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## STRUCTURAL RACISM CONSIDERED: THE WOMEN'S THERAPY CENTRE

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*Abstract.* Psychoanalytic training institutes are not exempt from being part of structural racism, that is, the ways society at large has been developed to uphold and maintain White supremacy using social, cultural, and political institutions. Ibrahim X. Kendi's tome, *Stamped from the Beginning: The Definitive History of Racist Ideas in America*, outlines how racist ideas have proliferated throughout the history of the United States to ensure structural inequality. Psychoanalytic training institutes are not exempt from being part of this structural racism. Such racism can be seen in a number of ways, including who originated and runs the institute, the location, tuition, supervision, and other ways in which exclusivity is systemic. I will examine these areas as they are reflected at The Women's Therapy Centre Institute in New York City.

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*Keywords:* institutional racism, psychoanalytic training, Whiteness, anti-racism, analytic exclusivity

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Structural racism speaks to the many ways society at large has developed, upheld, and maintained White supremacy using social, cultural, and political institutions. Ibrahim X. Kendi's thorough and deep book, *Stamped from the Beginning: The Definitive History of Racist Ideas in America* (2017), outlines how these racist ideas have proliferated throughout the history of the United States to ensure structural inequality. Race is a social construct that Whites invented to create a hierarchy of superiority (Coates, 2013). As James Baldwin asks in the 2016 documentary, *I Am Not Your Negro* (Grellety et al.), "Why did white people need a 'nigger'?" Baldwin points out that structural racism defends racial oppression and exploitation, keeping these social

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injustices in place, thereby maintaining the subjugation of non-White groups. Psychoanalytic institutes are not exempt from maintaining structural racism, which manifests in multiple ways, particularly in the elitism embedded in such institutes' power structures. These structures include allegiances to founders, choice of directors, the location and cost of training, and hierarchies within the institutes—such as who teaches, supervises, and is anointed to “train.” I will take up these issues by reflecting on my own institute, The Women's Therapy Centre Institute (WTCI).

The WTCI began in 1981 with a small group of—in my opinion, brilliant—White women coming out of second-wave feminism and the leftist, anti-war, and pro-democracy movements of the late sixties and seventies. The mission of the Institute at that time was to create a post-graduate training program with a critical feminist-psychoanalytic and social understanding of the individual. The WTCI was steeped in the British object relations tradition, but was dedicated to the inclusion of contemporary critiques regarding the impact of patriarchal gender relations on the psyche. Thus, one significant focus of the WTCI was to address what we considered to be one of the largest mass gender-based symptoms of our time: fat, food, and women's body image issues. The goal was to critically address and reckon with the etiology and pain of women's embodiment issues.

In 1978, Susie Orbach, one of our founders, published *Fat Is a Feminist Issue*, which became the framework for workshops and groups to teach women how to identify their own physiological hunger and satiation as the basis of tackling eating problems and body image insecurity. The WTCI took the position that the epidemic of eating problems was the result of the intersection between gender ideology—as embedded in the capitalist drive for profit inherent in the advertising, diet, beauty, and style corporations—and individual psychodynamic histories and the defense structures that thus get created. Further, our research into the depth and breadth of these issues made it clear that this epidemic crossed race and class lines.

By 1989, the WTCI instituted the first feminist psychoanalytic three-year training program to consider gender as well as cultural and societal issues in women's psychology and embodiment. Although diversity of the student body and faculty has been a goal since the

inception of the WTCI, reaching this goal has not been without its struggles and complications and remains an ongoing issue.

Institutional power at the WTCI is rooted in an older White cohort that, while not being hierarchical, over time became concentrated in a small original group that made it difficult for the voice of “the other” to find expression and to be truly included. I have struggled with this experience and also with the loyalty I feel to my Institute, my home where I have been raised. Yet, as part of our diversity committee, which has been in existence since 2003, I also have a critique. It has required courage to speak up about structural inequalities. Speaking up and out publicly and not simply within my institute has evolved over the years. Speaking up has meant confronting feelings of shame and anger, feelings that have been with me as I worked on this article.

