# THE CLASS DYNAMIC IN THE THERAPEUTIC RELATIONSHIP

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**Abstract**

In counselling and psychotherapy, the issue of class is neglected both theoretically and in practice.  This thesis aims to address this anomaly by focusing on the class dynamic in the therapeutic relationship. First, the study offers a theoretical exploration of the three major concepts of class.  Second, the empirical research aims to highlight how the working class research participants perceive therapists and counselling, and how the counsellor participants perceive class and manage class difference.

I argue that class is complex and multidimensional.  Therefore, no one theory about class offers a complete account.  With this in mind three theoretical concepts are explored demonstrating their potential usefulness to the provision and practice of therapy.  The position taken is that two of these concepts, class as a relational phenomenon, and class maintained and reproduced through habitus, capital and dispositions of the therapist and the client provide a means by which the class dynamic can be analysed, with consequences for the therapeutic transference.

The empirical inquiry constitutes a theory led, constructionist, thematic focus group analysis, cross referenced to individual counsellor interviews.  The data was gathered from six focus groups situated in Sure Start Children Centres across the West Midlands.  Each centre was located within the highest percentile of nationally delineated deprivation factors.

The research findings suggest that all participants called on latent socio-cultural accounts of class in relationally defining themselves in opposition to others; that the power dynamic in the therapeutic relationship is constructed differently between the working class participants and the counsellors; that therapists symbolise a homogenous middle class to the working class participants; that the cultural capital of the therapist is resisted by the working class client; and that the focus group participants' constructions of therapy, coupled with the counsellors' terms of therapeutic engagement when working in Sure Start centres, signal implications for practice.

Class, as addressed in this study, indicates it is an issue in primary processing, and confirms its centrality to the therapeutic relationship.

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**Abbreviations**

| | |
|---|---|
| BACP | British Association for Counselling and Psychotherapy |
| CPAG | Child Poverty Action Group |
| DFLE | Disability Free Life Expectancy |
| NHS | National Health Service |
| OECD | Organisation for Economic Co-operation and Development |
| ONS | Office for National Statistics |
| SEC | Socio – Economic Classification |
| SOA | Super Output Area |
| UK | United Kingdom |
| US | United States |
| WHO | World Health Organisation |

# INTRODUCTION

Class has been a neglected phenomenon in counselling and psychotherapy.
It has not received the same consideration as other forms of social identity
such as 'race', gender, or sexuality. Class is marked by its absence, at least
until recently.  In addition, although there have been accounts
conceptualising  the individual in the social, and the social in the individual,
no great inroads have been made into integrating the individual as a social
being within therapeutic theory and practice.  Where the latter is addressed,
the social aspects of being, tend to be an add-on, part of secondary
processing rather than integral to the individual. Furthermore, positioning the
social world thus, appears to emphasise the world of the client and renders
the social world of the therapist as more or less irrelevant to the therapy.
Meanwhile, in social theory and sociology, the last couple of decades have
seen a move away from class as a shared, group experience, to class as an
individual, cultural phenomenon.

The thesis here is that class affects the therapeutic dynamic and therefore
class matters.  It matters theoretically, it matters to the client, and it matters
to the therapist.  It matters because the two enter into a transferrential
relationship and in that transference the social world is visible and impacts
on the therapeutic relationship.

The aim of this study is threefold: First, to use theoretical reasoning to
explore and provide a conceptual basis for an understanding of class and its

relevance to the therapeutic relationship in contemporary society.  Second, to use qualitative empirical inquiry to investigate how class impacts on the dynamics of the therapeutic relationship. Third, to argue for a theoretical duality in approaches to class, the rationale being that class is highly complex, and the use of one approach or theory, alone, does not represent its totality.

The initial part of the study comprises a theoretical analysis.  The aim of this is to provide a premised argument that class can be usefully conceptualised for the therapeutic relationship. The second half of the study presents the qualitative research.

Chapter 1 considers theory and the context of theorising.  Chapter 2 considers class as structured social and economic inequality citing research that measures the effects of class position on the allocation of resources, differentiated income, and outcomes such as health, morbidity and longevity. The aim of this chapter is to demonstrate that class exists 'out there', is visible as institutionalised structural inequalities, such as the gap between the highest earners and the lowest, and how position in the hierarchy affects life chances such as morbidity.  The dominant neo-liberal political agendas and associated discourses are questioned, so too methodological individualism presently circumscribing mainstream psychological theories and practice.

Chapter 3 takes a fresh look at Marx (1981; 1985) and his analysis of historical materialism as a relational concept, and how this can be usefully applied to therapy as an integrative element in object relations theory. In so doing, a theory about the dominant, subordinate power dynamic in the therapeutic, transferrential relationship is proposed.

Chapter 4 aims to illuminate how the class dynamic works in practice, at the individual level of therapist and client. Bourdieu's (1984) concepts of habitus, capital, and dispositions are utilised. These two theoretical concepts inform and underpin the following research and its analysis.

Chapter 5 summarises the theory. Chapter 6, following Braun and Clarke (2006), provides a rationale for the methods and methodology and justifies a theory informed, contextualist/constructionist, thematic analysis.

Chapter 7 presents a contextualist/constructionist, thematic analysis of the Sure Start, parent focus groups. Thirty two participants in six focus groups were involved at sites across the West Midlands. All centres are sited in low super output areas indicating they were in the highest percentile of social deprivation.

Chapter 8 constitutes an analysis of five counsellor interviews which are analytically predicated on the same principles as the preceding focus groups analysis. The counsellors were either working in the same Sure Start

children's centres as the focus group participants, or were working generically with families and children, in the same low super output areas.

Chapter 9 presents a discussion of the findings across the two data corpora. It is structured on a similar basis to the theoretical analysis to demonstrate the link between theory and practice. Chapter 10 constitutes the conclusion.

Throughout the study the term "class" is used without distinction allowing the relevant chapter to define its usage. The term "therapist" and "therapy" denotes a non-theoretically specific psycho-therapeutic relationship that could be within the NHS, the mental health services, or any context-specific practice. It encompasses counselling and psychotherapy as defined by the British Association for Counselling and Psychotherapy (BACP). However, at the outset it is important to note that psychodynamic counselling theory is present as a backdrop to the analysis.

In the qualitative research chapters the participants of both the focus groups and the individual interviews, were asked about counselling rather than therapy as this appeared to make more sense and resonate with their particular experiences.

Any alternative terms used other than those defined above follow the cited author.

# Chapter 1

## THEORISING CLASS

## Introduction

The diversity debate in social work, social welfare, counselling and psychotherapy, has offered a challenge to psychodynamic and psychoanalytic theory. As a result there has been a re-examination of the theoretical constructs related to the role of the social in the internal world of the individual and how this can be usefully incorporated into therapeutic practice. One aspect of the diversity debate has focused on the role of theory in proscribing and defining behaviours and practices and has challenged the bases for this.

In terms of this study this means that class theories drawn from social theory and theories concerning the interaction between social context and the individual's internal world need to be brought to bear upon one another in critical examination. The theoretical aspects of the study take Marx's and Freud's critiques of modernity as a starting point and the work draws on 'existing theory, empirical accounts, political positions and historical understanding to produce an argument' (Dant 2003:16). In addition, like critical theorists or post-modernists, there is no claim made for a definitive understanding. However, what does differ here from some of the latter approaches stems from ambivalence about extreme relativist positions associated with some post modernist thought. Not all 'truths' are equal. Some have emancipatory qualities others are embedded in notions of oppressive practices. As Foucault (1980) proposes, knowledge is not at all

disinterested, but is inextricably linked to power. So in considering 'difference' as a social and psychological phenomenon, it is important to also account for and reflect on the power symmetries inherent in and external to, any relationship. In this sense the work is closer to that of standpoint epistemologists (Harding 1986), if not as a whole at least with respect to the belief that individual characteristics, for instance gender, ethnicity, class etc. act as important determinants of the way reality is defined and interpreted. For instance, in the psychoanalytic literature there is now a well-established body of analysis, which challenges the orthodox Freudian concepts of gender and sexuality (and latterly 'race'). These challenges are in part premised on the fact that the theorists and practitioners were male, heterosexual and white and therefore, though presenting themselves as neutral and objective, were conducting their research within a particular social and political context and within the framework of a particular masculine, heterosexual and white ideology. For the feminist epistemologists, individuals claiming neutrality and objectivity use those claims to hide, albeit unconsciously, conservative agendas. Instead, of the objectivity and neutrality they search for, they present a partial 'world-view' related to their personal position in the social order (Harding 1986; Hammersley 1993,1995). As a consequence of this position standpoint feminist research has sometimes been criticised for claiming the moral high ground, as promulgating qualitative as 'good' and quantitative as 'bad' (Hood et al 1999). No such oppositional separation is suggested here. Nevertheless, the early feminist work in this respect highlighted and identified the problematic concepts informing positivism, a position

supported by academics interested in the sociology of knowledge who argued that scientific knowledge is itself a construction embedded in social and linguistic processes (Mulkay 1985; Gilbert and Mulkay 1984; Woolgar 1988). Punch articulates this within a wider context:

> "Research is used to describe the world for particular purposes. It is not just an abstract and neutral academic tool….it is a human construction, framed and presented within a particular set of discourses and conducted in a social context with certain sorts of social arrangements, involving especially, funding, cognitive authority and power."(Punch 2005:135).

Furthermore, this has import for the empirical research. Within the traditions discussed here, it is generally accepted that we can never see the social world 'as it is', that we always see it from one standpoint or another. Therefore the individual characteristics of the researchers, their position in the world and their relationship to others will determine the questions asked, the way in which they are asked and how the answers are interpreted. Some critical theorists take this proposition further and argue that as research cannot be value free, the researcher should declare their position and that all research, theoretical or empirical, should be openly ideological (Hammesley 1993). Best (2003) exemplifies this and exhorts the researcher to be reflexive about his or her standpoint and to use theory useful to the context of the research

Pryke et al. (2004:2) take this argument considerably further in proposing that empirical research and theorising, reference to philosophical standpoints, and these should run alongside one another. In so doing a challenge is proffered to the orthodoxy that one can go out and 'do'

empirical research as an objective project. The practical challenge is to use philosophy and social theory as an integral resource to the research process by utilising 'ideas, values and assumptions, appropriate to the different stages of the research process'. One example of this is the role of standpoint epistemologies in providing the basis for the formulation of the research question and how an appreciation of this reveals the limit of the possibilities of what may be asked.

This research thesis focuses on the manner in which class affects the therapeutic relationship. It is evident from the framing of the overall research question that the position taken is that class matters in some way or another. Following this line of inquiry the theory and empirical aspects of the study are divided with the theoretically oriented chapters framed by the following questions:

1. What does class mean?
2. How and why has the diversity debate virtually ignored class?
3. How does class impact on identity and relationships?
4. What relevance does this have for counselling and therapy?
5. Can class be usefully conceptualised for the therapeutic relationship?
6. How does class affect the relationship between the inner and outer worlds of the therapist and the client?

## Contextualising class theory

Until recently there has been little analysis of class in the context of psychotherapy. Its significance as a phenomenon has been neglected

(Frosh 1999; 2007). However, over the last decade this has begun to change and there is now a developing discourse on class, inequality, and poverty, and how as phenomenon these manifest themselves in the therapeutic relationship. The research and comment is largely within the context of the United States (US), therapeutic interventions which are not entirely analogous or applicable to the United Kingdom (UK), but are nevertheless not dissimilar as the social and political contexts coincide. Both nations are first world, and rich, with industrialised developed economies; both are founded on democratic and meritocratic philosophical principles; and both nations share the theoretical premises underpinning counselling and psychotherapeutic interventions.

However, operational differences, how and where therapeutic interventions are delivered, impact on manifestations of class in therapy: Provision within the US is largely private, conversely in the UK there is a significant proportion of state, National Health Service (NHS) provision. As a consequence the social composition of the client base is markedly different.

Different also, is the social composition of society, with issues specific to the African American community, class and poverty (Liu 2011; Smith 2010). Another distinction between the two is absence in the US literature of any reference to a materialist analysis. The UK is closer to Europe in acknowledging and developing a tradition based on socialist/Marxist principles – a largely unacceptable position in the US. Nevertheless, the commonalities may well be stronger than the differences and with the

identified caveats above, US literature and research provides a fruitful basis for exploring class and inequality in the UK, a position supported by Weiss (2008).

