Circumstance of birth: Life on the color line
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Elizabeth was only fifteen at the time. I didn't know that. She looked younger. She was dark skinned, made darker by the dark sunglasses she wore. She was shockingly alone and vulnerable, awash in a sea of terrifying, taunting and dangerous hostility. Contorted white faces contrasted with her dark skin and her dignified manner of walking.

I was seven at the time. I, a white child, witnessed the scene from where I lived, in the white suburbs of Washington, D.C. I watched it portrayed on the evening news. I read about it in the newspapers, and I looked at the pictures in Life magazine. Life magazine photos were haunting journalistic masterpieces. I was bearing witness to attempts to end segregation. In this case, nine high-school students--famously tagged, the “Little Rock Nine”--attempted to enter high school in Little Rock, Arkansas. Those of us who were alive at the time will likely never forget the scenes from that first week. It was one of the first times that civil rights struggles were being covered live by the white press. The black press had been covering these struggles for many years, at times at the risk of injury and death (Roberts & Klibanoff, 2007). Television, in its infancy, brought us all closer to Elizabeth Eckford, now sitting on a bus bench, a dignified young teen surrounded by white hatred.

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It can be said that I came of age during the Vietnam War. And I cannot deny that my anti-war activism influenced my personal and professional sensibilities. After all, the confluence of the upheavals of anti-Communism, the civil rights struggle, assassinations of our heroes, war, and feminism, has shaped so many of us, “of a certain age.” For one example, the politics of that war, and dismissive reactions to feminism, have left me alienated from and mistrustful of “received wisdom.”

In fact, given that I was 18 in 1968, I have been known to say, “I am of the Vietnam generation.” This is a sentence spoken innocently. And yet, who speaks this sentence? In my experience, identifying as a “member of the Vietnam generation” is most common among white and middle-class people, usually college-educated, usually those opposed to the war. When someone uses that phrase, I feel a sense of familiarity, comfort, comradeship.

Among people I know, I have rarely heard a Vietnam-era veteran using this phrase. And more to the point of this paper, I rarely hear a black person identifying as being “of the Vietnam generation.” And that is my point. The phrase is used as if it captures “the generation,” with the un-seeing, universalizing hubris of white middle-class privilege.

This is an effect of what feminist researcher Ruth Frankenberg (1993) calls, “central social location.” The concept, “social location,” refers to one's position in terms of access to power and resources in any given context. Social location generates a world-view--ideas about how cultures and societies work, what is real and meaningful (and what is to be dismissed as irrelevant or wrong-headed), and the interrelation of various truth claims. The truth claims of those who are centrally socially located are often treated as prima facie valid, whereas those of others more often need to be argued or justified. Because their world-views are not subjected to questioning, those who are centrally socially located are least aware of their position--and therefore are least aware of their context-dependent cultural norms.

While we have all lived through wildly dramatic and disruptive socio-political, historical events, it is the more subtle, enduring underlying structure of my world that has shaped how I make sense of our shared events. Since the social and historical events that have had the most profound affect on shaping my interests, my passions, and my sensibilities, are those of the civil

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1 This is a very “American” story. A story about the United States. For that I apologize to readers throughout the world, and only hope that some of what I write yields useful reflections on parallel circumstances in your home countries.
And I was primed for this sensibility by the circumstances of my birth. So much of my experiential world has been shaped by having been born and raised as white, amongst the educated middle and upper-middle class, and by a decision my parents made.

My father, upon returning from the Korean War, was stationed to Walter Reed Army Medical Center, in Washington, D.C. My parents bought a home in the Maryland suburbs. Not in Virginia— that state was too racist (at that time, Virginia resisted desegregation by setting up all white private schools throughout the state). But not in Washington, D.C., either, where the public schools were underfunded (to a large extent, the consequence of a racist congress that oversaw the politically disenfranchised, largely impoverished, black majority city). Many whites in “the district” sent their children to private schools. My parents were strongly committed to public school education. At the time, the best public school system was in the predominantly white Montgomery County, Md.

