reminded me to suspend my own assumptions about the enquiry and build up a comprehensive description of the 'thing itself' as it evolved (Hurssel, 1960). The hermeneutics paradigm provided a way of exploring *meaning* behind the description of the respondents' stories in order to gain deeper understanding of the emerging phenomenon (Gadamer, 1975). This understanding was always taking place in time, history and culture. As researcher/practitioner in this project, the heuristics element required that I be reflexive in using my own experiences of workplace oppression and yet be patient and objective while waiting for the 'thing', that is, the phenomenon, to unfold (Moustakas, 1990).

I found this an extremely difficult task with a subject so close to my own experiences and it aroused many feelings. The challenge was to immerse myself in the detailed stories told while suspending my own beliefs and opinions, so that new meanings were free to surface.

The findings reveal two main themes suggesting interplay between external and internal factors. External factors were represented by the white (usually male) management structures, and attitudes and actions of white peers. Internal factors related to the feelings, reactions and stances adopted by black workers. The relationship between external and internal factors and how these were handled seemed to influence and shape the worker's experience of stress and trauma in the workplace. Although this study is based on a relatively small sample and the results cannot be generalised, repeated themes in respondents' stories have suggested common areas in black people's experiences of difficulties in the workplace.

Table 1 shows the internal and external cycle of events in which black workers feel ground down and trapped.

The initial focus of the research was to examine black workers' experience of workplace conflict.

The scope of the study broadened to consider what these workers might bring to the situation that could influence the work conflict dynamics and the nature of their particular experience.

Initial findings – nature of workplace oppression

The general findings indicate that although workplace oppression for black people was not overtly about race and cultural differences, conflict was frequently initiated by subtle comments and behaviour that targeted aspects of the individual's race or cultural identity. Respondents' examples included:

■ failure to notice their presence

■ meeting silence when a supportive response would normally be expected

■ white colleagues refusing to make proper eye contact when it mattered

■ repeated instances of exclusion

■ the absence of pleasantries normally accorded to white colleagues

■ over-use of adjectives such as aggressive, scary, angry, frightening, threatening, problem, difficult, when referring to black people.

Respondents also reported cultural jokes and remarks that they found offensive. For example, a black female psychologist described her experience of being referred to as 'uncivilised' because she chose not to socialise and share pub lunches with her white colleagues. She found the remark offensive and hurtful. The findings show that over time this treatment contributes to longer periods of hurt, shame and demoralisation, often leaving workers traumatised. The unrelenting nature of these conflicts and the workers' resulting protective and defensive postures, eventually wore them down, leading to erratic or lengthy sickness absence.

Respondents' stories pointed to collusive management structures when dealing with workplace oppression, where both management and workers became stuck in their respective positions. My data highlights examples where these conflicts had turned into long and bitter battles with poor outcomes.

In some cases it also appeared that black workers experienced more severe disciplinary action than their white counterparts. Several respondents described receiving formal notices of disciplinary action to be taken against them unusually soon after a complaint was made about them. These workers were upset by the fact that little or no management effort was deemed necessary to investigate these complaints before instituting formal action.

A large percentage of respondents had suffered

'Workplace oppression was frequently initiated by subtle comments and behaviour that targeted the individual's race and cultural identity'

Table 1: External and internal cycle of events

External factors	Internal factors
Micro and macro aggression*	Stigmatic Stress * (SS) and anticipation/re-experiencing of shame and hurt
Persistence of the above	Protective postures adopted. Development of defensive stances and attitudes
Culture of SS becomes more established	Wounding to sense of self. Experience of possible trauma. Work beings to be negatively affected (slip-ups, mistakes)
Management reacts to worker's slips-ups	Experience of unfairness, harassment and victimisation
Formal warning from management	Ego justification as a defence to being devalued
Disciplinary procedures introduced	Preoccupation with the white Other and fear of emotional collapse
Entrenched punitive attitudes from management	Fight/flight into illness (usually manifested by erratic to long periods of sickness off work)
Impasse	Post-traumatic stress and possible depression
Defensive posturing against possible charges of racism. Chronic crisis	Choices made (1) employment tribunal (2) resignation to the status quo (3) move jobs

Microaggression – term coined by Russel (1998) to describe racial assaults by white people that are subtle, stunning, often automatic, non-verbal exchanges that are offensive to black people. The result is shame and hurt. *Macroaggressions* are similar to microaggressions but are directed at black people in general as well as the individual.

Stigmatic stress – this arises from being 'marked' (singled out for unfavourable and discriminatory treatment). The 'marked' person is pushed into a state of hyper-vigilance and over-sensitivity.

considerable negative effects to their emotional wellbeing and physical health as a result of this ongoing work situation. As well as obvious stress symptoms in the 30 interviewees – increased irritability, insomnia, poor concentration, fluctuations in weight, tearfulness, aches and pains – there were occurrences of late onset diabetes, hypertension, chronic fatigue syndrome and clinical depression.

Further analysis of the data revealed common factors within the three organisational cultures. These contributed to a 'grinding down process', a term frequently used by respondents. This experience also produced high levels of discontent and cynicism among black workers who were all professionally qualified and felt capable of performing their work effectively.

Respondent 4, a black qualified youth worker in a college setting, had a complaint issued against him followed by formal disciplinary proceedings. He said: 'I can't believe management is not interested in hearing the whole story... it just doesn't feel fair... the whole thing has left a really bad taste... I will always carry a healthy disrespect for white people because I can never trust them'.

These examples are a small indication of the pervasive experience for black workers. Respondents' stories indicate that workplace oppression may lead them to question aspects of their identity.