For at least the last three decades, the US and the UK have shared a political ideology which has influenced both domestic and foreign economic policies - that of neo-liberalism.  Coupled with the effects of globalised economies driving down wages in traditional working class occupations there has been an unprecedented growth in inequality between the richest and the poorest groups in both societies (Reich 2008).  Research consistently demonstrates that extremes of inequality, such as that now experienced in the US and the UK, have a negative impact on the social fabric of society. In all developed countries life expectancy is between 5 to15 years shorter for those at the bottom of the social hierarchy than for those at the top. Social indicators between classes, such as higher death rates, morbidity rates, homicide rates, teenage pregnancy rates, and child mortality rates, are clearly distinguishable in less egalitarian societies and across all income groups, whilst lower rates are recorded for all negative indicators in more egalitarian societies (Crompton 2008; Hutton 2010; Lavalette 2011; Liu 2011; Smith 2010; Wilkinson 2005).

Neo-liberalism is not only a political and economic strategy, but also maintains as a defining feature, concentration on the individual (Crompton 2008). Pratt (2005), in Lavalette and Pratt (2005), identifies the three key elements of neo-liberalism as: methodological individualism, rationality in

pursuit of self-interest; and market supremacy. Of these, methodological individualism as a construct has import for therapy, and more widely, the majority of psychological interventions.

Methodological individualism (Weber1968 [1922]) proposes that social phenomena can and should be explained as the end result and consequence of individual actions. However, as a philosophical and economic position or political ideology, in action, there are profound effects of this proposition on self perceptions, perceptions of others, and social interactions in general. The erosion of solidarity and an 'atomisation of social life' under the dominance of neo-liberal perspectives have led to a paradigmatic shift in the way we see the world (Lorenz 2005 in Ferguson 2008:24). Historically, the move to individualism in the 1970s, coincided with the decline, indeed disappearance, of traditional working class occupations and their accompanying communities. Thus, positive images of working class organisation in the past, such as support and trade unionism offering alternative forms of organisation, a sense of belonging to a community with its attendant support mechanisms, pride in being seen as 'hard working' and being paid well for a job well done, have more or less disappeared. As a consequence of the loss of industry, 'important mechanisms of socialisation within which collectivist ideas and attitudes were once generated', disappeared not to be replaced (Crompton 2008:4; Ferguson 2008; Skeggs Skeggs 2009; Smith 2010;).

Smith (2010:1) suggests that the dignity of working class people, especially the poor working class, is no longer present in contemporary culture, and at a personal level this exacerbates other elements of individualism. Presentations of '…poor and strong, poor and working, poor and self respecting, poor yet receiving respectful consideration from the rest of society' have disappeared from all cultural representations leaving affected groups without images of a recognisable positive self, mirroring and reinforcing their sense of not belonging.

Growing in tandem with the absence of positive images has been the 'blaming' culture of individualism.  For instance the dominant view of the inability to find work, or participate in family life, or a healthy lifestyle, is one of an individual matter, the fault or the responsibility of the individual rather than any acknowledgement of the role of social and political influences. The alternative view that structural social and political processes and change impact on the individual is rarely heard outside academia (Crompton 2008; Sayer 2005).  Academia provides evidence based examples. For instance the impact of neo-liberal policies and globalisation on the increase of unemployment and worklessness is widely chronicled and is exemplified in the work of Crompton (2008) and Hutton (2010); similarly so the stresses of low pay and long working hours in the UK - the longest in Europe and the impact these on family breakdown (Crompton 2008; Hutton 2010); and also how equitable access, advertising, and the availability of food impact on healthy eating (Boyce et al. 2008).  The Runneymede Trust Report, *Class in the 21st Century* analyses how in each of these instances the political and

media coverage, other public articulations, and common parlance, has it that individual attitudes, abilities, and a lack of general effort, are to blame. The alternative is rarely proposed, that the working classes are experiencing problems 'better traced to long-term shifts in economic structure and political policy…which have hit the poorest hard' (Bottero 2009:8). Abstracted from their social and political context, individualised examples find expression in moral concepts and sentiments underpinning attitudes to work, family and health. The emphasis is on the responsibility of the individual, well beyond that which they can reasonably be expected to exercise (Sayer 2005). As Prilletensky (2010 foreword to Smith 2010), proposes, we ascribe individual intentionality to behaviour that is 'enormously prescribed and proscribed by objective and subjective realities beyond the control of the individual whose intentionality we are judging'.

Echoing concerns about the dominance of neo–liberal individualism, the Joseph Rowntree Foundation empirically identifies individualism 'as a leading contemporary social evil'

> "…people increasingly look after their own individual or family interests without considering the needs of society or the community. This individualism was seen to have damaging consequences fuelling selfishness and greed and leading to isolation and fear as people struggle to cope and live fulfilling lives alone." (Rowntree 2009:3)

Similarly the prior 'Good Childhood Enquiry' whose findings were

> "The pursuit of personal success relative to 'other' cannot create a happy society, since one person's success necessarily involves another's failure." (Layard and Dunn 2009:6)

Living in an individualised and atomised society based on neo liberal values is not just about haves and have-nots, that is to say, wealth versus exclusion or material deprivation, but it is also about the associated feelings of shame, self-derogation, doubting who you are and questioning the dignity of self and others in similar situations. 'This is frustration, anger and disappointment up close' expressed, in the course of therapy, recognised or not for what they are (Prilletensky 2010, foreword to Smith 2010). These are specific psychological responses to experiences of being dominated, devalued and exploited (Layton et al 2006). In these guises methodological individualism enters the therapeutic context.

Another reason for considering the relationship between methodological individualism and therapeutic interventions concerns the process and content of therapy and the nature of theory: The training of psychologists and therapists, of all major traditions, focus on the client's individual history, feelings and goals. An unforeseen consequence of this is to accentuate society's preoccupation with methodological individualism. At its worst this results in the pathologising of class, much as other membership of 'out' groups have been similarly castigated in the past. As Prilletensky states (in the foreword to Smith 2010)

> "The helping professions have a long history of perpetuating oppression with the most caring of attitudes…we reduce the social complexity of their psychological pain to immaturity and defense mechanisms and we then blame them for missing appointments"

Rustin (1991) and Frosh (1999) locate the lack of political awareness (politics used in the broad sense of the word) in classical psychoanalysis as rooted in both the theory and the mode of practice. For instance, Rustin (1991) argues that the perception that political activity relates to defence mechanisms such as displacement, and is a projection of inner feelings, renders such experience valid in only an interpersonal sense. Frosh (1999) cites explanations in the psychoanalytic literature that have posited revolutionary politics as products of psychopathological fixations and radical action as the product of neurosis. What these perceptions and explanations do is to invalidate the experience of a particular group or class in society just as in the past the experience of women, black and gay people were denied. Disallowing group identity or experience, concentrating *wholly* on the individual at the expense of shared experience, effectively negates the validity of that experience.

The individualised focus of psychology is a hindrance to conceptualising class within a therapeutic framework most specifically the therapeutic dynamic. Where class is discussed it is limited to class as structured social and economic inequality (see chapter 2). The individualised focus may well be the root cause or at least a significant element of the silence around class in the mainstream psychological literature and the helping professions, as any useful articulation needs to move beyond an individual focus. But doing the latter would be counter-intuitive to a profession whose raison d'être is to work within the bounds of individual psychological functioning and would call for a paradigm shift in thinking. Furthermore, individualistic

medical models are attractive to the political classes as they do not 'require social change or major readjustment of the status quo' (Smith 2010:104). The combination of a professional practice that is premised on 'repair' to individual psychological functioning, and the political and economic desire to maintain the status quo, leads to an inertia equated with the line of least resistance – that is, no change.

In terms of the nature of therapy, the individual focus is not the only hindrance to a class analysis. There is also the more complex issue of the stance of therapist neutrality. Layton et al. (2006) examine how the neutrality argument in the context of the dominance of neo-liberalism, far from being neutral, 'allows' reactionary politics by failing to provide the 'complex critical tools' that people need to make sense of, and act in the world in a political sense, to challenge and oppose as necessary. Refusing to engage with them in psychoanalysis can be a way of 'steering clear of difficult issues to a degree that would be regarded as professionally incompetent should it be seen in connection with issues such as sex and rage' and is a 'psychotherapeutic and intellectual failure as well as a failure of civil responsibility' (Frosh 2007:32).

In the 1990s, writing about counselling, Kearney echoes a sentiment common to the arenas of social policy, politics and welfare, that

> "Having no political ideology of which we are aware is not at all the same thing as not having any political ideology….I do not believe that ideologies (any ideologies) are neutral in any sense." (Kearney 1996:23)

Kearney, is highlighting an accepted strand of thinking in social and political theory - that espousing neutrality or supposedly doing nothing, is a form of quietism. As such it offers tacit support to the status quo and is therefore as political and as active, as a commitment to doing something or having what is termed an overt standpoint epistemology, seeing the world through one particular lens and being clear about it (see, for example, Harding 1986, Mulkay 1991). Psychoanalysis and other therapeutic interventions, have over the years posited neutrality as *the* way of being in the therapeutic relationship both in terms of transference and the frame. However, for some considerable time there have been calls to re-consider this proposition. (see for instance Frosh 1999; Rustin 1991).

Both Rustin (1991) and Frosh (1999) note the historical link in psychoanalysis with conservative and conformist programmes. Rustin highlights the use influential functionalist sociologist, Talcott Parsons (1951, 1965) made of Freud's theory of repression, by incorporating it into his theory of socialisation, generally accepted as commitment to conservative values of stability, tradition, differentiation, and hierarchy. Rustin (1991) and Frosh (1999) also locate liberal politics emphases on the notion of human needs as intensely individualistic, oriented entirely towards instinctive and hedonistic desires at the expense of any idea of humans as social beings, as similarly situated within conservative and conformist programmes. Frosh (ibid) further identifies the manner in which some familial ideology has been used, as deeply conservative and repressive, whilst conversely there is a

total neglect of how the bourgeois family inherent within the theoretical constructs of much of the thinking 'serves the interests of particular power groups or modes of economic organisation'. There is also some detailed chronicling of the biologism, paternalistic, even misogynistic 'tendencies, present in many psychoanalytic formulations'. He notes the various ways psychoanalytic theory has in the past participated in 'reactionary political assumptions' and agendas against dissent, supporting the oppression of women by explaining away oppressive practices, and promulgating a conformist ideology such as 'heterosexuality as the end point of sexual development' (Frosh 1999:311). It would appear that, contrary to claims of neutrality, psychoanalysis has been anything but apolitical or theoretically neutral instead it has frequently been used as an intellectual justification for the difficult feelings experienced by the therapist (Maroda 1991). Moreover in claiming neutrality there is a risk of lending support, albeit unintentionally, to other conservative programmes. Yalom states that

> "If we do not recognise the dangers of our attempts to be neutral we are creating the possibility that we may become an agency for social control, enabling clients only to accept the unacceptable by defending (by default or deliberately) the indefensible." (Yalom 1980:91)

Instead of the neutrality it claims, therapy has inadvertently served either implicitly or explicitly, political agendas promoting particular ideologies precisely because of the call for neutrality.

> "Anything which we as counsellors allow to be unexamined (like our sexism, racism etc.) is much more likely to influence our relationship with a client than something we become and remain aware of." (Kearney 1996:23).

Interestingly, more recently Frosh (2007:31) raises the issue that the call for a change in the stance of the neutrality of the therapist in, for instance, Layton et al. (2006) is, in an unequal society, in danger if shifting the therapist's role to that of an advocate '… is it the case that analysts must take up the cudgels in favour of the oppressed if they are to avoid automatically pathologising them?'  This maybe the logical conclusion of some of the recent subjective phenomenological theorising (see chapter 4) and as such may highlight the consequences of a partial class perspective.