Their “freedom” to choose where they lived was a privilege that served me well. It also captures my life in white privilege. I care ardently about racism, and I live (both comfortably and uncomfortably) the privilege that racism grants me. Thus, the most profound socio-historical influence on my sensibilities as an analyst derives from having grown up in an area with a color-line, and in a white suburb.

For me, the civil rights struggle was intertwined with the sequestration of my suburban childhood. The suburban 50’s was all about absence. Of “other.” Of visible trouble and trauma. Our white suburban living: sanitized, safe, ordered, neat, was an exemplar of what South African born, Australian analyst Gil Straker (2011), often refers to as the position of “bystanders/beneficiaries.” Amiri Baraka once wrote that “the paradox of the Negro experience in America is that it is a separate experience, but inseparable from the fabric of American life (2009).” Parallel to Baraka’s assertion, the separateness of white experience in America leaves us knowing little of the inseparability of our lives from the cultural contributions, labor, sacrifice and marginalization of blacks. To understand how growing up in a white suburb, in an area with a color line, in mid-century has influenced my analytic sensibilities, I must first speak of how it has influenced me more generally. I am heartened to join a growing contingent of contemporary American therapists and analysts who are unpacking the implications of whiteness and/or unacknowledged and unearned privilege; such white analysts as Altman (2000; 2006), and Cushman (2000), and black analysts, such as Gump (2000; 2010), and Leary (1997; 2000, 2007; 2012), who have explored racialized subjectivity in great depth. I can’t hope to provide the in-depth explorations that they have done, but I can at least contribute by telling my story.

This is no east task! In my first article on this difficult, fraught subject, I wrote:

2 Although Baraka (then known as LeRoi Jones) was writing about the arts and literature, I think about all of the black construction workers we witnessed building the houses in our new neighborhoods, and of the fact that although I grew up next door to the White House, I only learned in my adulthood that it was built using slave labor.

3 A wonderful exploration of suburbanization and the social construction of whiteness can be found in anthropologist Karen Brodkin (1998), How Jews Became White Folks: And What That Says About Race in America. A parallel story that is under-represented in socio-historical studies but is intimately related to the social construction of whiteness, is the story of the massive internal migration of blacks from the south in the years 1917-1975. One moving, well-told version can be found in The Warmth of Other Suns (2010), by journalist Isabelle Wilkerson.
Every time I have sat down to write this piece, the reasoned passages that I have mentally crafted disappear, to be replaced by passionate polemic at the keyboard. I am uncomfortable writing the chapter, I am anxious, I feel exposed, I dread being judged. And yet I want to contribute, in some small way, to healing the wounds of racism. I am writing a plea for my fellow white therapists to be cognizant of the effect of our dominant status on how we think, act and feel in everyday life and in the consulting room.

I feel almost embarrassed by the depth of my passion about racism and prejudice in American culture, most especially about subtle, often unrecognized forms of white racism, institutional racism and racial insensitivity. It puts me in a curious position; Throughout my life, I have been asked to account for why I am so impassioned. There are some uniquely personal, as opposed to sociological, threads of my life history that incline me to feel a close identification with disenfranchised people. And yet, being asked to explore where my interest comes from seems to me to be a way of participating in the very racial insensitivity I am attempting to overcome. For the question supposes that I am a bit unusual, and should account for my difference (how often I have heard African-Americans complain of having to “explain” their “difference” to well-intentioned but ignorant whites!). The more intriguing question for me is why so few whites are even aware of, and distressed by, the extremity of the racial divide in the US. How is it that an interest in one of the most “cancerous problems” (Shipler, 1998) of American culture is viewed as unusual and in need of explanation when a white person expresses interest, and yet it is viewed as self-evident—if a bit overwrought, from the perspective of many whites—when expressed by a person of color? The fact that the question hovers in the air at all is, I believe, one of the manifestations of how isolated whites are from a problem in which they are dominant participants. (2005, pp. 226-227)

