

INTRODUCTION

'Real intellectuals have the obligation to seek and tell the truth about things that are important, things that matter.' – Noam Chomsky

The goal of this project is not to speak truth to power, in the literal sense of these words, for such an effort would be self-indulgent (Chomsky, 2004). Further, as Chomsky points out, such an exercise would be a waste of time and a pointless pursuit, because for the most part those in power know these truths. They may pretend and claim to be unaware of these truths, however; that does not change the fact that they do know. After all, to be in power in this society one has to support and accept unquestioningly the interests of the dominant segment of society (Chomsky, 2004). And, if one does not support and advocate the interests of the people who have wealth and power, one is simply weeded out of the system or marginalised, to paraphrase Chomsky.

So, the ultimate goal of this project is to communicate with people who are interested in social change the experiences of students at the UCT Child Guidance Clinic in the context of race. I particularly examine how race shapes students' perceptions and experiences of their training at the Clinic (Harlow, 2003). This project does not pretend to claim that race is the most important factor in evaluating the experiences of students at the Clinic, nor does this project argue that the experiences of students presented here constitute the final word on the subject. The aim of this project is to contribute to the ongoing debate about the relevance of psychology in South Africa.

BACKGROUND TO THE STUDY

The relevance debate

Macleod (2004) and many South African psychologists have often pointed out, in what is commonly referred to as the 'relevance debate', that during the apartheid era, psychology was accused of being irrelevant. Others (Anonymous, 1986), have argued that since its establishment, psychology in South Africa has predominantly served the needs of a privileged minority - that is white people. Seedat (1998) adds that because South African psychology is an extension of the colonial project, it has neglected the black psychosocial experience.

According to Dawes (1986) the notion of a relevant and sincere psychology in South African was construed by some as the need for psychologists to provide critiques of the dehumanising and alienating consequences of apartheid, in the various ways that these manifested themselves. De la Rey and Ipser (2004) argue that the debate stemmed from a crisis in confidence regarding the applicability of Eurocentric psychological knowledge and practice to the social and political problems in South Africa.

However, according to De la Rey and Ipser, from 1994 onwards the call for relevance manifested itself in two strands of response: "firstly, an attempt to change the demographic profile of psychologists and secondly, a conscious responsiveness to post-apartheid policy imperatives and issues (2004, p. 545)."

An issue facing psychologists in post-apartheid South Africa is that institutions such as the UCT Child Guidance Clinic are expected to select and train psychologists who are able to meet the challenging needs and demands of our communities and society (Mayekiso, Strydom, Jithoo & Katz, 2004). Another issue facing training institutions is that in terms of demographic profile, very little has changed in the mental health profession in South Africa. Mayekiso et al., argue that in 2000, 90% of the registered psychologists were white and 80% of the interns and psychometrics were white. Put in another way, it can be argued that psychology in South Africa is still an exclusive preserve of mostly rich and privileged white men and women, to paraphrase De la Rey and Ipser.

Quoting Rock and Hamber, Mayekiso et al. (2004) write that the credibility of the psychological profession depends on it being able to offer services to a broad spectrum of people in different cultural situations. Mayekiso et al. argue that it becomes an urgent issue for the profession of psychology to make available personnel who sufficiently represent the linguistic and cultural diversity of the people of South Africa. It is for this reasons that the Psychological Society of South Africa (PsySSA) and the Professional Board for Psychology have been actively encouraging training institutions to review their selection criteria and procedures in order to broaden access for students from previously disadvantaged backgrounds (Mayekiso et al., 2004).

Also, according to Mayekiso et al., the mission of educational access in South Africa, as set out in the National Plan for Higher Education, is to broaden access in order to

produce graduates with the skills and competencies necessary to meet the human resources needs of the country. It is for this very reason that the Professional Board for Psychology resolved that by 2004, there should have been at least a 50/50 (black/white) admission to graduate programmes, and that by 2010 there should be a marked increase in the admission of black students (Mayekiso et al., 2004).

South Africa is a country with a population of about 47 million people, and the country has eleven official languages, the predominant languages being IsiZulu and IsiXhosa, which compositely are the home languages of 40.8% of the country's people (Ahmed & Pillay, 2004). So when the majority of psychologists in the country are predominantly white and cannot speak either IsiXhosa or IsiZulu, this means that the majority of people in the country do not have access to psychological help, and those who do are likely to receive this help from someone who does not speak their language, according to Ahmed and Pillay. This is because psychologists consult in the language of their own preference, rather than that of their patients, or avoid consultations with patients whose first language is neither English nor Afrikaans (Ahmed & Pillay, 2004).

University of Cape Town (UCT)

Steyn and Van Zyl (2001) argue that, for as long as UCT continues to make sense of its own role in apartheid by employing the story of its opposition to human rights violations as the dominant narrative, it faces the danger of diminishing the sense of urgency needed for genuine self-reflection, which is necessary to spur further transformation. According to Steyn and Van Zyl, for UCT to become the culturally diverse, African university it aspires to be, the historical centre must be examined, appropriately reconfigured and new values based on diversity must be affirmed.

As things stand, that process of transformation at UCT is happening at a very slow pace. For example in 2002, African students accounted for only 9% of the total student population at UCT, falling far short of the proposed benchmark of 44% (Alexander, 2006). The situation is not improving. According to Alexander, UCT's Institutional Planning Department (IPD) reports that the proportion of black students (African, Coloured and Indian) combined reached a total of 27% of all students enrolled at UCT during 2005, whereas white students constituted 41% of the total student population during the same period. "Notably, the proportion of international

students enrolled during 2005 was higher than the proportions of black African, Coloured and Indian student minorities respectively (Alexander, 2006, p. 2)."

UCT Psychology Department and the Child Guidance Clinic

It can be argued that psychology at UCT is still an exclusive preserve of mostly rich and privileged white women and men, to paraphrase De la Rey and Ipsier. For example, between 2000 and 2006, 30 white students graduated with a Masters Degree in Psychology at UCT, whereas a mere ten black students graduated with the same qualifications during the same period, according to the IPD¹.