In terms of the nature of theory, classical psychoanalytic/dynamic models, based on drive theories, or later object relations, and relational models, are predicated on notions that separate primary unconscious processes from those of secondary processes, otherwise discussed as the division between the inner and outer worlds.  This division renders class and the political, as traditionally located in the latter rather than within primary unconscious processes. Paradoxically, for at least the last 25 years, social scientists have argued that this is a fallacious perspective, that there is no model of a social world that gradually socialises children as a secondary activity (Walkerdine 2007).  Rather, children experience the social and political world through the experiences and reactive dispositions of their parents/caregivers from the beginning - in utero, through birth and throughout their further development (see for instance Liu (2011) and Sroufe et al (2005).

Both the training prospective therapists receive, and the therapeutic literature, continue to accentuate the need to work with primary unconscious

processes and in so doing, make it quite clear that exploration of outer world issues is simply not done in traditionally oriented therapy and analysis (Samuels 2006). It is almost proscribed.  This positioning is now being questioned and there are two emerging strands. The first proposes an engagement with the 'political' as issues emerge in therapy. The focus here is on the need for the analyst to work with *any* material arising in the course of therapy but the arguments are clearly posited within the traditional framework of secondary processing.  For example, in Layton et al. (2006), there is a prevailing notion that political issues 'enter' the consulting room, in ways that need to be engaged with but the cases cited are clearly part of secondary rather than primary processes, maintaining and supporting the separation between the inner and outer worlds (Walkerdine 2007).

The second strand is constructed as a critique of the first and calls for fundamental theoretical issues to be examined - that, a priori, we cannot separate an internal from an external world. Nor in any sense, can we separate the psychic from the social. There is no inside that is not outside and vice versa (Walkerdine 2007).  Consequently, the 'inside' and 'outside' dichotomy needs to be radically rethought starting with a notion of the social and political world as inherently part of the psychological structures of client *and* therapist and thus worked with as with any primary transferrential material. Whilst the former strand perhaps, speaks to the subjective 'multi-cultural' paradigm within the psychotherapeutic diversity awareness literature, the second strand is primarily relational, and invites all to see themselves – therapists and clients as occupying positions within a larger,

interrelated social class structure with differentiated access to resources and power (Smith 2010).

"[Class is] not just a question of different lifestyles or even just a function of money; it is also a question of structure, power, privilege and disadvantage. "(Smith 2010:5)

And

"What is at stake then is the fundamental premise that understands the emergence of the human subject as primarily within the intimacies of early relations and separates this from anything else." (Walkerdine 2007)

Furthermore, understandings of primary processes are predicated on the ways in which we understand family function and form, and what we take as healthy or unhealthy relating. Class is absolutely fundamental to perceptions of family life, family 'dysfunction', and family relationships, how these are constructed, experienced and reproduced. (Liu 2011; Smith 2010; Walkerdine 2007). Liu argues that the reporting of class in the empirical literature for psychology and more generally, the helping professions, is weak and beset with difficulties: There is little conceptualising or acceptance of class as a phenomenon. Where it does occur it is not well articulated and being theoretically incoherent, it tends to focus on stratification and consequently, promotes a deficit model of 'working class' or poor, by using middle class perceptions, aspirations and values, as normative assumptions. In the literature clinical attitudes to aggression and containment are profoundly middle class. Human perceptions and characteristics 'related to class such as greed, envy, entitlement, shame,

hostility, aggression and pride' may appear in the therapy 'yet they are not well articulated in the literature' (Liu 2011:76).

Far from being a peripheral issue for psychotherapy, an add on when issues enter the therapy room, class is a central and crucial matter, for it fundamentally and powerfully structures the frames of reference therapists use to make sense of the client's world and difficulties.  These frames of reference are imbued with class distinctions, assumptions and judgements. Issues of class will be there, and profoundly so, where ever or when ever the therapist has to make judgements about the background or life of the client. Class is in every aspect of clinical work, from its basic assumptions, to its transference and counter-transference implications (Walkerdine 2007).

Finally, but ironically foremost given the arguments set out above, in any project focusing on class, there is need for class-based theoretical analyses to draw on social theory and sociological research.  Unfortunately, the separation between the inner and outer world of individuals parallels the distinction between the disciplines of psychology and social theory/sociology.  Epistemologically speaking it is therefore, difficult to bridge the two disciplines but not impossible. Thus far the majority of academic/therapeutic accounts draw on sociological *research* rather than theory.  The distinction between empirical research and theory is important for a lack of theoretical analyses leads to the danger of articulating a position that lends itself to class as an 'add on' to therapy, as by default class issues are rendered to secondary processing. However, it is not only

disciplinary distinctions that force a need for further theorising but also the analytical position of the family.

Broadly speaking and at the risk of over simplification, there are two theoretical explanations for class. Class as structure, and class as a subjective experience (Crompton 2008). These are frequently confused or diffuse in associated discourses - psychological or otherwise - and also confused by the common everyday usage of the term 'class' to denote prestige, cultural habits, lifestyle and status. Noting, but leaving the latter to one side, until very recently, the two sociological conceptualisations of class have tended to be presented as contradictory positions only united in locating the basis of class reproduction as taking place in the family (see for instance Crompton 2008). It is this shared acknowledgement of the notion of class reproduction via the family, which provides the other link for a re-consideration of theoretical underpinnings of psychological processes and therapeutic interventions.

Moreover, given the complexity of class theory, instead of emphasising the contradictions and taking an epistemological standpoint, as has been the order of the day in the past, it may be more useful 'to be prepared to work across and with conflicting approaches and methods' by utilising both theoretical explanations 'in order to grasp the totality of social inequality and its persistence. (Crompton 2008:6).

> "Conceptions of class are many sided, and accounts of this complexity will incorporate both material and cultural processes which

are intertwined but analytically they may be treated as distinctive." (Crompton 2008:116).

And

"…a Marxist concept of class is certainly different from Bourdieu's concept of class, but they refer to different aspects of the social world and are used for different, but possibly compatible, explanatory purposes." (Sayer 2005:72)

Clear in the work of Crompton, and Sayer, amongst others is that although these two positions overlap, it is heuristically useful to separate them in exposition, not only because they refer to different aspects of the social world, but also because they need to be understood as sometimes contradictory, distinctive explanations, of different processes.  Thus, on both counts they 'cannot be seamlessly combined in a single, theoretical approach' (Crompton 2008:116) but can be used to explore different aspects of the same phenomena.

Over the last three decades, there has been a move away from the traditional structural theories of class associated with Marx and Weber, towards the subjective, phenomenological approaches articulated most clearly by Bourdieu.  This is commonly called the 'cultural turn' in sociology. More recent accounts offer a challenge to the cultural turn calling for a re-recognition of the structural elements of class.

Structural economic/materialist accounts, accept that class exists 'out there', is visible and measurable, with class differentiation accepted as dependent on historical antecedents. Exemplifying this approach and central to the debate about class (and for that matter all inequalities) and common to all

sociological conceptions of stratification 'is the argument that social and economic inequalities are not 'natural' or divinely ordained, but rather emerge as a consequence of human behaviour' (Crompton 2008:8). Sometimes referred to as the naturalistic fallacy, there is a belief, frequently not clearly articulated as such, that anything found in nature must be good 'the way things should be is derived from merely observing the way things are' (Kay et al 2009:431, in Liu 2011:185). Instead, materialist accounts argue that 'Class persists as systematically structured social and economic disadvantage which is reproduced over the generations.' The distribution of socio-economic power, privilege, inequality and disadvantage has historically and continues to be, the mechanism 'affecting people differentially depending on group membership'. Group based and with measurable outcomes, it limits access to institutions, differentially allocating material resources according to class distinctions - for example, access to higher education (Crompton 2008:117) or inequalities in health, morbidity and mortality rates (Ferguson 2008). Inequality and poverty are about limiting limited resources (Liu 2011:190).

> "Structures exist as hard and concrete facts which are relatively persistent and enduring, meaning that social reality is not necessarily created and recreated in everyday interaction." (Burrell and Morgan 2005:358).

Liu, perhaps best exemplifying the need for dual accounts of class in research, suggests in his largely phenomenological account that

> "It [Class] is not just about one type of deficiency such as income, education, or having a job but rather, inequality is a function of a constellation of factors in interaction. Inequality therefore, is the drag

or weight on the backs of the poor that makes it difficult if not impossible to get up after being knocked down – fewer and shallower resources when under stress – and those are more quickly depleted." ( Liu 2011:190)

The cultural account, with an explanatory analytical emphasis resting on 'the spoiled (or conversely, enhanced) identities and behaviours generated by dominant and subordinate 'cultures of class' (Crompton 2008:117), identifies classes as actual or potential social and political actors (ibid:15). Both research and theory focuses on socio-cultural identities, the subjective experience of individuals and groups, individual actions, responses and how people make sense of class and their identities.

This orientation to culture and identity, the phenomenological or subjective focus on the individual 'actor' and individuals in conjunction with one another, chimes with the present individualist and individualistic social and political milieu. It is also far more accessible to psychological theorising. Liu (2006) notes that psychologists suggest that clarity about social class and classism and the situating of both constructs within a theory are imperative and although a subjective and phenomenological approach is useful for practice this does not mean that macro-level analysis can be dispensed with 'as regardless of one's self perception about class identity, classism still occurs.' However, what the subjective, phenomenological approach does contribute to class analysis is the identification of how people negotiate and respond to power and powerlessness at an individual level, how they engage in class-based micro-aggressions or individual level classism, 'and how they respond to and incorporate societal level and structural inequalities, entitlements and privileges.' The aim of this approach is to

comprehend and conceptualise power as an 'intricate network of relationships rather than a binary system of power' (Liu 2011:20).

Theoretically and practically useful for the therapist trying to build a class-based practice, oriented as it is to the subjective element of social identities it nevertheless, when taken singularly, presents a partial perspective, and can be misinterpreted as a deficit model of class formed on the basis of middle class normative assumptions utilised as a focus or lens on the working classes *only.* This is equivalent perhaps to, and mirroring the social work gaze (Walkerdine 2007). Underpinning the provision of targeted supportive and remedial services to those at the sharp end of class-based inequality (for example Sure Start) they address issues associated with poverty, low income, long working hours, 'dysfunctional' families, and powerlessness.  This is 'not wrong per se but they side step structural aspects and sequella of social class stratification' (Smith 2010:7).  As a consequence, the relational aspects of class, where therapist and client both occupy a place within the class structure and have differentiated access to power and resources, is not addressed, with a resulting impact on transferrential issues.

## Summary

Class is a difficult concept and, as such, related discourses have taken time to acknowledge it as a fundamental phenomenon within therapeutic practice.  That is beginning to change.  Social theory and theories can provide a useful starting point for any conceptualisation but the very different

disciplines of sociology and psychology have in the past proved a brake to further developing the concepts.  Individualised therapeutic processes, practices and theory in particular have provided a 'cover' for the silence around class, and the common difficulty of talking, thinking and considering class.

The following chapters explore in more depth the issues raised here with the primary purpose of constructing a theoretical position useful to therapeutic interventions. Chapter 2 presents a discussion of class as structured social and economic inequality, considering foremost what it is, whether it exists, and arguing that we are not all classless nowadays.  Included is an exposition of how class differentiation is structurally evident and becomes visible through empirical research. The next two chapters engage with the two different sociological perspectives on class, that of a relational concept, and class as a subjective construction maintained through every day practices.  All three are considered with a view to informing therapeutic theory and practice.

Following Crompton (2008) the three strands of analysis offered are predicated on a notion that a full explanation of class cannot be situated in any one theoretical proposition.  In addition, it is argued that the three paradigms represent different conceptualisations and therefore with different theoretical and philosophical roots cannot be integrated into an overall grand theory about class.  Instead, each paradigm, used or held together alongside one another as separate strands, illuminates different aspects of

class, reflecting its complexity, class as an objective reality; class conceptualised in relationship to the means of production; and class constructed and maintained institutionally and individually in everyday interactions.