Perhaps my questioners assume I must have some parallel tragic marginalization in my own life. And certainly, as a girl growing up in the ‘50’s I ran into a glass wall more than once. When I do endeavor to understand the personal roots of my passion—despite my objection to the question—I do not find that my threads of identification with those who are marginalized is nearly as compelling to me as my privileged life on the color line, coupled with the ethical foundation that comprised our daily family life. My parents both worked jobs that were human-service oriented. Alongside my father’s pediatric career, my mother was trained as a nurse. My mother’s sister was a teacher, their mother a teacher at a junior college. It really never occurred to me to work at a job that did not involve care towards others. Frankly, it also never occurred to me that other white families would be so indifferent regarding their privilege. I was greatly surprised when I discovered so, once I began to move into my wider social surround. I assumed initially that all American residents, influenced throughout our school years by the daily recitation, “with liberty and justice for all,” would care deeply about equality and inclusion.

Additionally, my mother in particular had an empathic orientation towards others. She would often wonder aloud, while we watched or discussed the news of the day: “what must it feel like for Elizabeth Eckford (or whomever), to be in that situation?” She also informed me—as the oldest girl—that a family was like a spider web. Everything I did would reverberate throughout the system, and I had a responsibility to take that into account since my younger siblings would be affected by my actions. We were all held accountable. We abided by a family rule that I came to call, the “last banana rule.” This rule held that if you wished to eat the last of anything, you must first ask if others wished to share it with you (so, not worth the trouble, many a “last banana” simply went bad). There was a strong emphasis on taking other people’s feelings and desires into account, on being sensitive to others in the family and outside the family. Fairness, inclusion, consideration for others, and an empathic orientation were all values that infused our daily lives.
A related bit of family history is that my grandmother’s strongest friendships were with a group of gay men who were part of an amateur theater group she joined. When my father was sent to the Korean War immediately after my birth, we moved in with my grandmother. These men were the first men to hold and cuddle me, and we formed strong affectionate bonds that lasted the length of my grandmother’s life. The fact that they were gay was a non-issue in my family. I remember, as a young child, being puzzled and angry when I heard anti-gay slurs, given that these men had given me such a healthy, loving start in life.4

Social equality, and in particular, racial equality was often a subject of dinner table conversation. It seems only logical to me, given my family environment, that I would be passionate about racial equality (and in fact, my entire sibling cohort is still emotionally invested in various aspects of social equality). It is a small step from personal empathy to a passion for social equality.

While I believe my passion about social equality and racial justice flows from my family ethic and the color line, the particular form my activism takes—trying to combat white indifference—is shaped by some family dynamics. But that is not the same as saying my interest in racial equality per se is consequent to family dynamics.

In my family, there was a “sanitized” version of who we were as a family, and it differed greatly from my direct experience of serious, messy family disturbance. And much like blacks at the time, I could not find a voice for, or others who would listen to, my perspective and my pain. Rather than ministering directly to marginalized others, or even fighting alongside them, my interest is in catching the attention of people in positions of privilege who are indifferent to its implications.

To this day, among my friends who grew up alongside me, we often have discussions about how life on the color line lives with us today. It does not seem unusual to me at all that we speak with acute awareness of our whiteness and the privilege that goes along with it. We often parse signs of institutional racism in our professional, social and political environments. Institutional racism, a concept that was quite in vogue during our coming of age years, was my early introduction to the contextualist ideas about the shaping of our experiential worlds that is a current vogue in psychoanalysis.

Thus, in sum, I have always been aware, to varying degrees, of “white privilege” (McIntosh, 1998). My parents were conscious of it, and worked in quiet ways to reduce the privilege gap. They worked on fair housing campaigns during the '50's. I remember hearing hushed conversations with small groups of people, as if Hoover and other anti-Communist witch hunters might be listening in. My father was a physician, and my parents joined a mixed-race professional group. The group, whose avowed purpose was to further integration by increasing social contact between whites and blacks, often met in our home, so I mingled with the adults (balancing serving trays of canapés and drinks), and much of the conversation revolved around themes of race, privilege, racism and inequality.