This is consistent with national figures. Skinner (2005) argues that in 2002, South Africa saw 194 African women students graduating with an honours degree in psychology compared to 599 white students. And, in the same period, 45 African women students graduated with a Masters Degree in Psychology compared to 227 white students. Skinner adds that recent statistics provided by the Health Professions Council of South Africa, show that whites comprise just over 82% of psychologists currently registered in South Africa, while blacks comprise fewer than 18%. Skinner points out that white women dominate the field of psychology in terms of numbers.

According to the IPD, between 2000 and 2006, of 55 students who graduated with a Masters Degree in Psychology at UCT, 41 of them were women students. Out of the 41 women students, there were 23 white students, six African students, eight coloured students, three Indian students and one unknown². To keep this state of affairs intact certain discourses are employed. "A key trope around which resistant discourses of transformation are clustered, is 'educational standards' (Steyn & Van Zyl, 2001, p. 21)."

Steyn and Van Zyl argue that these discourses are there to channel and maintain traditional relations of power; furthermore, they construct and organise definitions of transformation and prescribe its norms. According to Steyn and Van Zyl, the meaning

¹ See Appendix A for a detailed breakdown of the students who registered for a Masters Degree in psychology during that period and who successfully completed their studies.

² See Appendix B for a detailed breakdown of the students according to their gender.

of terms such as 'educational standards' is normally construed as immutable, even though such a concept stems from a Eurocentric discourse, and in many cases are there to preserve a Eurocentric tradition of an institution. In what follows, I explore how some of these discourses are employed by the Child Guidance Clinic to construct and organise definitions of transformation.

Child Guidance Clinic (CGC)

The party line

The role of educational training institutions is not only to teach students about psychology or whatever other subject, but also to inculcate students with values, beliefs, ways of seeing and codes of behaviour that will integrate them into the institutional structures of the larger society (Chomsky, 2004). Other writers refer to this process as a 'rite of passage'. Kottler and Swartz (2004) argue that the entry into professional psychology is a rite of passage, for it impacts upon the definitions of self, causing emotional and cognitive turbulence. Further, from this process conflicts arise between a continuous sense of selfhood, a position in a social order in terms of class and race, and the demands and prohibitions of a profession that has rigorous rules about how relationships should be conducted. Amien (2001) adds that entering the training process presents many challenges for the trainee; for example, trainee students have to deal with the anxiety inherent in entering a new situation, and also struggle with developing their professional identities.

From the foregoing, it is fair to infer that, overall, these institutions exist not to produce independent thinkers, but in the main, to socialise students to understand the need to support the power structure in society and not to question the code of the discipline (Herman & Chomsky, 2002). This is further achieved by rewarding enquiry that improves the identity, aims and interests of mainstream psychology, while punishing enquiry that challenges this goal (Leifer, 1969).

However, according to Kottler and Swartz, the training, particularly in the first year, is a rite of passage of the kind that accompanies every change of place, state and social position. They add that in an initiation process, initiates are reintegrated into society as 'adults' with a new role and social identity. However, this only happens

after a 'well-marked and protracted phase'. Only once they are in a 'relative stable state once more' are the initiates reintegrated into society, argue Kottler and Swartz.

What new role and new social identity do these initiates assume once they have gone through the rite of passage? In reality, these initiates come back as personnel managers, as 'scientific experts' and simultaneously, they police human behaviour (Leifer, 1969). As Kottler and Swartz point out, the initiates can only assume this role and identity once the indoctrination process has been completed and the students have internalised the goals and the code of the discipline.

Chomsky (2004) explains that educational institutions require people who are willing to adjust to the institution's power structure and people who accept the code of their discipline without too much questions. He adds that people who do not accept these requirements and internalize them are likely to be weeded out of the system along the way.

According to Kottler and Swartz, the training to become a psychologist is characterised by three stages. The first stage is when a student immerses oneself in course material that is 'esoteric'. The second stage is when an initiate is in a state between being a student and a professional. The final stage involves the reintegration of the student back into society as a fully-fledged professional.

What is perhaps fascinating in the Kottler and Swartz description of the CGC training process is their use of the word 'esoteric'. Gibson, Sandenbergh and Swartz (2001) describe the process as a source of anxiety because students have to come to grips with what "is often a new body of knowledge for them (p. 31)."

The impression being created here is clear - only a certain kind of highly evolved human species, equipped with special training, will be capable of engaging with this 'new body of knowledge'(Chomsky,1979).Chomsky explains that establishment intelligentsia like to pretend to be engaged in an esoteric enterprise, which is supposedly inaccessible to simple people. According to Chomsky, this is 'nonsense', for the social sciences are generally accessible to anyone who is interested in them. He argues that the description of social sciences as esoteric, complex and obscure is part of the illusion propagated by the system of ideological control, which aims to make issues seem remote from the general population and to persuade the public of its

incapacity to understand the social world in which they live without the tutelage of intermediaries.

Perhaps what is rather interesting regarding the UCT training programme is the fact that much of what happens to 'initiates' after the early rituals around separation have occurred, is considered secret and is not therefore documented, according to Kottler and Swartz. Hence, much of the experiences of UCT students have remained undocumented, write Kottler and Swartz.

Also interesting is the fact that almost all the studies that have explored the clinical training offered at the CGC either trivialise the issue of race or refer to it in passing in their findings. For example, Abrahams (1992) writes that he found the 'colour problem' appeared to be the main problem at Wits, UCT and UKZN. Mokutu (1998) argues that students of colour often experience 'some racism' at historically white universities. Gibson, Sandenbergh and Swartz (2001) argue that white students bring with them to the training a set of fantasy fears related to entering the township areas, which apartheid presented as being off limits to them. They add that, black students, on the other hand, do not experience this particular set of fantasies, but still have to deal with the universal fears of the 'unknown' when entering areas unfamiliar to them.

Amien (2001) argues that the wounds that black students inherited from a racist society will be difficult to heal in the programme if there is a perception that racial issues are not addressed wholeheartedly. Kottler and Swartz (2004) write that some clinical trainees often report feelings of profound alienation as a result of 'difference'. "We are referring, for example, to feeling like a 'token black' in a predominantly white class, with an all-white staff complement, at a historically white university... (Kottler & Swartz, 2004, p. 61)."