# Chapter 2
## CLASS AS STRUCTURED SOCIAL AND ECONOMIC INEQUALITY

### Introduction: defining class

There are many different meanings attached to the concept of 'class', so much so that 'conceptual dizziness' becomes an occupational hazard of the class theorist (Sayer 2005:72).  Liu (2011:18) identifies 400 terms in the psychology literature used to denote class, socioeconomic status or social status and suggests that with no clear definition in the literature, class is poorly operationalized in the helping professions. Income, wealth, education, occupation level, occupational prestige, access to power and resources are all cited as variants on the theme of class. Crompton (2008:16) adds from the sociological literature, rankings of lifestyles or social prestige, patterns of material inequalities, as well as revolutionary or conservative social forces, but also notes that the lack of clarity about class or defining it in much contemporary discourse is further complicated by the 'paradigm wars' of the late 20th century and the concomitant pace of social and economic change.

Ostensibly the paradigm wars in social theorising are over. Undermined by both post-modernist theorising with its move away from grand narratives, and the contributions of feminist analysis, few now argue exclusively for standpoint epistemologies situated in the oppositional binary divisions of fact versus value, agency versus structure, culture versus economy, or social versus economic. These binary divisions do, however, continue to structure

thought and practice, and effectively, there is continuing division in research between the qualitative versus quantitative, and positivist versus interpretative, models of inquiry (Crompton 2008). The research paradigms aside, the dominant emerging theme in class definition, from both social and psychological theorists, is that, as a complex multifaceted phenomenon, one single definition of class is inadequate to the task of explanation. Furthermore, reductive analyses prioritising one notion of class above others as *the* correct form of analysis, or arguing for a synthesis between erstwhile competing analyses, rather than clarifying, creates confusion – there is not, nor can there be, one correct use of the term (Crompton 2008; Liu 2011; Sayer 2005; Smith 2011). Different concepts of class serve different analytic purposes related to 'the intention of the theory or research being carried out'. The question that needs to be asked is 'what is the clinician or researcher interested in, in the clients or participants' and to answer this, the most appropriate class concept should be applied (Liu 2011:18).

> "…noting the different referents and explanatory ambitions of different concepts of class can reduce [conceptual confusion] it. This implies that not all concepts of class need be mutually exclusive. Thus a Marxist concept of class is certainly different from Bourdieu's concept of class, but they refer to different aspects of the social world and are used for different, but possibly compatible explanatory purposes." (Sayer 2005:72)

The research intention, the purpose of the research study defines the specific terms. For example Marx's concept of class is selective in that it focuses on a singular aspect of the social world – that is relations between classes in the process of production in capitalist economies, and the effect this has on those involved. Although his analysis abstracts from co-existing

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aspects of the social world for example gender, inequality, skills levels, or status, it makes no reference to or judgment on the variation and differentiation associated with these aspects.  In other words, his analytic purpose is one thing – the class dynamic as a driver in capitalist economies – so purposively his analysis excludes all others. Conversely, a Bourdieuan perspective, for instance, and most recently for the helping professions, in the work of Liu (2011), focuses on the meanings and negotiations of individuals in their experience of class.  This is an important point of paradigmatic differentiation as, frequently, criticism of any one concept is predicated on the notion of inclusivity - that any theory should be all encompassing and be able to account for all abstractions. For example, 'the Marxist concept of class is routinely thrown out because it fails to do what it wasn't intended to do' (Sayer 2005:73).  It follows then that as a singular theoretical analytic tool the latter should not be expected to predict life chances or comment on life styles as this is not the original project. For prediction of life chances or inequalities, it is perhaps necessary to turn to class as conceptualised within theories of social stratification; similarly, for an analysis of 'cultural capital'- to Bourdieu.  Each commentator has a specific conceptualisation of class relative to his or her intention.  These may intersect and owe much to one another, as they also intersect with other social divisions such as race, ethnicity, gender, sexual orientation and ability (Smith 2010). But nevertheless for the purposes of analysis, structure and agency, or economic or cultural explanations of class, do not need to be either prioritised one over another, or represent the binaries theoretically combined. Inequalities have complex origins, it is therefore perfectly

possible that particular circumstances and cases might be primarily explained by agency *or* structure, economy *or* culture (Crompton 2008).

This is essentially a pluralist, even pragmatic, approach to the study of class but notably different from post-modern/structuralist theorising in that what is not argued for is a form of relativism that posits all approaches and topics as equally valid, with no distinction made between them. It is more a recognition that different approaches and concepts provide answers to different questions - about social stratification, or the dynamics of class in capitalism, or subjective, phenomenological considerations about how individual actors interpret, negotiate and reproduce class in their lives (Crompton 2008; Liu 2011).

Empirically intertwined, nevertheless, for research purposes the latter can be individually identified as belonging to three different overarching paradigms, utilised, as stated, for different projects of equal value - for Crompton this exemplifies what she refers to as 'analytic dualism'. Each analytic paradigm illuminates different but overlapping aspects of class, either, the economic and cultural structures and processes of class, or the production and reproduction of class-based inequalities (Crompton 2008:113).

Whilst it is not possible to identify any one agreed use of the terms, at the risk of over simplification, it is possible to discern that the three overarching concepts of class, whilst owing much to one another, especially the first two,

can be separated out for analytic purposes into: 1. Class as structured social and economic inequality; 2. Class as a relational concept; 3. Class as culture and lifestyle.  No one analytic strategy has primacy over the others as each contributes to the complex picture of the phenomena of class in helping relationships. Each, however, needs to acknowledge the others.

What is not included here is the commonsense, lay conception of class implicit in general everyday usage, rather than sociological discourse. Though common uses of the term may inform some aspects of academic conceptualisation, their provenance problematises their usefulness to this context. 'Conceptually inconsistent' and without empirical corroboration, class in its everyday usage is 'typically unexamined,' it is widely deployed in changing social and economic contexts, and is used differently within these contexts. As a result its 'meaning tends to shift without this being noticed.' Nonetheless, the literature reveals some objections to academic conceptualisations on the grounds that they do not correspond with lay senses of class, 'as if lay senses were authoritative' (Sayer 2005:75). Crompton (2008) concurs with.  Furthermore, somewhat differently but nevertheless importantly, Bourdieu (1984:472) rejects the notion proposed by class deniers, that studies demonstrating research respondents' definitions of their own class position as self contradictory, is nothing other than 'people's image of classification as a function of their position in it.' Following these commentators, lay senses of the term are not included in the theorising.

## Class as structured social and economic inequality

As an analytic category, class as structured social and economic inequality represents the approach taken by class and stratification theorists. Constructed on positivist terms, it was proffered as a challenge to the functionalist, consensus theories of the 1950's and '60s and is also associated with the industrial society theses (see for instance Giddens 1982; Goldthorpe 1967).  As an analytic tool the roots of stratification are sometimes linked with structuralist Marxism (e.g. Althusser 1976b), as opposed to the humanist-oriented Marxist accounts (e.g. Gramsci, see Greaves 2009). But this is not necessarily so. A good example of the breadth of analysis this approach covers is evident in the construction of the Registrar General's scale in the early 20th Century.  Stevenson, the Registrar General in question (Crompton 2008) divided occupations up on the basis of unequal rewards similar to the scale in use today.  However, this took place not as an effective tool for measuring a Marxist, Weberian or functionalist approach but in argument with the eugenicists of the early part of the century. Stevenson did not share the same concerns or premises of these theorists and so unsurprisingly his scale does not translate comfortably to any other occupational scale (Crompton 2008).

As a conflict perspective, class conceptualised as structured social and economic inequality offered a counterpoint to the functionalist consensus by providing empirical evidence of structural inequalities from, largely, occupational measures.  Over time, the latter have demonstrated the persistence of inequalities, and although the occupations and categories

may have changed, for example, the decline in geographically based employment communities, or the introduction of 'flexible' working hours, or the end of long-term career predictability, or the shift in gender and work, there has nonetheless, been little change to the fundamental correlations. For instance, individuals in professional and managerial occupations continue to earn more money, have greater 'cultural capital', live in better housing, have higher levels of qualifications, go to University, have greater life expectancy and are much less likely to have limiting long-term illness (Crompton 2008; Ferguson 2008; Smith 2010; Olin -Wright 2008;). Though the numbers and gender differentials may have altered, the outcomes for these groupings remain largely the same.

The data is gathered, for instance, from the national census or from data using the Office of National Statistics Socio-Economic Classification (ONS-SEC), or other scales, such as deployed by Olin-Wright (2008). Although many stratification scales do not necessarily correspond and indeed some conflict with one another, or like Olin-Wright's, present a wholly different concept of stratification based on complex structures, there is some considerable convergence, offering empirical measurement of similar phenomena with a high rate of correlation. Consequently they provide highly valid 'indicators of patterns of material advantage and disadvantage' …'widely used in social policy, market and advertising research.' (Crompton 2008:72). Wright exemplifies this approach to class when he writes…

> "Classes are more than statistical aggregates or taxonomic categories. They are real features of social structure reflected in

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observable patterns of inequality, association and distance…So deep and fundamental are these cleavages that they form the principal and enduring bases for conflict and contestation." (Olin-Wright 2008:31)

As stated, there are different measures in use.  Nevertheless, what they share in common is in all probability stronger than their differences. Drawing on the commentators, commonalities summarised include:

1. A theory of class, predicated on the notion that class based inequalities exist independently, 'out there', and can be empirically measured;

2. The assumption that as an explanatory concept, class is relevant both to macro level analyses of social systems as well as micro level analyses of individual lives;

3. The assumption that issues associated with measurable inequalities and their causes can be addressed through policy;

4. The assumption that descriptive class indices continue to demonstrate the persisting structure of inequality in contemporary societies;

5. Some agreement that arguments over different measures of class have ended but agreement also that just because the disputes have ended, this is no justification for not using these measures;

6. The assumption that while employment as a significant determinant of social identity has possibly diminished for some classes, work is still the primary determinant of the material well being of the majority of the population;

7. The assumption that linking of groups to 'economically relevant assets' is consequential in various ways;

8. The assumption that the economically dominant 'ruling class' holds

considerable influence, crucial to political and social life;

9. The assumption that class so defined affects political preferences,

lifestyle choices, child-rearing practices, opportunities for physical

and mental health, access to educational opportunity, patterns of

marriage, occupational inheritance, income and so on.  (Crompton

2008; Ferguson 2008; Smith 2010; Olin-Wright 2008: 26).

Structural forms of inquiry, and empirical measurements of class

inequalities, are important to psychological and therapeutic endeavours of

any ilk as the evidence demonstrates that there is either a proven positive or

a negative impact on human flourishing, and decreased or increased

suffering, according to class position.

Utilising structural means of class measurement, Smith (2010:19), borrowing

from Olin-Wright (2005), proposes a scale which incorporates elements of

the relational approach to class to be discussed in detail in chapter 3.

Useful to the helping professions this 'scale' is not occupation-specific but

provides a useful, accessible approach and importantly is fully inclusive,

accounting for those in poverty, and at the other end of the scale, those that

do not need to work more usually excluded, by definition, from purely

occupational scales.  To borrow from Smith (2010:19), her scale

incorporates:

1. A definition of those in poverty as working class people who,

because of unemployment, low-wage jobs, health problems or other

crises are without enough income to support their families' basic
needs;

2. The working class or classes as defined as people who have little
power or authority over the availability or content of jobs and little say
in the decisions that affect their access to health-care, education and
housing.  They have lower levels of income, net worth and formal
education than more powerful classes;

3. The middle classes include professionals, managers, and small
business owners.  They are more often than not educated to degree
level and salaried.  These groups have more autonomy and control in
the workplace than the working class, and more economic security.
Nevertheless, they rely on their earnings to support themselves;

4. The owning classes comprise people who own enough wealth and
property that they do not need to work to support themselves - they
may choose to work but have independent means of financial
support. This group control the resources by which other people earn
a living.  They also have significant social cultural and political power
relative to other classes.