As I write now, I realize those gatherings provided early exposure to folks who wished and hoped and had some faith that face-to-face conversation could play a part in increasing inclusiveness. Our own professional work involves tending to those whose cultures and families cannot hold them, who have lost or feel alienated from their conversational communities. We strive to reestablish inclusive conversational possibilities.

Interestingly, writing now, I also realize a benefit I derived from privilege, one I have heretofore ignored (which goes to show that removing the veil of non-seeing that accompanies my social location is a never-ending process). It comes to mind as I reflect on the experience above as a representative example of “professional class” social location.

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4 Many years later, in 1983, when my (male) life partner suggested we consider getting married, I said I did not want to do so as long as my gay friends and colleagues could not do the same.
When I was about 3 years old, I was run over by a car. My parents rushed me to Walter Reed Army Medical Center. My father was, at the time, an active-duty lieutenant colonel. He had recently redeployed from Korea, having deployed at the beginning of that bruising conflict, shortly after my birth.

In the emergency room, it was evident that half of my face was deeply lacerated and torn up. My father happened to run into a plastic surgeon—another officer—in the “medical personnel only” elevator. He told the surgeon of my situation. The surgeon immediately agreed to operate on me, doing the fine stitching of plastic and reconstructive surgery. 150 stitches later, I was on the path to a recovery that would show only one facial scar from the accident.

If we focus on this event with a narrow lens, we can attribute my good fortune to the luck of my father’s meeting with the plastic surgeon (otherwise surgery might have been delayed for months, or even a few years). If we widen the lens a bit, we can add that my father’s status as a physician and lieutenant colonel made a difference as well (my father believed this made a positive difference). But let us widen the lens even more—the widening I had not considered until now. My father served in the military at a time when integrating the armed forces was in its infancy. There were very few black officers at the time. That is, if I was black, I likely would have been the daughter of an enlisted man. A private, a corporal, maybe a sergeant, may be even a lieutenant, but certainly not a colonel. My father would not have met the surgeon in the elevator. My face might show a few scars to this very day.

It is rare for those of us who are centrally socially located to widen our lens in a way that reveals the racialized nature of every aspect of our lives. The narrow lens keeps racialization invisible. So my unscarred face is where my privilege lives every day, yet it is utterly invisible. An apt metaphor. The narrow lens is often referred to as “white blindness.”

Many years later, while working at a clinic in Los Angeles, I was introduced to a new colleague. We shook hands, and as we talked I recognized a familiar colloquialism from “back east.” I asked her where she was from. She said, “D.C.” She asked where I was from, and I said, stumbling slightly, that I was from the D.C. suburbs. She was black, I white, so we both knew what that meant. She had been raised on the under-resourced, marginalized side of the color line. I was raised on the privileged side. I perceived a palpable awkward tension between us, something we about which we never spoke, and never resolved.

This experience reminded me of something that white author Willie Morris, former editor of Harper’s Magazine wrote in his autobiography (1999), which was in large part an attempt to come to terms with the moral complications of complicity and guilt regarding his own “life on the color line,” in the segregated South. He had been raised in the town of Yazoo, Mississippi in the ‘40’s and ‘50’s. He had once written of his boyhood there in somewhat idyllic terms. In his later autobiography, he mentioned a letter written by a black reader, familiar with Morris’ tales, who had also grown up in Yazoo. The reader had written, “Your Yazoo was not my Yazoo.”