It is against such a background that my study assesses and analyses students' experiences and their perception of the training in the context of race at the UCT Child Guidance Clinic.

METHOD

Participants

From June through August 2007, I conducted semi-structured interviews³ with 15 Clinical Psychology students who trained as psychologists at the Child Guidance Clinic. The students that I interviewed had trained at the Clinic between 2000 and 2006, and so some of them had already qualified as psychologists, some were busy with their M2 year (second year of their Masters) and some were either finishing their compulsory training or working on their theses. Each semi-structured interview consisted of ten questions, and lasted, on average, 50 minutes. The participants were interviewed at different locations; nine of the interviews were conducted at restaurants or coffee shops around Cape Town, one interview was done at UCT and three interviews were conducted at students' workplaces. Two interviews were conducted through an email exchange.

So, thirteen interviews were tape-recorded and later transcribed. Written consent⁴ to participate in this project and to be quoted in this study was obtained from all the participants. I interviewed six white participants (three females and three males), five African participants (three females and two males), three coloured participants (all women) and one Indian woman.

One white student was initially uncomfortable with the nature of the study. She felt that the study's goal was to attack other psychologists which she felt was unethical. I then explained to her she did not have to talk to me nor did she have to share

³ See Appendix C for the type of questions asked. Question 1 to 6 are taken from an article entitled 'Qualitative Methods: Use of Focus Groups to Study Racial/Ethnic Experiences on Campus' which appeared on RadPsyNet <http://www.radpsynet.org/teaching/osborne.html> A permission to use them for this study was granted by the author, Professor Guy Larry Osborne (Interim Director of Bonner Scholars, Professor of Psychology and Director of the Environment & Community Stewardship Project Carson-Newman College). The rest of the questions were inspired by the book 'Psychology Beyond Western Perspective' by Kwame Owusu-Bempah and Dennis Howitt. The book is published by the British Psychological Society (2000).

⁴ For a sample of a consent form, see Appendix D.

confidential issues with me were she to participate in the study. She then agreed to participate in the study.

To assure confidentiality, the students' identities are not revealed in this study. Also, to assure anonymity, I refer to students numerically. The numbers are assigned to students arbitrarily, ranging from 1 to 15.

The participants' ages ranged from 23 to 50 years of age. Of the students I interviewed for this project, only the five African students could speak any indigenous African language. Only one student out of the 15 interviewed was kicked out of the course for 'academic reasons'. The students who participated in this study are those who were available and willing to be part of the study. I received their names and contact details from the CGC.

Procedure

I first asked the students to say something about the benefits of being trained as a clinical psychologist at UCT. Questions related to their racial experience were not asked until mid-way through the interview. I asked the students to talk about their personal experiences in the context of race. I asked the students if they felt that their experiences had anything to do with their skin colour. I asked the students to comment on the multicultural climate of the Child Guidance Clinic. I ended the interview by asking whether students felt that the training at the Clinic fully equipped them to deal with clients from different multicultural backgrounds, or if they felt that the training that they had received at the Clinic was relevant to the South African environment. I also asked what changes students would like to see at the Clinic. The interviews were conducted in a conversational style, and the fact that nine interviews were done at restaurants and coffee shops facilitated and advanced this technique. No student was given or promised any form of reward for participating in this study.

Analytic approach

Analytically, the approach to this project is based on critical theory. According to Kincheloe and McLaren (1998), critical theory is a belief that language is central to the formation of subjectivity. It is a belief that that certain groups in society, for

example white South Africans, are privileged over others and, although the reasons for this privileging may stem from our historical past, the oppression or marginalisation that characterizes contemporary South Africa is reproduced by making the subordinates accept their social status as natural, necessary, or inevitable. Mainstream psychology institutions such as the CGC are generally, although most often unwittingly, implicated in the reproduction of oppressive systems of class and race oppression, to paraphrase Kincheloe and McLaren.

So, this study utilises critical theory to unpack how the UCT Child Guidance Clinic is implicated in the reproduction of systems of class and race oppression. Kincheloe and McLaren argue that a criticalist as a researcher, or theorist, is someone who attempts to use his or her work as a form of social criticism; who accepts certain basic assumptions that all thought is fundamentally mediated by power relations that are social and historically constituted; "that facts can never be isolated from the domain of values or removed from some form of ideological inscription... (p. 263)."

Using critical theory as its point of departure, the analysis of the data and the interpretation of the findings is done from a black perspective. This is because critical theory, including other qualitative methods, does not adequately address the experiences of black people; furthermore, some of these methods have little or no understanding of white supremacy as a racial politic (hooks, 2000). Consequently, as hooks and West (1991) point out, some of the experience of black people in academy and in other areas of life remains relatively unexplored, "and will remain so until Black intellectuals articulate a new 'regime of truth' ... (p. 144)."

This study also uses Noam Chomsky to unpack the role of educational institutions and the elite in society. As my project deals with the experiences of students at an educational institution, Chomsky's views become indispensable.

Quotes from the participants

First and foremost, this study is concerned with how race shapes students' perceptions and experiences of their training at the UCT Child Guidance Clinic. This includes students' actual day-to-day experiences at the Clinic to how students view the curriculum. Thus, the quotes that I chose for this study are quotes that speak to the project's goals.

The participants were asked other questions that have nothing to do with their racial experience; however, this particular study is only concerned with the students' racial experiences. So, the quotes that are used in this study are quotes that yield a particular level of insight into students' racial experiences at the Clinic. What seems important to me is the discovery of insights that are crucial for determining the underlying values and attitudes that shape the students' experiences at the Clinic in the context of race (Chomsky, 1979).

ANALYSIS AND DISCUSSION

Selection process

The Child Guidance Clinic uses an ideological⁵ filter to recruit students who exhibit 'right-thinking' into its programme, and that ideology is psychodynamic theory. In their study of how journalists serve the interests of the elite, Herman and Chomsky (2002) argue that individuals who exhibit 'right thinking' are people who know how to fit in, how to conform and, generally, it is individuals who do not show much independent thinking. Chomsky (1997) adds that institutions that do not appreciate independent thinking are normally geared to rewarding conformity and obedience; if you do not show these qualities, you either have 'behavioural problems' or a 'troublemaker', and therefore weeded out along the way.