Smith's (ibid) and Olin-Wright's (2005) notion of structural class definition is
particularly important as it includes poverty as part of the structure of
society, at the bottom of the social hierarchy. Structurally defined, poverty is
more than just a lack of money. It is also positionally associated with a total
lack of socio-economic power, privilege and advantage. This is a challenge
to the idea that poverty is a cultural phenomenon (Lewis 1998), or down to

individual lack of effort, as in neo liberal and libertarian accounts such as Murray's 'underclass' thesis (Murray and Philips 2001; Murray 1990). Empirical evidence clearly demonstrates that poverty, normally measured on the basis of below half the national average income (see World Health Organisation (WHO); Child Poverty Action Group (CPAG),) is something that individuals and families experience intermittently at key periods in their lives, but also particularly in periods of high unemployment associated with economic downturns (Crompton 2008; Alcock 2006;), in the early years of family life when one income may be reduced (CPAG) and in older age, on retirement without employer or private pensions. Clearly, poverty in these terms is related to low pay and low pay is associated with working class employment.  The '…working class are a pay check away from poverty' (Smith 2010:21).  But, if treated discursively, as an 'underclass' (Murray 1990), separated out from the socioeconomic norms of society, this naming promotes a '…disassociation that helps to perpetuate poverty'(Smith 2010:21).  The underclass thesis also discursively promotes the idea that the 'poor are disadvantaged *as a result of* their supposed cultural deficiencies' (Bottero 2009:7).  Furthermore, this position can be linked to neo-liberal agendas following functionalist arguments that support a stratified society positing inequality and poverty as essential to the running of society.  The meritocratic argument that the 'best' get to the top follows, and fundamental to this is the equal opportunities agenda, policy and legislation.

Latterly, structural theorists have given recognition to significant non class-based inequalities such as gender, and 'race' arguing that class primacy is not essential to acceptance of a class analysis (Crompton 2008).

Class as conceptualised as structural social and economic inequality, underpins the analysis in the following sub-section discussing the case for 'class' through the empirical evidence.  In wider terms this conceptualisation is limited in its use and application to counselling and therapy.  Primarily it informs the allocation of resources, identifying who may be affected structurally, ensuring access to resources such as therapy, or promoting an understanding of the material effects of poverty on the individual and their families, and the distress and ill health this can cause. However, arguably two of the most important insights that this conceptualisation delivers are: a) That the empirical evidence presents a challenge to commonly held perceptions of those living in poverty which knowingly or unknowingly, are held for political reasons, often gleaned through information in the popular press. The evidence challenges the unconscious generalised assumptions supporting this discourse.  It demonstrates that contrary to certain popular opinion, class matters. b) That this conceptualisation demonstrates that class is imbued with power or powerlessness depending on position in the hierarchy.  Given that power is frequently an issue in therapy, knowing this is an alert to the potential transference and counter-transferences that may arise even though it does not indicate what the transference may be.

"The problem of poverty manifests itself in the lives of persons and families as an enforced lack of basic material power to live as one

wants or as reasoned fear that one might fall into that situation.  It is to live under the dictatorship of material necessity without choice and control in one's daily life.  That's what poverty is, it's about freedom and power and the lack thereof."(Stein Ringes 2009 cited Smith 2010:20).

The damaging effects of oppression can be unwittingly reproduced in the therapeutic relationship if no account is taken of the social world.

One further strength structural analyses proffer is the way they allow for comparative analysis by social or reference group membership, other than class, for instance race or gender, or even within a class.

To reiterate:  this study conceptualises 'class' differently according to specific analytic purposes.  The following section, making a case for class, draws on the research evidence to demonstrate the effects of class-based, differentiated access to wealth, resources and health outcomes, and is thus using class as a social and economic source of measurement of inequality.

## The case for 'class':  empirical support

The explanatory value of a class analysis has been severely challenged over the last thirty years.  During this period, industrialised Western societies have witnessed changes to affective political ideology, evidenced in the move from a largely consensus form of Keynsian post war politics, to an increasingly hegemonic form of neo-liberalism.  This change has contributed to and taken place within the context of continuing growth of globalised institutions and economies.  Paralleling, and intertwined with this have been

changes to the workforce such as the move from heavy industry, to service and electronic sectors, accompanied by changes to the composition of the workforce as the number of women, in general, and the percentage of mothers, in particular, increased from 56% in 1971 to 70% in 2008 (ONS 2008).

For the best part of the 20th century, health, social and economic inequalities decreased, but in the 1980s with the onset of neo-liberal social and economic policies, and the demise of heavy industry providing 'good' jobs for the working class men, this trajectory stalled and inequality grew again. During the 1997 New Labour term in office, the increase slowed, but the underlying trend remained the same with greater rigidity in the class structure leading to a well documented and marked decline in social mobility, typified by a reduction in opportunities for the less well qualified to work their way up organisations (Crompton 2008). This is not to argue that there is a simple cause and effect between neo-liberalism and inequality, but to suggest that its premise of three key principles - methodological individualism, human rationality (the pursuit of self interest), and market supremacy - exacerbate inequalities with the rich becoming richer and the poor becoming poorer ( Ferguson et al 2002; Pratt 2005, in Lavalette and Pratt ( 2005).

One of the most commonly voiced positions, repeated for at least half a century and is that we are all classless nowadays (Hoggart 1995). The thrust of all discourse, including that of sociology, has been that class

remains relevant in as much as it is a *cultural* entity, but it does not constitute *the* defining social structure of modern capitalist societies and is therefore impotent as an analytic tool. Indeed, in the 1990s, commentators were suggesting the 'death of class' and that class analysts 'manufacture class where it no longer exists as a meaningful social entity' (Pakulski and Water 1996 in Olin-Wright 2008). Similar positions were voiced by the dominant political orientation of the era, neo liberalism, which posits class as a 'fictional category' existing in the imagination of 'socialists and crypto-communists' (Harvey 2005:202).

The prevailing direction in analytic discourse, has been such that it has become important to consider this argument: The counter proposal is most clearly articulated by Crompton (2008), Ferguson (2008) and Goldthorpe and Knight (2004:1), who make the case that empirical evidence serves to undermine recent arguments claiming the decline, or even death of class in the context of 'post-modern' societies of the 'global era' and that the evidence for this is widespread. Analytically situated within a structural/economic account of class, the statistical evidence largely associated with either, income and inequality, or health, both demonstrates the need for, and supports a continuation of structural analysis, and provides the evidence that class materially exists.

In 1997, the Labour government inherited levels of poverty and inequality unprecedented in post war Britain (Hills and Stewart 2005). In 1979 when Thatcher came to power 1 in 8 children were living in relative poverty. This

had risen to 1 in 4 by the end of the Conservative government term in office in 1997 (CPAG 2011). Over the same period, pensioner poverty was running at 21% and income inequality grew. In 1979 the income of the top 10% of earners was five times that of the lowest paid.  By 1990, that rate had doubled with the richest earning ten times that of the poorest (Hills and Stewart 2005).

During this period, the Conservative government claimed that workers had priced themselves out of the market and following neo-liberal ideology, instituted policies such as privatisation of the public sector, removing rights, for instance the Employment Protection Act, removing the minimum wage, and the removal of wage councils.  Erstwhile public sector employees were re-employed on lower wages by private sector organizations replacing certain public services.  Concurrently, wage and salary controls were removed, allowing massive increases in pay to high earners.  By 1986 the changes to pay for high earners coupled with deregulation of the financial sector, had resulted in the wages of the most highly paid increasing by more than 50%.  Consequently the poor became poorer by £520.00 per annum but the rich became richer by more than £12,000 per annum.  Overall, between 1979 and 1995 the incomes of the richest top 10% grew by over 60% and the incomes of the poorest 10% fell by 10% (Crompton 2008). The growth in income inequality in Britain was exceptional in Europe and internationally.  Such growth in income inequality was only paralleled by the US which shares with the UK a similarly ideologically oriented political system that of neo-liberalism (Ferguson 2008).

Whilst publicly promoting the notion of 'classlessness', government policies over this period, were constructed to improve the performance of differentially affected groups or 'classes' of the population in materially distinct ways (Crompton 2008). Evidentially, it is clear that either income enhancement or income reduction over this period was dependent on individual positioning in a stratified employment market - in other words social class position.

At the same time that government policies were differentially affecting the employed according to employment status, there was a substantial reduction in the long term 'institutional filters' of 'class' such as the welfare state and opportunities for collective bargaining.  This disproportionately affected the lower paid.  Adding to this potent mix, financial deregulation and the sale of state owned utilities provided immense income opportunities to a wholly different group or 'class' within society (Crompton 2008).

Furthermore, 'class' differences were and are, not only empirically associated with income inequality, but also with inequalities in health. The recent Marmot review (2010) makes it clear at the outset that:-

> "People with higher socioeconomic position in society have a greater array of life chances and more opportunities to lead a flourishing life. They also have better health. The two are linked: the more favoured people are, socially and economically, the better their health. This link between social conditions and health is not a footnote to the 'real' concerns with health – health care and unhealthy behaviours – it should become the main focus."

With a current mortality rate of 400 rising to 700 (in the North East) per 100,000 in the lowest socio economic group, compared to the highest socio-economic groups, of 200 per 100,000; a life expectancy of 78 years in the most deprived groups compared with 83 years in the least deprived socio-economic groups, and a disability-free life expectancy (DFLE) of 53 compared to 70 years respectively, it is clear that socio-economic position, that is to say, 'class' position has a considerable bearing on health and life expectancy (Marmot 2010). Furthermore, Marmot's findings indicate that educational opportunities and outcomes affect health: Graduates have better health and longer lives than those without a degree and those with no qualifications are the worst affected. Limiting illness rates for people with no qualifications are double those with degrees and

> "For people aged 30 and above, if everyone without a degree had their death rate reduced to that of people with degrees, there would be 202,000 fewer premature deaths each year." (Marmot 2010)

Marmot follows a tradition of reports stretching back to the Black report of the 1970s, followed by the Acheson report of the 1990s, both demonstrating a correlation between social class position and health (Ferguson 2008). The growth of class-based inequalities in Britain since the 1980's have caused many commentators to register concern. For instance the change to morbidity and mortality rates is commented on, amongst others, by Blackburn (1991), Scrambler and Higgs (1999) and Ferguson (2002), who by citing empirical evidence, demonstrate that the working classes are more likely to suffer ill-health and die younger than other classes, with those in the lowest socio-economic group attracting the worst outcomes. The perinatal

mortality rate is also demonstrably higher in the working classes (Blackburn 1991; CPAG 2011).

Other evidence cited as supporting the existence of class and class differentials are: the working classes are more likely to live in poverty at certain periods of their life, (Blackburn 1991; Oppenheim and Harker 1996 in Ferguson 2002); they have lower educational achievement: (Adonis and Pollard 1998; Lavalette 2011); they are more likely to be the victims of crime: (Goldson 2000 in Ferguson 2002); and be victims of domestic violence and sexual abuse: (Corby 2006). More recently the Sutton Trust (2007) found that social mobility in the UK is the worst in Europe and was in significant decline, and UNICEF (2007) stated that UK children suffer from the greatest deprivation than any other wealthy country in the world, adding that they suffer from the worst parent-child relationships, greater risks from alcohol, drugs, and unsafe sex. The 2011 Organisation for Economic Co-operation and Development (OECD) report states that the average income of the richest 10% in the UK is now almost 12 times that of the bottom decile compared with 1985 when it was 8 times. This is above the EU average and the highest of all OECD countries. The report goes on to say that there is nothing inevitable about growing inequality, highlighting that it is a consequence of the policies of less distributive tax benefits, changing work demographics and the doubling of the share of income of the top 1%.

Olin-Wright (2008:33-34) in challenging the 'death of class thesis', examines 'the extent to which the lives of individuals move across different kinds of

social boundaries' in this case the 'permeability ' of class boundaries in capitalist societies namely US, Canada, Sweden and Norway. Exploring permeability in terms of life events such as friendships, marriage, mobility and memberships of organizations, he uses property, authority, and expertise or skills as his three indicators and divides the boundary crossing events within in each, respectively, into employers, self-employed, and employees; managers, supervisors and employees; and professionals, skilled, and non-skilled employees. Empirically identifying the 'odds of permeability' of events, for example the friendships between employers and employees, he found that: the property boundary is the least permeable boundary, followed by expertise and skills, and last, authority.