5 In what is probably a good example of what Kimberly Leary (2012) calls, an “adaptive challenge,” in which different stakeholders may hold irreconcilably different meanings regarding a shared situation, I have struggled over the decision to use the racialized color terms, “black” and “white.” The term, “African-American” is uncomfortable for me, at least in my position as a white person concerned with “white privilege.” When discussions about race occur, I often see “African-American” and “white” juxtaposed as though they are parallel terms. But the correct juxtaposition should be, “European-American.” European immigrants generally drop the hyphen within a few generations because it is easier for them to be incorporated into American consciousness as “Americans.” (see footnote 4, below). Blacks live doubly. They are quintessentially American, having been here—involuntarily, of course—from the start. And yet they are never fully “American,” they remain outsiders (again, footnote 4). Some blacks also want to reclaim their stolen heritage by using the term, “African-American.” I prefer the terms, “white” and “black,” because, aside from ethnic heritage, class etc., racialized skin color DOES matter in this country. Ask any black person who tries to catch a cab northward from mid-town Manhattan.
That sentence, “Your Yazoo was not my Yazoo,” has become a mantra for me. It captures perfectly the possibly irreconcilable differences in perspective between my (largely) central social location, and those who are marginalized. And it reminds to take note of the limits and contextuality of “my Yazoo.”

I found the term, “racialized,” in a paper by Kimberly Leary, and it opened a way for me to emphasize the pre-reflective, everyday narrow-lensed, unnoticed contextuality of white privilege:

...racialized experience—the experience of being raced—operates through people and through everyday cultural forms and is not a matter of individual intention and agency alone. It is a product of our imbeddedness in an interpersonal and social world that continually acts upon us.(2007, p. 544)

In other words, racialization is a dominant shaper of our consciousness, but is largely invisible to whites, especially those who are centrally socially located. As professor of law Neil Gotanda(1997) points out, in a painful story about unconsciously racialized legal judgments:

The most striking characteristic of whites’ consciousness of whiteness is that most of the time we don’t have any. I call this the transparency phenomenon: the tendency of whites not to think about whiteness, or about norms, behaviors, experiences, or perspectives that are white specific.” (p. 72-3)

I have identified myself as a white person. Authors generally do not use the signifier of “white,” or “Caucasian,” unless, as I am doing now, the author needs to establish whiteness in relation to non-whiteness. In most other instances, there is an assumption, at least among whites, of whiteness unless stated otherwise. The assumption of whiteness is pre-reflective. It is one of the many background assumptions that, without awareness, shape the world-view of most white Americans.

A thought experiment might make these ideas more personal for us. If you are a white reader, imagine yourself with a patient. You most probably thought of a white patient (certainly the overwhelming majority of my current and former patients are white). But the fact of their whiteness was probably meaningless to you. In all likelihood, the meanings to each of you of working together as a white therapist-patient dyad.

Another example for a white reader to try is to imagine you are a black listener, a great-great-grandchild of a slave, as I recount a news interview that I heard on NPR in 2009.

Expert: “As the recession deepens, many middle-aged men are losing their jobs and remaining unemployed for longer than in prior times. Families must live on one income, usually from the lower-earning wife’s job.”

Interviewer: “Still, I imagine this is different from the past, when the only wage-earner was the husband.”

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6 Perhaps one of the most insidious implications of this non-seeing--the transparency--is offered by social historian Grace Elizabeth Hale, in an intriguing book, Making Whiteness (1998): Central to the meaning of whiteness is a broad, collective American silence. The denial of white as a racial identity, the denial that whiteness has a history, allows the quiet, the blankness to stand as the norm. This erasure enables many to fuse their absence of racial being with the nation, making whiteness their unspoken but deepest sense of what it means to be an American (xi).p.32
Expert: “Yes, that’s right.”

It is hard for me to imagine that the two women are not both white, educated, and straight. I was particularly disappointed at how invisible black life was to the “expert.” From the days of slavery until the present, the vast majority of black women have worked full-time outside the home. The statement, “the only wage-earner was the husband” is a clear signal to black listeners that their experience is not relevant, even to this day. That interview was a prime example of the tendency to universalize the experience of straight middle-class whites. And it represents the failure of what South African born analyst Suchet (2007) points to as our developmental task; we cannot transcend race, but we need to live with our racialized whiteness as a close, conscious subjectivity.