Some of the students I interviewed expressed similar views. For example, one student explained that "...at times it felt like if one chose another theory it was not condoned, it felt like you would be punished if you chose something else. That was a bit disturbing." And another students echoed this sentiment: "the programme tends to be somewhat rigid. While we are told we can have our own psychological theory that we prefer, we are actually chastised when we use it." A student who did not have reservations with this process referred to it as being groomed to become a competent psychologist. And another student explained the entire by process by using an analogy.

⁵ I refer to psychodynamic theory as an ideology not a paradigm. This is because when Thomas Kuhn discussed paradigms, "he had in mind major scientific revolutions. ...the Galilean revolution or Einstein or something of that sort (Chomsky, 1983)."

“ It feels like you are in a fish-bowl the whole time. Like everything you do, everything you say even if it's not in a formal context, everything feels like it's being assessed for your performance as a trainee psychologist. You feel like you are being watched all the time.”

One of the black participants said of his experience:

“I felt extremely lost and the material felt alien. I felt that my actions, my deeds and my thoughts were not my own but were those of the course or what I was being fed. I felt I wanted to protest and say give me a chance to think this through, I'm not really sure I agree with this concept or that concept. Despite there being room to do that, we were in an academic setting and had to move along from certain experiences following the calendar year, leaving little time to sufficiently reflect on experiences.”

In a letter to students who had written to the Clinic enquiring about the UCT training programme, the director of the Clinic, Nokuthula Shabalala, explained the thinking behind the ideology that underpins the UCT programme. According to Shabalala, the UCT programme aims to give broad basic training in the field of psychology with an emphasis on a psychodynamic understanding of individuals, children and their families.

Thus, students who are normally accepted into the programme are students who reflect this kind of thinking in the way they talk about themselves at the interviews, and generally, it is students who are not likely going to question the validity of this ideology. For example, if a student is asked why he or she is interested in psychology, he or she must be able to reply to this question from a psychodynamic approach.

Herman and Chomsky (2002) explain that the operation of an ideological filter in choosing the 'right-thinking' people to be accepted in institutions that serve the elite occurs so naturally that selection panels, frequently operating with complete integrity and goodwill, are able to convince themselves that they choose the right candidates all the time on the basis of merit.

The psychodynamic ideology is a very Eurocentric way of viewing and explaining human behaviour, and it tends to highlight intra-psychic factors at the expense of environmental factors as the primary cause of behaviour and psychological problems (Young, 2000). According to this ideology, even functioning, competent people could be 'neurotic', to echo Light (1980). Basically and most importantly, the psychodynamic approach provides psychology with upper-class patients who have enough money to self-indulge in this kind of analysis (Light, 1980). Simply put, in the South African context, this means white people in most cases.

Another question that the interview panel asks students is if a student has been in therapy. Hence, one can safely assume that one of the criteria that the selection panel looks at when they are making their decision is whether the candidate has ever been in therapy. Otherwise, why would such a question arise in an interview if it had no bearing on the evaluation process?

The ideological filter plus institutionalised racism ensures that most students who get selected for the programme are white. Institutionalised racism occurs when institutions embody and reflect existing expectations of dominant community members, such as the racist expectations that whites are more competent than blacks or whites are better in touch with their feelings than blacks or generally that whites are superior to blacks (Albert, 2006). And the fact that, for example, Condoleezza Rice is the first African-American woman to serve as the Secretary of State in the U.S. does not change the fact that institutionalised racism exists in the U.S. After all, as I have been arguing in this essay, institutions attract in their ranks people who are going to serve its agenda without resistance. And those people who are likely to cause 'trouble' once in the institutions are filtered out along the way.

So, to paraphrase Mayekiso et al., one of the biggest challenges facing psychology training programmes in South African universities relates to the clause in the Promotion of Equality and Prevention of Unfair Discrimination Act, which states that unfair discrimination also refers to the use of rules or practices that appear to be legitimate but which are actually aimed at maintaining exclusive control by other groups. Mayekiso et al., add that this statement means that all the long-held assumptions and practices that form the basis of the institutions selection procedures have to be examined in order to ensure that what might appear to be legitimate

assessment practices and selection criteria are not methods of maintaining an old system of rules which intentionally or unintentionally excludes potential candidates.

To change this state of affairs, a selection process that is based on the principles of equity, access and redress needs to be implemented, to paraphrase Mayekiso et al. That is the only way psychology will change from being a white profession to being a profession for everyone in this country.

Racial differences in students' experiences and perceptions

White students:

White guilt

One of the topics that white students kept referring to was white guilt. For example, Student 1 explained that she grapples with white guilt a lot and that she does not know what to do about it. Another student also mentioned that an issue he grappled with was his white guilt. Student 2 explained that:

"... White guilt has been a massive struggle for me. ... At times I felt like I was filling a space that should be occupied by a black person. That was part of my experience. It was all the white guilt that I felt, and feeling very irritated about myself for feeling that way."

It is important to note these students were satisfied with the mere experience of feeling white guilt. They had no plan to stop benefiting from white privilege. In fact they did not indicate that they were planning to live their lives for the next five or ten years making sure that they were not beneficiaries of white privilege. One can safely assume that, at the cost of experiencing the "feeling" of white guilt, these students will continue benefiting from white privilege. After all nothing concrete compels them to stop. Or would that be asking for too much?

Indigenous languages

Student 2 agreed that his inability to converse in any indigenous African languages limited who he can work with in South Africa. However, he made it clear that he did not feel that was a 'good enough reason' for him not to practise psychology in South

Africa. He felt that he could still be of use to some people through the use of translators. Student 2 further argued that, a psychologist "...is what I wanted to be for a very long time and so I am not going to abandon my dream now because I can not speak an indigenous African language."

Student 3 explained that the majority of lecturers at the Clinic are white and cannot speak any indigenous African languages themselves. In addition, "and none of us got Xhosa patients, and if we did get Xhosa patients they had to speak English."

Student 4's perspective on the issue is not fundamentally different.