> "The odds of mobility between a working class location (ie non-managerial, non-skilled, employee) and an employer location is about 25% of what it would be if the link between these two locations was random; the odds of a close personal friendship between these two locations is about 20% of what it would be if these events were random; and the odds of a two earner household containing an employer married to a worker are about 10% of the random association." (Ibid)

Conversely, he found that 'events' between the self-employed and employees, were three to six times more permeable than those between employers and employees. Across all four participating nationalities the evidence was the same.  Liu (2011) analyzing class from a different perspective, more akin to the 'cultural turn' in sociology, similarly found that class borders are deeply entrenched.

It is accepted that the picture of, or the reasons for, the growth in inequalities are complex.  For instance, inequalities at a household level have been

exacerbated by the increase of women into the labour market.  Well

qualified women tend to partner well qualified men and similarly, women

with little or few qualifications set up partnerships with men who have few or

any qualifications.  Thus the numbers of two high earning income

households has increased, whilst the low earning households have

remained static, consequently widening the gap between high and low

earning households. (Crompton 2008; Liu 2011).  In addition, family

breakdown and thus the increase in single parent families, contributes to the

increase in numbers of low income households. Nevertheless, the evidence

that class exists in the form of objective, structural inequality is

overwhelming.


## Summary

As a contested position 'class' *may* have possibly declined in importance as

'a significant source of social identity' but there is little doubt that class

divisions are persistent and exist as a reality in terms of health,

opportunities, education and income and that work remains the 'single most

significant determinant' affecting such outcomes for the majority of people

(Crompton 2008:23).


Based on the empirical evidence, the continuing practical relevance of class

can be simply reasserted in the face of all criticism. However, 'class' as a

'political organizing principle' or a notion central to concommitant discourse,

has lost its importance in contemporary political and social theory, a

situation that at best is unhelpful and at worst presents a form of quietism

where challenges to class-based inequality are discouraged and rare (Crompton 2008; Liu 2011; Smith 2010). Class as structural inequality is an important adjunct to other forms of class concepts. Important as it is, it is limited to demonstrating consequences of structural differentiation. It does not speak to how class is constructed, constituted and reproduced, nor does it inform what Liu (2011) terms 'classism', the practice and oppression in class relations. It is necessary to consider different theoretical perspectives with a view to identifying aspects of the class dynamic in therapy.

# Chapter 3

## A RELATIONAL CONCEPT OF CLASS

## Introduction

This relational concept of class is predicated on a Marxist analysis. Just as Freud was the founding father of psychotherapy, Marx can be said to be the founding father of a class analysis of society.

These two perspectives have been seen as theoretically exclusive, in part due to Freud's notion that society acts as a control on the individual by repressing individual desires and instincts, in an effort to preserve social order. Accordingly, society takes precedence over individual needs and wants. From this perspective society and the individual are ineluctably opposed. 'Civilisation and its Discontents' (Freud [1930] 2005) provided the initial point of departure for most Freudian-Marxist analysis. Marcuse ([1955] 1998), an example of this strand of theorising, asserts that the sickness of the individual is ultimately caused and sustained by the sickness of his or her civilisation. Analyses following this tradition tend to lead to an inevitable struggle with the irreducible opposition between the individual and society, resulting in a form of individualism that presupposes that

> "At some point when unnecessary shackles have been removed from
> the individual her or his basic humanity can pour forth in happy
> fulfilment." (Frosh 1999:156)

This image of a hedonistic utopia present in Marcuse ([1955] 1998) and Reich (1942 in Frosh 1999) departs considerably from Marx's emphasis on the material world.

Structuralist Marxists, such as Althusser (1976b), rather than concentrating on Freud's theory of feelings, have used his theory as a method of inquiry in itself (Rustin 1991).  By prioritising forms and methods of thought over relationships, or rather perceiving the latter through the conscious and unconscious meanings ascribed to them, these interpretations of Marx and Freud appear to be 'plagued by an inability to retain the tension between the individual and society, psychology and political economy' consequently collapsing discursively into either the social or the individual (Frosh 1999:156).  Moreover, whilst providing useful insights and methods for analysing the social world, they do not provide analytic structures appropriate to analyses of the therapeutic relationship as this was not their intention.

Marx's materialist analysis of class is not a prominent, if at all evident, feature of the fore-mentioned early Freudian-Marxist discourse.  Although the notion of structural inequality informs these works, the focus lies elsewhere.  Given that Marx's theory of historical materialism (see below) with its consequent dynamics of class is the defining component of his critique, this departure betrays a lack of appreciation of the processes of historical materialism, and is rather like psychoanalysis without the unconscious.  Although not always acknowledged in social theory, historical

materialism is the *a priori* factor on which theory and practice are built.

Marxist (as opposed to Marx's) analyses that bypass this aspect or render it

invisible within theorising lose the ongoing dialectical, dynamic and human

aspect of his work.  Fundamental to Marx's own works is the relatedness of

human beings, one to another, between groups and in the production of

social and economic life. Thus Marx's analysis is premised on the notion of

humans as essentially social beings.

Leonard (1984) in recognising this element in Marx, proposes a materialist

analysis for the development of personality. He criticises Freudians for

positing human nature as ahistorical, based on analyses of 'the supposed

relative autonomy of ideology' that 'fails to reveal the interconnections

between mental representations and actual economic practices'(Leonard

1984:55-56).  Leonard argues that, as essentially social beings, we connect

to the social world through the two 'interrelated experiences of material

relations, and of ideology'

> "The individual's material activities and exchanges at work, in the
> family, in community interactions, with state officials and in many
> other contexts are penetrated by meanings, definitions and 'common
> sense' assumptions which reflect the ideologies through which class,
> gender, ethnic group or other collectivity maintains its internal
> coherence, makes sense of the world and either legitimates its
> dominant position in the social order or validates its resistance to
> domination." (1984:109)

In redressing the balance in Freudian thought, Leonard focuses on Marx's

theories of alienation and labour, and the impact of the consequent

ideologies.  As a result, there is a tendency in his work towards structural

determinism at the expense of providing an account of the internal dynamics associated with a materialist understanding of the individual, and the relational quality of class.  Nevertheless, he provides a cogent argument as to why social structures matter.

The more humanistic elements in Marx have often been dismissed by those furthering the cause of a structural analysis, as being either the early or the immature Marx.  In creating this division, those so inclined are able to ignore the humanist aspects of his work.  However, more recent studies demonstrate that there is no epistemological break between the younger and older Marx, that Marx was writing the '1844 Manuscripts' and 'The German Ideology' alongside his other more structural works (for instance Ferguson *et al* 2002; McLellen 1979).  A reading of Marx, which incorporates human action and actors, is consistent with his original work.  It is the humanist, materialist analysis of Marx that is relevant to the relational conceptualisation of class presented here.

## Marx, historical materialism, and class relationships

Marx proposed that, to satisfy basic human need for food, drink, shelter, warmth, and so on, humans enter into social and economic relationships with others. In so doing, humans acting on and in the world, create the world.  They do this in both a material sense - the homes and shelters they build, the food they grow and eat; and in a social and economic sense - the relationships they enter into to further these needs and the social structures they build to support them.  Historically, these processes produced simple

societies and structures that gradually became more and more complex, as the social and economic relationships that individuals entered into to meet their needs, in turn, re-created them. Within this view of the world, social relations are not static, not a given, or essentialist in nature, but dynamic. They change with changed circumstances. Thus human action in the world at any one time creates particular forms of social and political organization, ways of thinking about and acting in the world. This has both positive and negative consequences. It may provide for human physical needs, but in so doing, it has produced and continues to produce, structures based on inequality and oppression, the roots of which are now deeply embedded in society. As the roots of these constructions have become part of history and disappeared from view, the structures or oppressive practices they involve have become naturalised, for instance the acceptance of hierarchy as natural, or gender relationships and roles as defined by biology (see for example Delphy 1984; Hartsock 1983). For Marx, historical materialism, that is, the economic relationship of human beings one to another, acting on the world to produce their means of living, is *the* fundamental relationship, as it gave rise to all other economic, political and social forms. Being human is to be social and thus by definition through historical processes, humans are linked to one another within the social and economic order.

Gradually, as some individuals accumulated land and wealth and through the processes of feudalism, they became the 'owners of the means of production'. This signified that they owned the ability to control the creation of the goods that others needed, such as food, shelter, and clothing. The

social and political institutions that were created enabled certain groups,

normally the most powerful, to further their own interests. This group, Marx

termed the bourgeoisie.  The rest of society became increasingly landless,

in part due to the enaction of laws that made it difficult to retain land, and in

part due to the processes associated with industrialisation and the move

from independent artisanal employment to large scale factory production.

Landless, and without the means to produce food or goods, or to create an

income by their own efforts, formerly independent workers became

dependent on the sale of their labour to the employer class, that is, the

bourgeoisie.


The sale of labour by one class to another class creates a particular

dynamic between the two classes:  As capitalism developed out of

feudalism, it added the imperative of the profit motif and 'surplus value' to an

already precarious relationship.  With fixed costs for raw materials and

overheads, the only way for the bourgeoisie to increase profits was to cut

the cost of labour and pay the lowest wages possible.  In effect this became

the 'pauperisation of the landless poor' producing a situation of two classes

in society, who were inextricably linked with one another through their

economic relationship, but with diametrically opposed, needs. (1844/1981;

1845/1985; McLellan 1979). This dynamic with its historical antecedents

hidden from view, continues within contemporary society.  Just as the

owners of the means of production in the past needed to keep wages low to

ensure profits were high, this remains and an active component in the

dynamics of economic relationships, today.  Employees are still dependent

on the employer for work and pay.  Employers still need to extract surplus

value from their employees. This relational process can be thematically

traced not least in Marx's own writings.  Although he clearly saw actual

society as 'composed of a multiplicity of classes' (Crompton 2008:29), the

thrust of his proposition is that the dynamic driver of capitalism rests on the

relationship, one to another, of his two identified and prioritised classes.

Marx discusses a number of different class distinctions but collapses the

driver of capitalism into the dynamic opposition of the two categories of the

proletariat, those who have to sell their labour, and the bourgeoisie, those

who buy and make a profit from the labour of others. As Crompton (2008:11)

notes

> "For Marx, state power was inseparable from economic power, and the 'sovereign individual' of capitalism was but a necessary condition of the development of the capitalist mode of production."

For Marx, and Marxists, class is relational.  There cannot be one class

without another.  In his seminal text *'The Making of the English Working

Class'* E.P.Thompson expresses this succinctly:

> "By class I understand a historical phenomenon, unifying a number of disparate and seemingly unconnected events, both in the raw material of experience and in consciousness.  I emphasise that it is a *historical* phenomenon.  I do not see class as a 'structure' nor even a 'category' but as something, which in fact happens (and can be shown to have happened) in human relationships. More than this, the notion of class entails the notion of historical relationship.  Like any other relationship, it is a fluency, which evades analysis if we attempt to stop it dead at any given moment and anatomise its structure.  The finest meshed sociological net cannot give us a pure specimen of class, any more than it can give us one of deference or of love.  The relationship must always be embodied in real people and in a real context.  Moreover, we cannot have two distinct classes, each with an

> independent being, and then bring them *into* relationship with each other.  We cannot have love without lovers, nor deference without squires and labourers."  (Thompson 1968:9)

The point here made is that class, conceptualised as a product of historical materialism, is not in Marx's definition, or E.P. Thompson's reading of it, a static entity. Nor is it something that is independent living 'out there'. Like love it is something that happens between two people and thus between two groups. Defining class in this way is quite different to those structural approaches that focus on occupational measures, income, work, outcomes of class stratification, inequality useful to empirical research (see chapter 2) and further, is markedly different to the Weberian (1968) concept of class as status and social prestige.

Weberians reject the notion 'that class maybe more than the sum of its parts' or that 'classes are independent entities in any sense'. The latter can be summed up as a 'positional' approach to class and is most strongly associated with ideas of *social* class (Lee and Turner 1996:9).  Classes are, in the first instance, simply empirically identifiable groupings of individuals who have certain analytically significant situations in common, such as their possession of property or a highly paid skill.  This maybe an oversimplification of Weber but nevertheless it suggests a considerable difference between his and an historical materialist, relational approach.