Respondent 25, a senior psychologist, summed it up when she said: 'Illusion plays a very important part in creating identity. It can be

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someone's truth... my truth. When that goes, one is left shattered, even depersonalised... this is how I have been left feeling as a result of what I have been through at work over the past five years'. This statement suggests that attacking a person's identity can destabilise their ontology (nature of their being).

Social services appeared to have marginally better procedures for dealing with work disputes and a more enlightened approach to diversity management. Those in the NHS seemed to suffer the most out of the three groups.

Subsequent findings – issues specific to black workers

In relationships people bring issues of their own to the dynamics of interpersonal engagement. The worker-management relationship is no exception. It is my belief that black people's issues could be the psychological wounds of black history carried within, which can be reopened by racial bullying, harassment, scapegoating or other oppression.

A large number of respondents seemed to manage their work difficulties in similar ways. They tended to wait to be given opportunities and openings and they wanted permission to be 'actional'. The recurrence of this theme in respondents' stories highlights real difficulties with issues relating to personal rights, entitlement and self actualisation.

Akbar (1996) comments:

'Our [black people's] progress is still impeded by many of the slave-based characteristics... The objective of the discussion is not to cry "victim" and seek to excuse those self-destructive characteristics created by slavery. In fact the objective is to identify the magnitude of the slavery trauma and to suggest the persistence of a post-slavery traumatic stress syndrome, which still affects the [black person's] personality. It is not a call to vindicate the cause of the condition, but to challenge Black people to recognise the symptoms of the condition and master it as we have mastered the original trauma.'

A post-slavery, post-colonial context whose baggage is passed from generation shapes black people's attachment patterns and relationships with the white Other.

Further findings from the interview data suggest the presence of the *internal oppressor*. A majority of respondents tended to view their negative and traumatic work experiences in terms of contemporary versions of an enslaved and colonial past.

In 18 of the 30 respondents there seemed to be a collective familiarity with constructs used

to describe their pain and their lot:
■ *I don't do deference where white people are concerned*
■ *you can never trust the white man's intentions*
■ *white people will never get accustomed to nor comfortable with a black person in a position of power*
■ *people will always see your colour first and personality second*
■ *no matter how hard you try to succeed, people will always want to beat you down*
■ *we always have to work twice – even three times – as hard to get to where we want or be on par with the white man*
■ *we don't seem able to come together and sustain anything good as black people*.

These examples (and many others), presented as life scripts and absolutes, seemed to determine respondents' personal drives, values, sense of relatedness, views of the world and relations with the white Other.

Many respondents referred to slavery and colonialism when describing their work difficulties:
■ *this is modern day slavery*
■ *white management still want to keep black workers in chains.*

The internal oppressor

Much has been written about black internalised oppression (Akbar, 1996; Freire, 1970; hooks, 1995; Lipsky, 1987; Lorde, 1984). It is defined as the process of absorbing the values and beliefs of the oppressor and coming to believe all or some of the stereotypes and misinformation. This process can lead to low self-esteem, self-hate, the disowning of one's group, and other complex defensive interpersonal behaviours that influence and affect quality of life.

Few writers (except Lorde, 1984) have dealt specifically with the concept of the oppressor within ourselves, the internal oppressor.

The internal oppressor (a noun), as distinct from internalised oppression (a process), is an aspect of the Self that carries historical and transgenerational baggage. It seems to have the power to influence black people's relationship and attachment dynamics with the white Other. In an external oppressive situation, real or perceived, the internal oppressor opens up old wounds.

An awareness of this aspect of the self, how it functions and how one relates to it when it is aroused, could be a key factor in a black individual's ontological security (transcending immediate situations in order to maintain

'Many respondents referred to slavery and colonialism when describing their work difficulties'

'The internal oppressor is an aspect of the Self that carries historical and transgenerational baggage'

> ### What does this study tell us?
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> ■ Workplace oppression contributes to invisible injuries in black workers
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> ■ Black people's voices are unheard at work
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> ■ The legacy of slavery and colonialism shapes black people's attachment patterns and relationships with white people
>
> ■ The internal oppressor is evident when external oppressive situations arise

centeredness) and assist in maintaining good psychological health.

Conclusion

The limitations of this study need to be acknowledged:
■ the study sample was small
■ there were small numbers of men and Asian respondents
■ it was not a comparative study, contrasting white workers' experience of workplace stress
■ the age of the majority of respondents (late 30s to early 40s) excludes other age groups.

Despite these limitations, this study suggests that black people's experiences lead them to feel that they are treated differently in relation to their white colleagues. The consequence is that black workers end up feeling their voices are unheard in workplaces where subtleties of race dynamics constantly operate. It is important that these voices are listened to. The task of making them heard will be the key to making black workers' rights a reality. In addition to legislation that helps create an atmosphere of equality and fairness at work, culturally competent counsellors and psychotherapists can play an important role.

A central theme in therapy is dealing with issues of identity, part of which should be our history and collective development across generations. This means that questions such as Who am I? Where do I come from? What influences have marked me? What have I developed for myself that is independent of the collective? are necessary and important when confronting the internal oppressor.

Therapeutic management of workplace oppression requires a deep understanding of trauma as experienced by black people and other minority groups. Practitioners need to acknowledge the impact of these invisible injuries on the black self. Such therapeutic support may be time-limited or long-term.

It requires practitioners to work through various phases of the trauma with the aim of assisting clients to restore a sense of self and consider ways of responding effectively to internal and external oppressions. The work is about healing, restoring and reframing the worker's relationship with their past in order to enable a more free and open life experience.

Practitioners will not only be challenged to work with the manifest nature of workplace oppression, they will also be confronted with the traumatic imprints of black people's political, historical and psychological experiences. The therapeutic task is to help black workers towards a goal of critical consciousness; that is, to help them discover ways of separating themselves from traumatic historical memories that may perpetuate tyranny in their daily lives. ■

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