As a person of color, bringing up racism feels exposing and somehow shameful to me. Given my strong relationships with people in the Institute, I worried that I might create shame in my colleagues and friends. By raising the issue of racism, would I be inflicting harm on these others, analogous to the experience of trauma survivors or witnesses to trauma, who sense that sharing their experiences trigger painful memories for listeners? Still, for me, there also was—and is—my anger, and it is this emotion that counteracted the shame underlying my concerns about bringing racism to the forefront. My anger functioned as a motivator because I knew the process needed to be engaged. Otherwise how would change come? And so I proceeded.

At the WTCI, structural racism is observed in the student make-up of the classes. The Institute didn’t advertise in the old days and gathered students by word of mouth. Not demographically dissimilar from the Institute’s founders, the first three groups to graduate were White, middle-class women, who were interested in feminist psychoanalysis, eating problems, and body image. I happened to be in therapy with one of these women, which is how I came to know about the training program. As a caseworker and then social worker with the New York City’s Administration for Children’s Services, I was within a professional context that guided me toward institutions treating children and families. If not for my own therapist, I would not have been exposed to the possibility of training at a psychoanalytic institute.

I learned quickly that it was not just the make-up of the student body that perpetuated structural racism. For example, the physical

location of the WTCI's program on the Upper Westside of Manhattan, New York City, also contributed to the lack of diversity. Issues of "location" are inseparable from access to housing and other racially-tinged concerns. White people were not, and are not, subject to redlining—being told that they didn't qualify for low cost mortgages to buy homes that create wealth—or, alternately, that there were no vacancies for an advertised apartment because of the color of their skin. Because of their skin color, Whites have traditionally secured jobs with unions or corporations, advantages that were not available to African Americans, Black immigrants, and other people of color.

The physical location of The WTCI also underscored another racial issue. The area (again, in an upper middleclass community of New York City) is also home to a number of the Institute's faculty. For them, this location is a privileged convenience. In contrast, just to get to class on time, I traveled over an hour from my job in Brooklyn and then endured a longer commute home when fewer trains were running. For one of my White classmates, it was a walk next door. Yet, another classmate of color felt intimidated to enter the Institute building where a doorman asked her to announce who she was and where she was going.

The WTCI, like all Institutes I know of, espouses a psychoanalytic treatment model that is inherently discriminating. Poor and working-class people can hardly imagine embarking on a course of mental health treatment that involves the luxury of time and money. What's more, undertaking psychoanalytic training itself involves time, money, and privilege. Tuition is difficult for less affluent students. In my case, I was forced to take loans against my civil servant pension to cover the cost of training, supervision, and twice weekly therapy. This is one reason that it took me another 15 years to leave my job and begin a full-time private practice. The expenses of setting up a full-time private practice are prohibitive to some people of color. There are the costs of health insurance and office space, and these can be especially onerous when one is slowly building the practice. I have heard older White colleagues say that it was easy for them in the 1970s and 1980s to begin a practice, a time when office rents were more affordable and insurance payments to providers more plentiful.

Private practice is, of course, not the only option for those who have undergone psychoanalytic training, although many institutes assume that is where candidates are going.

At my institute, my job was accepted and as I continued to work at Children's Services, I was able to use what I was learning in training with my teenage clients. Yet in this world of city government, my new psychoanalytic knowledge was not valued. Instead, the demands of the bureaucracy to use "evidence-based methods" (a term itself driven primarily by economic factors) became paperwork-driven and overwhelming. I faced a choice of trying to fight the bureaucracy or take the leap to work for myself and to build a full time private practice. I both fought the bureaucracy and tried to figure out how to make enough money on my own to cover costs like office rent, health insurance, mortgage payments, and travel. After fifteen years I succeeded and left my job for private practice.