"I did a six month Xhosa course before going into the programme. They state categorically in the clinical application form that being able to speak an African indigenous language is of critical importance. However, when choosing people they take that into consideration along with many other factors. So what tends to happen is that the people who get chosen into the programme are not fluent. There are rare exceptions and I think they try to find at least one person who is fluent in an indigenous language."

What this reveals is that white privilege leads these white students to believe that even though they cannot speak any indigenous languages they are more suitable to be accepted in the programme than black candidates who can speak indigenous languages. Steyn and Van Zyl (2001) point out that those in privileged positions tend to perceive their relative success to be the consequences of their "inherent worth, rather than the 'leg-up' which a well-tuned institutional culture provides them (p. 67)."

Psychodynamic theory

Student 1 felt that one of the 'disillusioning things' about the programme is the fact that it places special emphasis on psychodynamic theory.

"I feel that the programme has not fully prepared me for what I had to deal with at public hospitals and community health clinics. The Eurocentric theories do not capture the human experience in all levels."

However, other students felt that being trained in psychodynamic theory was important for their work, although they agreed that the theory has some limitations. For example, Student 3 explained that:

I'm very glad I was trained in psychodynamic theory, however, one must realise the limits of this paradigm. For example, one cannot work in a psychodynamic way with criminals, it damages them! Be that as it may, psychodynamic theory is useful if one is working in private practice. But if you are working at public hospitals or community health clinics, it is not relevant at all. Psychodynamic theory is very deep and for a client to benefit from it, one must work with a client for a very long time. And at public hospital and community health clinic one does not have that time; in fact, one quickly realises that at such places what is urgently required is crisis management."

Student 5 explained the historical tradition of the psychodynamic theory.

"Psychology is definitely a Western construct; it's based within Western philosophy. So, I wouldn't say the curriculum orientation is necessarily multicultural. It's hard to say in terms of application. I mean, the staff at the Clinic are quite certain on making psychology relevant within the South African context. They emphasise the value of working in primary health care clinics as opposed to being in private practise. They also encourage people to utilise psychological interventions that can be used in short-term work with clients as opposed to psychological interventions that require long-term work with clients. However, even those short-term interventions are mainly still of Western origin. So, it is difficult to think of the curriculum orientation as multicultural."

Steyn and Van Zyl (2001) explain that this kind of thinking is influenced by the belief that 'tradition' has entrenched values which are immutable. These values are accepted unquestioningly and are reproduced with the force of 'normality' or 'appropriateness' or even 'morality'. "Making space for 'others' is seen as requiring additional, exceptional actions, which can be contained in this peripheral relationship to the centre, while the centre itself remains intact (Steyn & Van Zyl, 2001, p. 32)."

Multicultural climate

I asked Student 3 to talk about the racial dynamics in the programme. He pointed out that in his group there were no racial problems or conflicts. However, he did feel sorry for one African student in his class who, as he put it, was clearly "out of his depth". I then asked Student 3 to predict the kinds of feelings I would experience as an African person if I were to be accepted into the programme. His reply was:

"I think as a black person you will feel frustrated in the programme, because you will feel as if you are being trained to become a white therapist. You will come out of the programme feeling that you are now a good white therapist."

Other students reveal how proficiency in English became a focal point for racism and a powerful gate-keeper to maintain the status quo (Steyn & Van Zyl, 2001). For example, Student 1 pointed out that:

"It feels like the staff approached white students differently than they approached students of colour. It did not feel like the staff was always on everybody's side, and I'm not sure if that was about race. ...Because white students in my class spoke English as their first language, they were expected to perform better than students of colour. For example, if I as a white person asked a question in class I felt that it was better received than if a student of colour had asked the question. I must point out, however, that not all the lecturers had this attitude. "

Student 4 agreed with this view:

"I think my experience in the programme differed as a white person as compared to experiences of people of colour. There is an assumption towards African students that they will struggle academically, and they won't be as competent as white students. A similar attitude is exhibited towards coloured students, but it is not as strongly as it is when it comes to African students. In contrast, white students, irrespective of their class background, are automatically viewed as competent."

What surprised most of the white students is the fact that there were more white students in the programme than black students. Student 1 pointed out that she "...had thought that because of affirmative action it would be hard to get into the programme as a white person."

Racism without racists

Student 5 pointed out that race is a complicated matter.

"Regarding the treatment of students of colour in the programme, it is difficult to say that their treatment was a result of the nature of the programme or if they brought their own baggage into the programme. If you bring your own stuff into the programme, it almost gets magnified in the programme, so it seems. For example, there was this one black student in our class who felt that she was almost betraying something by being at UCT. I think it [the programme] was a white dominated space, and I think that was a huge issue for her. I think students of colour felt marginalised because of that. However, it is difficult to say that it was actually happening. Racism can be so insidious, and it is difficult to say if it is there or not or if it is just one's perception. ...When I say the space was white dominated I mean in terms of numbers. And I am not sure if there was an intentional design to be dominant."

Student 6 had a different experience to all the other white students when it came to racial matters in the programme. She explained that in her group, they loved each other as human beings, race was not in the forefront, and it was a secondary issue. Further, she did not think of herself as a white student nor did she view someone next to her as a coloured or black student. "I simply saw it as a class. And as a class our focus was on the work and our ability as therapists, it was not on the colour of your skin." She adds that as a group they were a very close class and they leaned on each other.

What I found interesting about Student 6 is that when I asked her to reflect on the fact that UCT is a white institution and if that in any way shaped her experience as a student; she replied: "In my training, most of my lecturers were white, it's a white

university in a way and so I felt at home. But then again I feel at home in whatever company I am in."

What emerges here is that Student 6 has a deep emotional investment in the myth of 'sameness', although that is sometimes betrayed by her true feelings that reflect the primacy of whiteness as a sign informing who she is and how she sees the world (hooks, 1992).

Student 6 further argued that:

"UCT can sometimes shove it down your throat that you exist in a multicultural environment. It becomes forced, and they tried to make that an issue in our class. That made me feel like I was in a legacy that did not belong to me. UCT has a legacy of white liberal guilt. I and my class felt that that legacy did not belong in our class. So, sometimes they would bring out issues of race because perhaps they felt we needed to be talking about these issues, but as a group we did not feel that such issues needed to be discussed. We were open with one another and were able to talk about whatever issues that came up to one another."