As for me, I have been involved in a life-long struggle to notice. Not solely to look at another person’s face and find the person who is always more than my first impression, my prejudice-laced categories. But to notice, more intimately, the racialized nature of my own subjectivity. When I was 16, I quickly glanced at an article in the Washington Post as I prepared to catch my school bus. It detailed the heartbreaking search that North Vietnamese mothers were making, searching rosters and other notices to find the fate of their sons who had been sent to fight along the Ho Chi Minh Trail. I am ashamed to say, I was shocked to find that the Vietnamese kept records! Yes, I was morally opposed to the war. But I had a naive idea that the Vietnamese were a primitive culture, one in which records did not exist. Nor grieving mothers. I suffered a more profound shock, that of recognizing my racism that had dehumanized others. This kind of shock—not my first, nor my last—has propelled me on the path of combating white indifference, denial, and our narrow-lens.

Life in the consulting Room

It should be no wonder that I have gravitated toward therapeutic ideas that reduce the use of unearned power by the therapist, and also are process-oriented. A process perspective reduces the risk of imposing content goals on our patients. Feminist authors and social justice activists alike have authored scathing critiques of the abuse of unearned power consequent to the narrow-lens vision rife in clinical thought. More specifically, I argue against the concept of projection—on both ethical and practical grounds (2012). I also pay close attention to how my presence is experienced by the patient (2009). Obviously, these notions are common currency amongst many therapists, for practical reasons. I point them out because my commitment to them is also based on an ethical passion for supporting conditions that empower my patients’ voices. One way to do that is to create a theory and practice that makes it harder for me to use my unearned power.

Humility

It is inevitable that in the number of surprises I encounter in my quest to notice my social location, I have learned humility regarding the extent to which I can truly know another person’s experiential world. Of course there is tremendous overlap between my world and someone else’s, but there is also always more to the other person than I can ever know (that is true regarding self-knowledge as well, come to think of it!). The closer someone is to sharing my

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7 In a recently published book, *The protest psychosis: How schizophrenia became a black disease*, (Metzl, 2010), the author provides a telling example of a racist narrow-lens, decontextualizing formulation: In the 1850s, American psychiatrists believed that African American slaves who ran away from their white masters did so because of a mental illness called drapetomania (p.ix).
own developmental and current life-contexts, the more I presume shared meanings. This is not a good thing. It is easier for me to be cautious about assumptions and presumptions when there are observable differences between my patient and myself. For instance, the following vignette occurred many years ago, around 1980:

Carla, [black woman in her 30’s] a terribly isolated young black woman with daunting fears and inhibitions, was struggling to establish a foothold in her profession. She never mentioned our race difference, and was uncomfortable on the rare occasions when I made my whiteness more figural. I finally asked her why that area of discussion was so off-limits. She said with some trepidation that she was afraid that our connection would break entirely if we talked about our racial differences because there were dimensions of her life that I could never fully understand. She thought that she was damned either way. If I could not understand her deeply, she would be lost and alone again, a painfully familiar psychological landscape. Yet if I endeavored to understand her as if I thought I actually could, grasp in all it’s depth, what it means to be black in this culture, than she would lose all faith in my self-awareness, and my racial awareness. Carla was hopelessly despondent at the end of the session.

It happened that our local paper that week posted an editorial about the racial divide, and about how blacks and whites could only begin to meet each other without rendering blacks invisible if whites could acknowledge the unbridgeable gap of understanding that exists between a life lived with privilege and one lived under the constant shadow of racism. I brought the editorial with me to our next session. To my surprise and delight, Carla had read the same editorial, and was quite receptive to placing our relationship in the context of “meeting-by-seeing-where-we-cannot-meet.” She was relieved and heartened also that I had not been insulted, and had not wanted to give up, even when she felt hopeless. Over the course of our work together, she gained enough confidence and trust in me to tell me some excruciatingly painful and shameful stories of her childhood, something she had thought she would never be able to do. (Jacobs, 2005, p. 238)