Some students coming into training institutes already have enormous debt from college and graduate school such that adding institute tuition and supervision fees to that debt is a leap of faith. The WTCI keeps supervision costs as low as possible, and yet for a number of students, this is still taxing. Let's keep in mind that the Black-White wage gap has expanded with rising wage inequality from 1979 to the present. Black men make 22% less than comparable White men, Black women 34% less than comparable White women (Wilson & Rogers, 2016). Thus, the leap of faith regarding future earnings is also not equitable for Black and White candidates.

Other inequities arise for candidates who work at agencies or other organizations that have 9–5 (or similar) working hours. These candidates may often need evening supervisory hours because such agencies rarely allow time off for education as they did 30 years ago. Supervision on the job is also rare. This is a conundrum because evening hours are the most lucrative for supervisors if they are working as psychotherapists in private practice. For a Black, Latinx, or Asian student who needs an agency job, even requesting time off can be an issue. I was lucky to have a supervisor at work who allowed me to leave during the work day to go to supervision. Not everyone is so fortunate.

There are also instances when racism is an issue in the supervisory relationship itself. If the White supervisor working with a student of color is not attuned to racial imbalances and their effect on the inherent hierarchies in supervision, the student may experience feelings of not being understood, interpersonal dissonance, and alienation.

In encouraging diversity and inclusion, my institute encountered multiple issues around disparity in resources. For example, one student of color, a mother of a young child, didn't have childcare for a few weeks. Attending classes with her child was her only option during this time. The Institute tried to accommodate her for a number of classes but when the material was on sex and sexuality, this was no longer tenable. This could have been a problem for a White mother as well, but in the 30 years of the training institute, the White mothers have had resources to attend classes without their children, even those on scholarship. Not only could this situation suggest discrimination toward single mothers, but it also touches on disparities among institute candidates in terms of resources. How do we address this? A person with some disposable income could have hired a babysitter for those times. This woman, just getting by financially from week to week, could not.

Another issue that arose at The WTCI—and maybe at other institutes as well—is in the theory as it is taught. For example: Who is considered family? The WTCI teaches object relations theory as one of its main tenets. An African American candidate challenged D. W. Winnicott's model of one mother raising a child. She had experienced and witnessed children being raised by more than one mother figure. Others, especially people of color, might relate to her objection since in non-White culture, children may be raised by a grandmother, an aunt, and neighbors, as well as, or instead of, their mothers. The WTCI faculty had to challenge White ideas and theories in order to broaden their scope to include other cultures and ways of being that are not White in origin. This included reading literature that included this broader cultural experience.

In fact, the historical psychoanalytic literature itself can be problematic: The readings assigned for my institute's classes were most often written by White people. Until quite recently, these writers did not even identify as having a race and therefore considered their perspective the "norm." I wondered: Why doesn't the assigned literature include more Black authors? Is it a matter of access? Is it because Blacks aren't "tracked" as academic? Or academic enough to be taken seriously? bell hooks, in *Transgressing to Teach* (1994), observes that often ideas aren't embraced unless a White person says them. It is interesting to me that *White Fragility* (2018), a book written by Robin

Di Angelo, a White woman, has become so popular when Blacks have complained about racism and the difficulty whites have in confronting it long before now. Considered from a structural point of view, the racism is seen in “who” gets noticed: They are White and vaulted into a position for recognition.<sup>1</sup>

The WTCI has come to recognize the imbalance in the racial make-up of our members. In 2004, the directors of the training program made a major push to diversify and include more students of color. They reached out to agencies, partnered with an organization steeped in racial issues, and offered scholarships to encourage Black and Latinx applicants. That next class included four Black and eight White women. The racial tensions in that class led the faculty to begin adjusting what and how they taught. The graduates of that class, like all previous classes, were invited to join the wider association. Unfortunately, the majority White membership was not up to the change; they lacked the understanding of what was needed to keep the women of color connected. Thus, none of the Black women remained involved in the institute after graduation.