Student 6 gave an example to illustrate her point:

"For example, the clinic organised a class on race that we did not feel was necessary. And the class was to be given by this damaged woman [a lecturer of colour], who brought her own pain and issues into the discussion. Although we felt that the class was unnecessary, we approached it with an open mind. We decided that if the class was about how we are as therapists and how we need to look at this as therapists, then we are open to it. We reasoned that maybe we do need to look at what it means to be a white therapist with a black client, or a coloured/black therapist with a white patient. However, that did not happen. Instead the class became about this woman's agenda, it became about healing her own pain and her coming to terms with psychology in South Africa. It had no bearing with who we were as therapists. We all found it a rehash and a waste of time. It felt like UCT was once again doing a politically correct thing by organising a workshop on race."

It is the way in which such unacceptable ideas about black people "linger in psychology without serious challenge that supports the view that psychology, as a discipline, is racist to the core (Owusu-Bempah & Howitt, 2000, p. 96)." According to Owusu-Bempah and Howitt, psychologists and institutions hold on to the idea of 'damaged blacks' and 'black self-hatred', not because it enables them to understand black people or their needs better, but rather to control or marginalise them.

African students

Psychodynamic theory

Four out of five African students felt that psychodynamic theory was almost impossible to work with. For example, Student 7 explained that:

"...Psychodynamic theory is difficult to apply in areas I wanted to work in, such as in community health clinics and public hospitals. Psychodynamic theory can be very individualistic; it's about the person, it's about the infant and it's about the intra-psychic person. And when you are based at a community health clinic or in public hospital, one does not have the luxury of exploring those things. In most cases, to intervene in the community needs a systemic kind of perspective."

Student 8 expressed similar views.

"I felt that the course material did not represent anything about me as an African person. ... I felt that the course required a dramatic shift in my identity as an African. This shift, which was experienced on a personal level, placed me in an awkward and extremely uncomfortable position as I could not bring anything of my own culture to this new position. I felt extremely lost and the material felt alien. I felt that my actions, my deeds and my thoughts were not my own but were those of the course or what I was being fed.

"I felt I wanted to protest and say give me a chance to think this through, I'm not really sure I agree with this concept or that concept. Despite there being room to do that, we were in an academic setting and had to move along from certain

experiences following the calendar year, leaving little time to sufficiently reflect on experiences."

Student 9 simply found the psychodynamic theory problematic. He argued that the UCT programme ought to be tailored within the Afrocentric psychological challenges. He pointed out that his white colleagues were "...very much at peace with the individualised psychodynamic formulations of psychological problems. Personally, this view was problematic."

Student 10 also struggled with the psychodynamic theory. She says it was too Eurocentric, "I remember I used to sit in seminars and think 'that's for them [whites], it does not apply to me'." In addition, she felt that psychodynamic theory is not easy to work with in South Africa, especially if one is based at public hospitals and at community health clinics.

It is clear from this that African students pay a price for being trained at CGC. For African students to succeed in the programme, they have to forget African reality. They are instead compelled to assimilate the Eurocentric perspective - the only worthwhile and meaningful way of interpreting reality, so it seems (hooks, 2000).

Multicultural climate

Regarding the multicultural climate, Student 7 pointed out that the programme woke her up to South African politics which she thought she was not part of.

"A lot of racial dynamics manifested themselves that made one feel like an outsider. It's very difficult to be in the programme and be the only black person in the programme. ...There is so much anxiety and there is so much stress... There are a whole lot of weaknesses projected onto the perceived weak person in class. And I do not know why, but throughout the history of the clinic it has always been the black person who ends up being this dumping ground for the projections of weakness. A black person is perceived to be the proper dumping ground, because already as a black person, English is not your first language...."

bell hooks (1990) explains that institutions or training programmes that passively absorb white supremacist thinking, and therefore devalue or trivialise our lived

experiences, are not likely to operate in ways that challenge racist domination or promote a breakdown in traditional ways of seeing and thinking about reality.

Student 7 felt that white students are not sincere when they claim to be experiencing white guilt. She explained that:

"These were people who were coming from a certain background; they had no real vested interest into going to places that would make them feel uncomfortable. And to the best of their knowledge, they were going to serve right back in the kinds of privileged communities they were coming from. That's what they had in mind."

Regarding her experiences as an African woman at the Clinic, Student 10 felt that her group got on very well and that there were no racial tensions.

"However, being the only African in the group made me feel lonely at times. I mean as much as my group was supportive and understanding, there was no one who I felt came from a similar background as me who I could compare notes with."

Student 11 also felt that her group got on very well. "We learnt from one another. And it was the first time for me to study with whites, but because there were three other students of colour I felt safe and secure."

Coloured students and an Indian student

Multicultural climate

Student 12 had ambivalent feelings about her experiences as a coloured woman in the programme.

"At some level, my experience was traumatic. This is due to the fact that I brought my own issues to the programme, and one's issues are placed under a magnifying glass. It's an intense programme, it's a small class, it's a small building, and therefore nothing escapes the staff."

Every time one hears students of colour dismissing the existence of racism by saying 'I brought my own issues in the programme', it is important to remember that these are

students who are trained in a Eurocentric theory that devalues black experience. Not only that, the students of colour chosen for this kind of a training programme, which is based on white middle-class values and a psychodynamic world, are expected to demonstrate a willingness to accept the institution's values and biases (Light, 1980).

That is why Student 13 can argue that: "I do not think I was marginalised at all. Rather, I think I brought my own issues as a black person into the programme, such as being black and not being confident enough in a white space."

According to Student 13:

"There is an attempt to understand you psychodynamically as a black person; they try to give you a voice... But one finds that one always gets interpreted as being angry. I think for many people it must be a struggle to actually understand what it means to be black. I just don't think there is a big enough attempt to give black people a space."

bell hooks (1992) explains that it is quite possible for white progressives to want to work and learn with people of colour without divesting of white supremacist thinking about blackness (hooks, 1992). According to hooks, "goodwill can coexist with racist thinking and white supremacist attitudes (p. 16)."