Inclusion

I am very touched by a patients’ movement across lines of exclusion. So whether that line is one between me and patients, or patients and their families, or patients and a system (school, employment, neighborhood), it is a moment of triumph. I must admit though, that although I am most deeply affected by a patient’s movement across some exclusion I have erected--usually from my own defensiveness, my pre-reflective judgments, or my narrow lens--those events are also sometimes achieved only after some excruciatingly difficult encounters and self-exploration. Along with Cushman (2000), I believe that the “meeting” between therapist and patient that Buber describes, and which I have named as the “dialogic attitude” (2009), honors the fact of psychotherapy as an inclusive, moral discourse.

Dignity

The moral discourse is a process of restoring dignity. I think the restoration of dignity is fundamental to the therapy process. Reaching for dignity is an area in which my personal and socio-historical issues blend. I know something about the experience of degradation in my own life. At times I wondered if it would be possible for me to ever have a sense of my own virtue. The “children” (see Halberstam, 1998), of the civil-rights movement, many barely older than I, were my role models, my inspiration for overcoming degradation by living with dignity and integrity and standing up for what they believed in. I have always been drawn toward and inspired by those who have managed to overcome indignities and degradation and have lived lives of integrity and emotional and moral courage. For instance, there is United States
Representative John Lewis, who as a young teen--poor, raised on a farm--learned about and then taught principles of Ghandian non-violence to other young teens who were some of the sparks of the civil rights movement (along with the determined and courageous housekeepers involved in the Montgomery bus boycott). And dignity is what I search for with my patients. Honoring their voices, their survival, their tender sense of “having a place” in our shared world, their agency and authorship in our therapeutic conversations.

Emotional courage

Akin to that, I commit myself to emotional courage with my patients. It is an emotional skill that is under-represented in our literature, yet crucial for emotional resilience. I mean by this, the courage to lean into emotionally difficult conversation. My patients learn of the value of building that muscle when I can muster the emotional courage to hear them, really hear them, when they invite me into worlds I would rather turn from, and especially when I do not turn away or deflect them when they are telling me something about me that leaves me swimming in shame or guilt. These conversations build the integrity and dignity of each of us. When we turn away from them, the integrity and dignity suffer erosion.

Bearing guilt (and so much more)

Guilt can really trip us white therapists. Where guilt rears its head, defensiveness and shame often follow close behind. Difficult clinical moments are ripe for guilt, shame and defensiveness for the white “insider” therapist. I certainly feel guilt over the privileges I have, heightened at moments when someone I care about who is an “outsider” is acutely aware of my privilege and his or her marginalization. When that someone is black, I sometimes burn with a sense of shame, not just about present injustice, but about history, as well. And yet, if I resist my guilt, I resist knowing my privileged position.

Altman (2000) described in achingly honest detail how his guilt tripped him up in working with a black male patient. Gump (2000) wrote a reply that can help any conscientious white therapist unpack and learn about our guilt and its vicissitudes in cross-racial therapy. She pointed out that Altman’s acknowledged difficulty with his guilt may have created a stumbling block in part because of the unacknowledged shame that he and his patient were coping with in the relationship. She also has made a poignant case for taking into account how much the history of slavery infuses the psychology of blacks (and I would argue, it infuses the psychology of whites as well, larger noted by aversion to recognizing the on-going effects of slavery and our slave-holding history). And more poignantly, how shame and guilt diminishes a white therapist’ capacity to “see” the patient. She wrote, “Although I have written here of difference, it is ultimately to argue for psychological identity. It is consignment to the category “different from me” that obscures this patient, that renders him unknowable.” (p. 670)

I do not believe that our guilt is the problem, because as I said above, I find it necessary in order to acknowledge privilege. Rather, our problem is in our difficulties is living in our guilty situatedness. I have rarely been able to find conversational partners for exploring and unpacking white guilt, white shame and defensiveness, and such conversations are necessary in order to attain some reflective space.