What went wrong? What could have helped us retain the Black graduates and continue to attract other people of color? Perhaps the Black women did not want the task of educating White women about race or dealing with micro-aggressions aimed at them. On the part of the White majority association, was it too difficult for them to come out of their comfort zone and genuinely interact with people different than themselves? Could there have been a consistent effort to reach out via email or phone to keep these women engaged and involved in the WTCI association? Or did the majority think that the Black graduates should adapt to them?

I came across an idea that caught my attention in a paper by the group therapist Christine Schmidt, entitled *Decentering Whiteness by Group* (2018). Her thesis—the necessity of decentering Whiteness—proposes that White people need to take responsibility for their part in

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<sup>1</sup>This reminds me of the historical shameful role that psychiatry played in maintaining and justifying slavery. In 1851, Dr. Samuel Cartwright, in *The New Orleans Medical and Surgical Review*, coined the ‘diagnosis’ “drapetomania” to describe a “disease of the mind” (p. 707) in which runaway slaves had an irresistible urge to run away from their owners. Cartwright wrote: “...awe and reverence must be extracted from them” (Negro slaves), or they will despise their master, become rude and ungovernable and run away (p. 708).” See this document for a particularly egregious piece of this country’s racist history.

racism and racialized events. This would alleviate the burden of Black people doing the emotional heavy lifting for White people. According to Schmidt, “It’s a psychological reflex of Whiteness to sidestep accountability” (p. 317). She cites South African scholar Samantha Vice, who posits that the advantages that accrue to Whiteness are normalized and seen as universal. Whiteness and its privilege becomes the standard, and the fact that this privilege is often unearned and unshared becomes invisible.

Christine Schmidt (2018, p. 317) synthesizes a number of authors who address the privileges of Whiteness:

Perhaps they [these privileges] are not entirely invisible, but unacknowledged. These unearned advantages of Whiteness include: being oblivious to how oppression impacts other people’s lives; not feeling responsible for the racial oppression other people suffer, believing oneself morally neutral; not needing to confront racism; asserting freedom to choose where one lives, shops, dines, and travels; enjoying a sense of safety in one’s home, community, and country; feeling like an insider; enjoying freedom to publicly criticize the government and institutions without repercussion; feeling protected by the police; feeling assured of getting legal and medical help when needed; enjoying aesthetically affirming images of oneself on mainstream media; not feeling marginalized because of one’s racial identity; not thinking about one’s culture; and enjoying a sense that life at the center is good and preferable to life on the margins (Altman, 2006; DiCaprio, 2017; Hitchcock & Flint, 2015; McIntosh, 1988).

To bring my thoughts back to my Institute, we have included more faculty of color, and I can tell you that every faculty member at the WTCI, whatever race, has consciously begun to change the way they present concepts and ideas, as well as how they choose the readings. I emphasize consciously because decentering Whiteness has to be deliberate and performed at many levels.

For example, the first class of the training program now begins with an exercise on social location that orients the students and faculty members teaching that class. Changes are beginning to occur. One White faculty member said (personal communication, 2019):

I think I used to consider race in terms of categories worth noting, something to be considered and added onto my lessons, and now I’m

thinking of race in all its dimensions as integral and intersectional with cumulative aspects of identity, privilege or oppression, and embodiment, as *the subject* or the starting place, in a sense. Owning a perspective, a vantage point, and responsibly recruiting people to speak first-hand about their experiences of being, for instance, Black and transgender, is critical, rather than speaking for and speculating about the other.

In conclusion, The WTCI needs to continue to work on dismantling structural racism. My hope is that we will become an anti-racist organization that is inclusive of everyone, whether our differences are based on race, gender, or size, to name a few. That will mean questioning each choice administrators make about who is admitted and why, who is part of the governing body of the Institute, whether they are inclusive of Black and Brown people, and deliberately trying to attract faculty of color as well as a diverse array of students. We must continue bringing awareness to the growing group of alumnae in our efforts to decenter Whiteness, as well as in the Institute's other offerings to the world of therapists and the larger public of which we all are members. I will continue to grapple with my feelings of shame and anger at having to keep issues of race at the forefront because this is an ongoing battle.

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