As to why white students seem to get along with white lecturers without friction in the programme, Student 13 explained that:

"If people come from a similar background, you expect them to get along better. So, in the programme one finds that it is easier for white lecturers and white students to click, but I do not think the intention is to marginalise black students. And it becomes difficult for black students to express their feelings regarding these interactions between white lecturers and white students, for one does not want to come across as being petty."

According to hooks (1992), shared 'whiteness' allow white people to bond with one another with ease.

Staying under the radar

Student 12 pointed out that her experience as a student of colour in the programme is still quite a sensitive topic for her. Furthermore, she said that she knew what she needed to do to get through the programme.

"I knew what to do to stay under the radar and not get noticed. ...Being coloured in South Africa, people tend to look at you as if you are not truly black. People look at me and think 'I'm not black, I'm coloured'. It feels like it is better to say one is coloured, as opposed to being black. As a result my identity gets erased by other people because of how it makes them feel. However, I'm used to my identity being erased. So, what if I'm a student of colour in a white space, I will just pretend as if I'm white, because that's what people pretend that I am.... And that's how I stay under the radar. It felt like if I did not see myself as coloured and if other people did not see me as coloured, then we do not have to talk about race. Maybe that's what happened in my case."

She says she saw two colleagues who chose a different route to hers getting shot down. "It was unfair. Yet nobody in our class, including me, intervened or said anything in their defence. Even the people who got shot down did not confront the group about this."

According to Student 14, psychodynamic theory compels students to self-censor or to stay under the radar.

"It's such a paranoid existence to be in this course. This is because you are trained to look at things in a certain way and you know your lecturers also look at things in a certain way as well; and so you become quite paranoid regarding what issues you raise and how those issues will reflect on you. This was a big thing for a number of people in my group."

Student 15 was the only person who had a different experience in this group.

"In the year that I was in we got on like a house on fire. I think we all came in having done other things in our lives and more mature, and so the programme became a very supportive environment. It was about learning from one another. Our group was very close and we are still very close. There were no major fights; rather we were there to help one another. Also, lecturers were concerned about how we, students of colour, were experiencing the programme in my year."

Psychodynamic theory

Student 12 pointed out that to use psychodynamic theory, one would have to set up a private practice in Bishopscourt.

"However I do believe that I benefited from the training. One does not necessarily need to use psychodynamic therapy in the room with a client, one can always think psychodynamically. So I'm glad I was trained in psychodynamic theory."

However, she made it clear that she does not think that the UCT M1 prepares one for psychology in the real South Africa.

"UCT nurtures a certain kind of psychologists. And I think that psychologist is a kind of psychologist that has private practice, a psychologist that does long-term psychodynamic work with affluent clients."

Student 13 expressed a similar opinion regarding the psychodynamic theory. "For me, I think there needs to be a focus on family therapy, because I think individual therapy is a luxury in this country, it is for the people who are well-resourced." She explained, however, that the psychodynamic theory is essential if one wants to be a competent psychologist. She added that her only issue is that "the programme tends to be somewhat rigid. While we are told we can have our own psychological theory that we prefer, we actually get chastised when we use it."

Gibson, Sandenbergh and Swartz (2001) partly explain why the CGC puts special emphasis on psychodynamic theory even though the theory's relevance to South Africa is debatable. "...More conventional clinical psychologists may feel that their

identity as professionals allied to the medical sciences may be threatened by the less orthodox approaches sometimes adopted by community psychologists (p. 32)."

It must be pointed out, however, that to create the impression that clinical psychology is somehow similar to medical science is simply to distort reality. Unlike medical sciences, the best explanation that clinical psychology can offer regarding psychological problems is educated speculation. Beyond that, anyone's guess will do.

Chomsky (1983) explains that irrational attitudes often prevail within human sciences, especially in psychology. He argues that this is "one reason why so much of psychology never gets anywhere"; psychology refuses to accept the canons of rationality that have been standard in the natural sciences for centuries. Chomsky (1977) adds that the prevailing misconception that psychology is scientific is due to the erroneous idea that by keeping close to observation of data and manipulating it is somehow scientific. He believes that this is a caricature and distortion of science.

Asked if he has ever been psychoanalysed, Chomsky (2003) explained that he does not think psychoanalysis has any scientific basis. "If we can't explain why a cockroach decides to turn left, how can we explain why a human being decides to do something? (Chomsky, 2003, www.chomsky.info)."

CONCLUSION

The constant theme emerging from the interviews with all the students is the battle with psychodynamic theory. The majority of the students admitted that it is almost impossible to use the theory at public hospitals and at community health clinics. Consequently, some use psychodynamic theory to 'understand' clients at public hospitals, but use other theories to intervene and to actually help clients. Be that as it may, almost all of them are happy that they were trained in psychodynamic theory.

The question arises: if psychodynamic theory cannot be applied usefully in areas where psychological services are needed the most, what is the point of continuing to train psychologists in this theory? To answer this question, one must bear in mind that psychodynamic theory provides clinical psychology with upper class clients, a privileged clientele that can pay for services rendered (Light, 1980). Furthermore, as Light points out, it is difficult for a profession to attain high status with lowly clients.

Another function that the psychodynamic theory serves is to preserve the Eurocentric character of the institution, for the theory is not rooted in any kind of discussion about blackness, apart from pathologising it in most cases (hooks & West, 1991). It is there to channel and maintain relations of power, to paraphrase Steyn and Van Zyl (2001).

It should be noted that the students that I interviewed did not see how the psychodynamic ideology is used in the programme to depoliticise them and to compel them to self-censor, simultaneously. Because of the nature of the psychodynamic theory, students are compelled to foreground intra-psychic factors at the expense of the socio-political factors. That on its own depoliticises any kind of analysis that might be used as a form of intervention.

Also, according to the psychodynamic understanding, the nature of the interactions in the programme, the perception and management of relationships during the training and emotions aroused by the learning process are influenced by the unconscious and the primary relationship of infancy (Amien, 2001). It is this kind of speculation that compels students to self-censor. As one student pointed out, to be in the programme is a paranoid existence, for one is careful what issues one raises and how those issues will reflect on you.