Of course, bearing guilt is necessary in our work in so many ways. We must learn to tolerate the guilt of disappointing our patients when we end sessions, leave town, speak impulsively or rudely, etc. And we need to be able to help out patients bear their guilt as well. A patient of mine complained of being awakened drowning in anxiety every morning for the past

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8 Later, during the Freedom Rides, he was almost killed. That did not dissuade him from participating in marches, such as the one on the Edmund Pettis bridge. Nor did he stray from his ethic of non-violence.
thirty years. As a young hospital social worker, she had once made an error that had hastened the death of an elderly patient. She said many therapists had helped her to try to lessen her terrible guilt. I suggested that maybe rather than trying to talk her out of her guilt, we needed to bear witness to her mistake together. She told the story in more detail. We both were teary. She never awakened with anxiety again.

A black analyst colleague told me she did not want white people to feel guilty, because she felt under pressure to relieve them of their guilt. To do so would violate her integrity. I don't want to be expiated. I want to use my guilt as best I can as a touchstone. I am not graceful with my guilt, but I am committed to facing into it.

Life in the classroom

Probably the most direct expression of the influence of my white-suburban childhood-simultaneous-with-the-civil-rights-movement, is my passion for talking to other whites about our narrow-lens and our indifference to our central social location. This is the arena in which my more intimate personal experiences and my socio-historical passions weave together, as I mentioned earlier. I find myself most interested in getting the attention of my fellow whites, the ones who are indifferent to, or ignorant of, their relative power and the consequences of their indifference and narrow-lens. To that end, I embrace opportunities to give presentations at clinics, workshops at conferences, etc. I am always on the lookout for ideas about how to talk with other whites in a way that minimizes defensiveness so that we can explore together.

I have found the concept of social location to be quite useful in this respect. We are "guiltily situated" rather than personally morally deficient. Our privilege, prejudices, racism, complicity, and narrow-lens vision, are all emergent of our central social location. This is an idea that increases the receptivity of whites in my workshops. Our complicity can never be fully erased, but awareness of the implications of our social location can increase our wisdom and our sensitivity to racialization in all that we live. And the concept of social location seems to make guilt more bearable—in part, I believe, by reducing the shame of being considered personally racist-- which reduces defensiveness.

Another construct is one I have borrowed from Jody David Armour (1997), a lawyer who argues against “color-blind” jurisprudence (see also Alexander, 2012). He distinguishes between racism and prejudice. Racism aims to keep power and control in the hands of the dominant white culture. Prejudice refers to negative ideas and stereotypes we hold towards member of other groups. He then distinguishes between those who have high racism vs. low racism, and high prejudice vs. low prejudice (it may be helpful to visualize a four-quadrant square with each of these 4 positions). He makes the point that the people whom he most wishes to reach, are those who are high-prejudice/low-racism. The low prejudice/low-racism people are already probably sensitive to racialization, privilege and complicity. High racists are uninterested in the challenges of reducing social inequity. The high-prejudice/low-racism people are more prejudiced, but their prejudice matters to them. That is, they wish to be less prejudiced, or at least, they wish for the attendant racism to diminish.

When I teach, I put myself into that quadrant: high-prejudice/low racism. I give a few examples. Then we can talk together as fellow explorers. I am always hungry for good conversations with other whites about racialized experience.

Final words

A painful truth

A black analyst colleague, Veronica Abney, and I have tried several times to offer an elective at our institute. We want to sensitize analysts to the implications of social location.
Primarily, we wish to sensitize those of us who are largely centrally socially-located. When we described our course as one that would study primarily racialization, very few people signed up. When we “disguised” the course as merely one designed to look at the implications of social location, we finally got a class. At one point, one brave candidate said that although she was glad to have taken the class, she was angry that we did not advertise at the outset that the class would study primarily racial themes. We asked her if she would have signed up if we had said that. She said “no.”
Bibliography