An account of class within therapeutic practice, using Weberian and certain other structural notions, leads to an emphasis on class as associated with individual class position, equal opportunities, action and meaning, rather

than the inter-dependent, relational quality present in the Marxist account of class. As a consequence, although the Weberian class analysis provides a useful means of understanding class differences, access to resources, services and so on, and often underpins empirical research, it does not provide the premise by which we are able to account for the social within the internal world of the individual or within the transference communications within the therapeutic dyad, as it does not posit class as embodied within a specific relationship.

The relational approach to class suggests a fluency that embraces the therapist's world view and identity, as well as the client's.  In practical terms, this means that the symbolic or actual class of the therapist and client will become visible in the transference and power relationship.

This is the singular contribution of conceptualising class thus.  The other concepts of class discussed in this study may obscure the relational quality of class, by either emphasising the hierarchical structure, or focusing on the cultural components of one class without the other/s (see chapter 4). For instance, if the therapist sees the effects of poverty or unemployment as part of the client's difficulties and something solely for the client to address, perhaps with support, but without recourse to the class role of the therapist, expressed symbolically in the transference, then this results in therapists having individualist ideas about working class clients that either hold to a deficit model of the client, and/or the pathologising of difference.  The client either does not measure up in some way to middle class norms, for instance

of behaviour or dress, or their family relationships do not correspond with conservative theoretical propositions about family functioning present in psychological theories, or their 'issues' become pathologised, a proposition reminiscent of earlier therapeutic interventions in work with other oppressed groups, such as black or gay clients. In addition, failing to provide a relational explanation 'leaves the door open for underclass theories, which seek to blame the poor for their welfare dependency and lack of moral fibre' (Lavalette *et al* 2011:51), or a politics of victim blaming (Cully 2000). Any therapeutic approach which emphasises the pathology of the client, whilst holding the power to make interpretations, and to define that pathology, can be open to accusations of inequality (Tuckwell 2002), and abuse of power (Guggenbuhl-Craig 1999), as well as by-passing the needs for professionals to engage with their client's subjective experience as well as their own (Cully 2000).

Some of these positions are akin to the colour blind approach to racism. To paraphrase Tuckwell (2002:45) writing on racial identity in counselling: by concentrating on universal, cultural, or individual characteristics, such as 'We're all the same', 'I treat each person as an individual', I don't see colour [class], it's irrelevant', counsellors and therapists are able to 'disregard their own uncomfortable feelings and insecurities' about race [class].

By dismissing or ignoring the relational quality of class or 'race' the very real possibility arises that the therapist becomes part of the process of oppression, by, 'the inadvertent repetition of customary power imbalances

and inequitable outcomes' (ibid).  Conversely, by following a relational view of class, any power differential in the dyad becomes visible and therefore something which can be worked with.

## Making a relationship between the inner and outer world

The Marxist account of class, with its view of human individuality as socially constructed, is clearly present in a strand of Freudian thinking.  Although Freud's professed understanding of humans as instinctually driven, with society's role as functioning to repress libidinal impulses, is a deeply conservative conceptualisation (Frosh 1999), there is also within Freud

> "…detailed developmental analysis describing how individuals are built up in layers around internalised social forms, themselves the product of history.  This approach takes as its focal assumption the idea that individuality arises through a process of social construction, for instance, as described by object relations theorists." (Frosh 1999:156)

Frosh questions the validity of building a theory and practice 'which neglects the structuring factors' conditioning and influencing individual relationships that are 'systematically distorted as they are under capitalism and patriarchy'.  He argues that, if these factors are ignored, 'the orders of causality' in the world are reversed, leading to a reductionism of the 'social order as produced by the free behaviours of individuals' (Frosh 1999:267).  In other words when a socio-political, structural account is missing the inevitable consequence is the location of inequality within individual pathology.

Phenomena such as the outcomes of inequality may arise as a *result* of class, but they do not in themselves generate class divisions. As Crompton (1998) suggests, by focusing on the underlying factors that generate class division in the first place, a sense of the nature of class as strongly relational and exploitative rather than a fixed entity, is stressed. Following this line of thought Ferguson et al state

> "In each mode of production it is the dominant class's control over the conditions of production that has been central to the formation of the exploitative relationship on which society is based. These relationships are embedded within the totality of each society or mode of production."(Ferguson et al. 2002:42)

But most importantly, as Frosh makes equally clear, this is also its strength. Although psychoanalytic theory betrays individualistic and conservative tendencies, it also provides for the possibility of analysing the means by which the social world and its meanings, structures and ideologies become part of the lived experience of each individual and in turn reproduce and perpetuate specific ideological practices and forms of oppression. It also provides an explanation of how individuals' social positioning comes to be represented internally.

Rustin (1991) suggests the breakthrough from the crippling antithesis of individual and social in classical psychoanalysis, came with the development of object relations theory, specifically the work of Klein, Fairburn and Winnicott. Frosh (1999) concurs, but considers the work of Lacan, and the feminist psychoanalytic tradition, for instance the work of Mitchell (1975), as

important in developing an heuristic procedure for analysing the social in the individual. In addition, 'Cultural School' theory (Eric Fromm and Karen Horney (1937)) critiques Freud's biologism with some considerable effect. Briefly, the argument centres on the proposition that what Freud saw as biologically determined was in effect culturally conditioned.  However, this proposition is one-dimensional in that, although it speaks of how the cultural in any one society may affect the individual in any one particular way, in culture theory, the dynamic component of the relationship between the inner and outer world, is missing. That is, individuals, although effectively constructed by their society, are also active with others in the construction of their own personality and in the construction of their world.  This is significant in developing an understanding of class from a relational point of view.

Without wishing to exaggerate the differences between Freud and object relations theorists, there is nevertheless considerable divergence in their views of the relationship between the inner and outer worlds. Freud hypothesised that the individual was a separate entity to the social world, a self-contained being, notionally an essentialised identity.  Because of this, the social world is only comprehensible in the terms of the energy it generates into, and out of, the individual.  As a product of biological drives, the individual is posited in opposition to, rather than constituting the social world and therefore can only be controlled or not controlled by it.  He or she can never be seen as socially constructed or constructing the world, either wholly or in part, because the relationship with the outer world is limited to

this oppositional stance.  Even the relationship with the parents or primary caregivers is encapsulated within the inner world, with limited reference to the social milieu within which it is framed.  Guntrip (1973:49), commenting on Freud's instinct theory, notes that biology is the 'machinery of personal life….a study of the mechanisms of behaviour' not to be confused with 'the meaningful personal experience that is the essence of the personal self'.  For Freud and traditional psychoanalysts, relationships are formed with others *only* as a consequence of, and as an outlet for, aggressive and sexual drives.  Within the object relations tradition, relations are *primary,* enacted from birth or even pre-birth, rather than as a consequence of something else.

There is no way to resolve the division between the social and the individual in Freudian theory and this has been the root cause of tensions between social theorists and psychoanalytic theory.  With object relations theory, the position in this respect is somewhat different. In object relations, the dominant feature of human psychology is the need to form relationships with the 'other'. Libido is object-seeking rather than pleasure seeking (Fairburn in Frosh 1999).  The individual is posited as a social being of the first order and although instincts and drives are accounted for, for instance in the acknowledgment of the sex drive as *initially* biological (Guntrip 1973) or in Klein's (1940) emphasis on envy, 'object relations theory embeds each individual in a social context and suggests that there is no way of understanding the one without the other'. There is no individual without the social, no self without the other (Frosh 1999:100).  In other words, the very

fact of being human, being brought into the world by 'another' and cared for by 'others' with whom we relate and construct our object relations as the building blocks of our personality, means that we are essentially social beings.

> "The baby, having incorporated his parents, feels them to be live people inside his body in the concrete way in which deep unconscious phantasies are experienced – they are, in his mind, 'internal' or 'inner' objects, as I have termed them. Thus an inner world is being built up in the child's unconscious mind, corresponding to his actual experiences and the impressions he gains from people and the external world, and yet altered by his own phantasies and impulses." (Klein, 1940:148)

Part of what the baby incorporates within his or her unconscious, is the parents' experience and impressions of the social world, their own internalised feelings, fears, oppressions and power relationships. Accordingly, deeply embedded within our unconscious there lie aspects of the social world as experienced in our primary object relations. These are manifested in our later object relating. A process of 'active striving with external objects in the service of an integrating relational urge' is, according to Frosh (1999:101) how Winnicott (1896-1971) sees the developmental process. Instincts operate secondarily and in support of, rather than as the motivating factor for relationships.

Although the object relations theorists, exemplified by the work of Winnicott (1971) provide the potential link between the inner and outer worlds and how social identities such as race, gender and class may be construed, such analysis was not their project. In effect, the early object relations theorists treat the mother and child dyad as if it were outside society with the

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external world only functioning as an interference, the perfect or natural

scenario being the mother and child 'in no way inherently constituted by it'

(Frosh 1999:117).   Nevertheless, perhaps their work provides the

necessary link with a relational concept of class.  In object relations theory,

humans are essentially social beings. Their first and foremost characteristic

is that of interacting or relating with others. This is an echo of Marx albeit

with a different purpose in mind.  Marx frequently alludes to the 'necessity of

intercourse with other men suggesting that the latter is a specifically human

activity permeated by the social relation of individual to individual:

> "For the animal its relation to others does not exist as a relation.
> Consciousness, is therefore, from the very beginning a social
> product, and remains so as long as men exist at all.' (Marx
> 1845/1985:51)

For Marx, like the object relations theorists, any consideration of the

individual as outside his or her social context is a false abstraction that

denies the social character of being.  In addition, immanent in Marx, is a

sense of the inner world of the individual, for example he writes in the

German Ideology

> "Men are the producers of their conceptions, ideas etc. Real active
> men as they are conditioned by a definite development of their
> productive forces and of the intercourse corresponding to these, up to
> its furthest forms.  Consciousness can never be anything else than
> conscious existence and the existence of men is their actual life
> process." (1845/1985:47)

Clearly for Marx the dynamics of the inner and outer worlds are intimately

related and utterly dependent on one another. Given his concentration on

the outer world rather than the inner world, references to the latter are limited to an acknowledgement of its importance, but are without articulation. Nevertheless, the dynamic process evident in Marx resonates with the work of Klein who could be said to incidentally provide the formers link to the inner world.  The emphasis on phantasy in Klein, the means by which the individual psyche mediates the impact of the outer world, provides the internal dynamic which contrast with Marx's external one.  In the operation of phantasy, 'the (real) social world is experienced through a conflicting screen of internal forces, which alter and shape it powerfully'(Frosh 1999:128).

Furthermore, Klein links the outer world with the successful internal integration of the child. The suggestion is that in the developmental stage of negotiating the paranoid-schizoid position, there needs to be 'a predominance of good over bad experiences' to which 'both internal and external factors contribute' (Segal 1973:37). External factors here are associated with the encapsulated relationship of the mother and child. However, there is increasing acceptance by therapists that the mother-child dyad is a contextualised relationship and factors such as gender, race and class impact in myriad ways on this relationship. Given that transference in the therapeutic process mirrors the early object relating, aspects of context can, therefore, be found within the therapeutic dyad.

Without wishing to deny the extra material difficulties with which working class individuals can be faced and whilst accepting these need to be taken

into account within the broad church of psychotherapy there is a danger in this use of Klein, of re-introducing a one dimensional view of class as related to the structural position of the client only.  For example, and for arguments' sake, take the situation of a therapist working with a working class client. A reference point frequently made within the concomitant literature is that therapists are actually and normatively middle class, but in Marx's terms, they are not necessarily bourgeoisie in that they are far more likely to be selling their labour than buying the labour of others.  A historical materialist analysis problematises the symbolic and actual role of the therapist: Marx's primary class relationship is between two groups, the owners of the means of production – the bourgeoisie and those who are employed by them – the proletariat.  This relationship is the driver of capitalism.  In bringing a materialist analysis to bear on the therapist/ client relationship, there is an assumption that either the therapist represents the bourgeoisie in the relationship, whilst the client the proletariat, or it is simplistically vice versa. So for the client, it is their symbolic role, what they represent to the client, and what he/she imagines his/her therapist to be, that defines the dynamic of this relationship.  It is also the actual role of therapist and the acceptance of middle class theoretical propositions which cements this position.