These findings agree with Abrahams' study (1992), that on the whole, the training foregrounds Eurocentric way of thinking and behaviour, while it devalues and trivialises the lived experience of people of colour. This study also agrees with Mokutu's research findings (1998) that black students at historically white universities still experience racism.

Thus, this study challenges the argument of Gibson, Sandenbergh & Swartz (2001) that the training at the CGC deliberately prioritises issues of social change and that students accepted into the programme are accepted partly on the basis of their expressed commitment to change in South African psychology. The findings of this study show that the majority of students who get accepted into the programme come from privileged backgrounds, cannot speak any indigenous languages, and are white and female.

It is for the same reason that this study questions the findings of Amien's study (2001) that over the past decade, UCT has made significant changes with respect to

representation in the training and among trainees to redress the apartheid past and provide adequate services for the country. The data provided in this study reveals that UCT has not made any significant changes with respect to representation in the training. Twenty-three out of 41 women students who graduated with a Masters Degree in psychology at UCT between 2000 and 2006 were white, and only six African women students graduated with the same qualifications in the same period. Most importantly, the few African women who trained as clinical psychologists find their training in psychodynamic theory frustrating and not very useful in settings where the majority of clients are poor people of colour.

Kottler and Swartz (2004) argue that the training programme is a 'rite of passage' that is undertaken by students who normally have been high academic achievers. This study questions this claim. The findings of this study suggest that there is a difference between rewarding good grades and rewarding independent thinking, to paraphrase hooks (1991). Therefore, this study argues that the CGC programme is geared to rewarding conformity and obedience; if you do not show these qualities, you either have 'behavioural problems' or a 'troublemaker', and are therefore weeded out of the programme.

Lastly, this study argues that the psychodynamic theory that the CGC champions allows it to dismiss students' complaints, while, simultaneously enabling the Clinic to blame the victim for being a victim of the situation. Consequently, students of colour, for example, feel that if they perceive racism, it must be their own fault and therefore seek private therapy to 'work out their issues'.

What one wants to highlight here is that psychodynamic theory enables the Clinic to ignore any impetus for the Clinic to work out its own institutional issues. Instead the Clinic determines what the issues are and how and where those issues are dealt with. Those who do not agree with this party line, so to speak, are simply weeded out of the programme.

An ideology that blinds an institution to the contemporary socio-political problems in this country raises serious questions regarding its effectiveness and relevance to our environment and our history. An ideology that compels a training institution to forever look inward, almost to the point where looking outward is not permitted,

raises serious doubts regarding its relevance to our present environment and its history of racism and inequality (Albert, 2006).

Limitations of the study

This study is mainly concerned with the experiences of students of colour and the obstacles that they have to overcome in the CGC training programme in the context of race. Consequently, the focus of the research was mainly on how race influences students' perception of their training. It is hoped that further research that aims to explore different aspects of the programme, will be stimulated by this study.

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Appendix A:

Information obtained from the UCT's Institutional Planning Department

Humanities Students Registered to Pursue a Masters Degree in Psychology

Registration year	African	Coloured	Indian	White	Other/Unknown	Grand Total	Female	Male
2000	9	5		15	3	32	24	8
2001	9	5	1	13		28	22	6
2002	9	4	2	15		30	23	7
2003	6	4	3	14		27	22	5
2004	7	5	2	12		26	21	5
2005	5	5	2	9	2	23	16	7
2006	4	5	1	10		20	14	6
Grand Total	49	33	11	88	5	186	142	44

Humanities Students Graduating with a Masters Degree in Psychology

Registration year	African	Coloured	Indian	White	Other/Unknown	Grand Total	Female	Male
2000	1	1		7	2	11	7	4
2001	1	2		3		6	6	
2002	4	2		5		11	7	4
2003		1	2	6		9	7	2
2004	3	1		7		11	8	3
2005		1	2			3	3	
2006	1	1		2		4	3	1
Grand Total	10	9	4	30	2	55	41	14

Appendix B:

Information obtained from the UCT's Institutional Planning Department

Humanities Students Registered to Pursue a Masters Degree in Psychology

Registration year	African		Coloured		Indian		White		Other		Grand Total
	F	M	F	M	F	M	F	M	F	M	
2000	6	3	4	1			12	3	2	1	32
2001	7	2	4	1		1	11	2			28
2002	7	2	3	1	1	1	12	3			30
2003	6		4		2	1	10	4			27
2004	6	1	5		2		8	4			26
2005	3	2	4	1	2		5	4	2		23
2006	3	1	4	1	1		6	4			20
Grand Total	38	11	28	5	8	3	64	24	4	1	186

Humanities Students Graduating with a Masters Degree in Psychology

Registration Year	African		Coloured		Indian		White		Other		Grand Total
	F	M	F	M	F	M	F	M	F	M	
2000		1	1				5	2	1	1	11
2001	1		2				3				6
2002	2	2	1	1			4	1			11
2003			1		1	1	5	1			9
2004	3		1				4	3			11
2005			1		2						3
2006		1	1				2				4
Grand Total	6	4	8	1	3	1	23	7	1	1	55

Appendix C:

Questionnaire

1. What is the best thing about the UCT clinical psychology programme?
2. How would you describe the multicultural climate in the programme?
3. If you could say one thing to students of your own race about what they could do to improve the multicultural climate on the programme, what would it be?
4. What is one thing you as an individual could do to make things better?
5. What has been your personal experience on the programme in the context of race, as either a white or black person?
6. Would you say the experience of students of colour on the programme is basically the same or different than the experience of white students?

7. Describe your ideas of an African culture?

8. What do you think the impacts of apartheid were on the psychological well-being of black people in this country?

9. Do you speak any African languages?

10. Do you feel that the programme is designed in a way as to fully equip students to deal with clients of different cultural background, particularly black people?

Appendix D

CONSENT FORM

Name of the researcher: Mandisi Majavu

Purpose of the research: Honours Degree research project

.....

Participant's Name:

Date:

1. I voluntarily participated in this study?

2. I agreed that I could be quoted on condition that my identity would not be revealed?

3. The study was explained to me that it is about the experiences of students who trained as Clinical Psychologists at University of Cape Town?