For the working class client the therapist presents and represents a number of images and associations with power.  Not least of these is the power of the middle classes.  Therefore, if the analytic stance emphasises the problematic situation that the client faces in terms of good experience over bad experience, or how those experiences have been mediated through

phantasy, without paying attention to how the world impinges on their relationship in the therapy, the solution is partial and misses a productive aspect. Attention must be paid to ways in which the world impinges on the therapist too. According to Tuckwell (2002:3) who exemplifies this theoretical position (for example Crompton 2008; Sayer 2005) in practice 'where people have been systematically socialised into being in a position of power and privilege', in this instance that associated with class, 'there is little need for them to address the issue of their [middle class] identity'. To follow this path not only reinforces the power and privilege that the middle class individual takes for granted, but also obscures the interpersonal dynamics of class, and invalidates the latter as a potential tool of analysis. Thus it is in transference and counter transference that the class dynamic may be most apparent and therefore most fruitfully worked with.


## Power, class, transference and counter-transference

Transference, the object relations making up the client's inner world and derived from early experiences in relating with others, is not only individual and familial but also contains representations of the wider social context of the client and the counsellor.


> "The client's experience, the make-up of her object relationships and inner world, is a product not only of her membership of her family, but also of a particular culture, ethnic group, social class, gender, sexual orientation and such other." (Spurling 2004:109)

The most important aspect of working with class in the transference is power and oppression. In terms of identity politics, following the discourse of post-

structuralism, power is usually conceived of as omnipresent; the relations

between men and women, black and white people, gays and straights, able

bodied and the disabled, are 'saturated with power'. This epistemological

position mirrors commonly held views of the power differentials within

society: Men assault and abuse women, white people are racist towards

black people, able bodied society dominates the position of the disabled, the

middle class hold power in relation to the working class, so on and so forth

(Ferguson 2002; Liu 2011; Sayer 2005; Smith 2010). The obverse of this

relationship is the feeling of powerlessness, and actual powerlessness,

experienced by the oppressed group in the face of domination by the 'other'.

Although a working class client may not be experiencing material deprivation

or obvious inequality, unconscious frustrations, angers and desires related

to the dynamics of class may lie deeply embedded within their inner world.

These may be different or similar to unconscious feelings experienced by

the therapist. Spurling (2004) draws attention to the need to listen carefully

to perceptions and experience expressed in the transference related to

social similarity and difference. Using examples related to racism and

homophobia, he highlights how both members of the dyad experience

difference and how this informs the transference and the counter-

transference. Smith (2010:19) similarly suggests unconscious feelings about

class manifest in the transference. For instance value is assigned to people

'according to what they can buy, that is their conspicuous wealth or lack of it.

This leads those without money to feel 'deeply ashamed' of their inability to

participate in this as a cultural norm, and this shame manifests in the

transference in a range of emotions.

Tuckwell's (2002) discussion of black/white transference may equally apply to middle class/working class transference because both racism and classism (and for that matter sexism) reflect the power relationships within society and the dominance of one group by another. This is not to argue that racism is the same as oppression on the basis of class, or that all oppressions are the same. They are not. However, the manner in which oppressive practices and dominations are enacted and how oppression is mediated, bear striking similarities, for example in the use of denigrating language, fantasies and myths, stereotyping, fears and, crucially, the construction of difference in and by the 'other'. The 'other' is everything that 'I' am not.

Smith (2010) argues that all forms of oppression share another characteristic, that of distancing. Our cultural narratives affect our ability, or inability, to see class just as we see or cannot see other forms of oppression. 'Cognitive and behavioural distancing from the poor' is characteristic of class oppression (Lott 2002 in Smith 2010:32). As a consequence, the poor only become visible under exceptional circumstances such as Hurricane Katrina in the US (Smith 2010) or the August 2011 riots in the UK. However, the comfort zone created through distancing is challenged through the therapeutic relationship, when therapist and client are from different class backgrounds. The consequent uncomfortable feelings identified by Prilletensky (Foreword in Smith 2010) and analysed by Sayer (2005) of 'shame, self-derogation,

exclusion…doubting who you are and questioning the dignity of your own people' surface in the transference.  Prilletensky focuses on the client, but equally complex are the emotions experienced by the therapist.

Fanon's (1967) 'Black Skin, White Masks' demonstrates the relational quality of oppression. He argues that white men consider themselves to be superior to black men and that the latter wish at all costs to prove themselves of equal value but come to identify themselves with the subordinate position assigned to them by history.  The 'other' defines each position, and each position would not exist without the other.  The ensuing superiority/inferiority complex is evident in contact between the two groups and, according to Fanon, unconsciously informs all black/white relationships. Although Fanon was drawing from post-colonial experiences and it may be erroneous to generalise from the specific, he clearly chronicles the effect of superior/subordinate power positions in *a* society.  It is not difficult to draw a parallel here with middle class/working class relationships which in common with the black/white dichotomy, share an historical superior/subordinate position within a class stratified society. Symbolically, and in material reality, they are also defined in contradistinction to one another.  Fanon identified hatred, envy, anxiety and shame as emotions located within, and expressed by, both groups in relationship to one another. Similarly Guggenbuhl-Craig (1999) notes the 'shadow self' as having import for both parties in the therapeutic relationship.

In a society that either valorises or excludes working class groups, for instance in labels or categorisation such as 'the deserving poor' and the 'noble worker' or conversely the 'work shy', and 'the benefit scrounger,' or proscribing of particular groups such as teenage mothers or 'bad' parenting and 'feral' children, the associated images enter our consciousness at a very deep level.  The same can be said of the view of the middle class from a working class perspective and although these images are not in common parlance (another demonstration of where the power to define lies) they may be associated with envy of 'having a better life', fantasies of wealth or being 'stuck up'.  Described as pre-transferences (Curry 1964 in Tuckwell 2002), the beliefs, fantasies and myths that one group has of another, are present prior to the meeting of the therapist and the client and inform their impressions of one another. Furthermore, according to Comas-Diaz and Jacobson (1991) and Alleyne (1998) in Tuckwell (2002:64), the content of transference is collective, in the sense that it has grown out of the 'accumulated experience' of one group in relation to another and is reinforced by institutionalised social structures. 'Power relations are the means by which society enters into the consciousness of each person', (Frosh 1999:272). In addition, intentional or not, the 'emphasis on neutrality and distance' and the 'structure of the psychoanalytic situation' distinctly emphasises 'the power asymmetries present' in the therapeutic dyad' (Frosh 1999:299).  It follows, therefore, that within the transference and counter-transference, the client and the therapist hold powerful images related to the social structure. The power relationship and the introjected societal structure will be part of all relationships preceding any oral communication. This has

import for the parent/child transference and counter-transference as these

are suffused with symbolic and literal power, allied to the imagined and real

power of parents. In this way the therapist becomes the focus of power in

the dyadic relationship.

> "In a relationship one subject confronts another. Each relates to the other as a subject. In a relationship where power is the dominant factor, one subject tries to make an object out of the other, while the latter subjects himself to the former."(Guggenbuhl-Craig 1999:79)

Couple this with the normative acceptance of power associated with being

middle class, and the alienated powerlessness, which is the deeply

embedded experience of the working class, and there is the potential, in a

dyad representing these relations, for a damaging re-enactment of the

accepted social and familial order. Alternatively, and critically for the class

dynamic, there is also a positive, the potential for the client to explore power

relations in the broad sense of the word 'as they emerge in therapy and as

they mimic internalised relations from the formative periods of her or his life'

(Frosh 1999:273). The therapist, as the container of both social and familial

power, faces the client with the paradox of being both part of the problem

and the solution. This may offer one explanation as to why working class

and poorer clients are more likely to prematurely terminate their counselling

and be blamed for doing so (Illovsky 2003) and why many counsellors deny

being members of an elite group (Dijk 1993). Both may be aspects of

defensive reactions to intolerable emotions or active distancing (Smith

2010).

"We reduce the social complexity of their psychological pain to immaturity and defence mechanisms and we then blame them for missing appointments" (Prilletensky in forward to Smith 2010)

Gunaratnam (1997:181) comments on 'the distance between safe and manageable fact files' in other words viewing difference through a multi-cultural component rather than within the 'reality of power-based and emotionally charged relationships', can leave 'professionals stranded without guidance or reference points'.

## Summary

Theorising class using Marx's relational, historical materialist concept, and Klein's object relating theory, provides a way of re-focusing the division between the internal and external world familiar to psychologists and social theorists, respectively.   However, it is challenging on several counts. First it requires a conceptual shift from the individual to the group (or class). This is theoretically and practically difficult for therapists schooled in individual psychology as it requires maintenance of both the individual and the social. Second, and of particular relevance to acceptance in a US context, Marx is commonly associated with revolutionary political activity and on this basis continues to be rejected without thought for the body of his work. Third and perhaps foremost, a relational analysis calls into question the role of the therapist and their professional practice.  Paradoxically, uncomfortable though this may be as it was in the early days of identifying other oppressive practices linked for instance to racism and sexism, the transference may be the one aspect that therapists can identify with.  Indeed, the third and final analysis of class proffered here, may offer once again a relational

perspective, but one more closely focused on the individual and group

practices, therefore it may be more accessible to individual psychological

theory and practices.

# Chapter 4
## CLASS, CULTURAL CAPITAL AND SOCIAL POSITIONING

## Introduction

A Marxist material analysis provides the conceptual link between two distinct theoretical positions of psychoanalytical, Kleinian object relations theory, and humanist Marxism. As a consequence it is possible to conceptualise a relationship-based analysis of class in therapy, through highlighting the possibilities of power and oppression in the transference reflecting relations in the social world.  However, as a theoretical analysis based on an economic relationship (in a Marxist sense), it does not speak to the myriad experiences of class and how class relationships are maintained and reproduced especially at the level of the individual.  For this it is necessary to turn to sociological cultural analyses.

 Crompton (2008:94) suggests that overly deterministic elements of analyses based on class stratification led to the 'cultural turn' in sociology, a form of analysis constructed as a response to the rejection of grand theorising, part of the project of post-structualism.  This is not to be confused with class culture and the culture of poverty thesis, with its emphases on the 'underclass' the term frequently associated with this position, personified in the work of Charles Murray (1990) who coined the term. In 'underclass' theory there is focus on the 'lack of' or cultural deficit of the working class, the individualisation of their structural position, and thus a blaming and

pathologising of difficulties experienced by the poor and working classes

(Bottero 2009).

The cultural turn in sociology is different in that unlike 'underclass' theory,

which has a limited and negative focus, it argues that all classes maintain

and define class positions through particular ways of being and relating in

the world.  It is premised on the notion that

> "Culture is not just an effect of class location but also a central mechanism through which class positions are constituted." (Crompton (2008:94)

Furthermore, and important to the context of this work, how class positions

are constituted, maintained and reproduced is significant to understanding

the 'hidden injuries' of class (Sennet and Cobb 1993).

> "To understand the subjective experience of class we need to consider the emotional and evaluative aspects of the relations of self to self and self to other." (Sayer 2005:22)

## A cultural analysis of class

Bourdieu, considered to be the founding theorist of a cultural analysis of

class, takes an historical materialist analysis as one of his starting points. He

proposes that

> "…all knowledge of the social world, is an act of construction implementing schemes of thought and expression, and that between conditions of existence and practices or representations, there intervenes the structuring activity of the agents, who, far from reaching mechanically to mechanical stimulations, respond to the invitations or threats of a world whose meaning they have helped to produce." (Bourdieu 1984:467)

He argues that his emphasis is on the role of the 'actor' in constructing his or her own responses to an objective class position. These constructions maintain the reproduction of class in both an historical, and a momentary sense.  Thus Bourdieu brings together both the subjective and the objective elements of class, both 'action' *and* 'structure', the economic *and* cultural, and the simultaneous effect of these, in the practice of class differentiation. Said to be drawing on both Marx and Weber, class divisions are defined not by relationship to the means of production, but to shared experiences of being a member a particular class grouping with its attendant *capital* or lack of it (Crompton 2008; Sayer 2005).

> "… sets of agents who occupy similar positions and who, being placed in similar conditions and submitted to similar types of conditioning, have every chance of having similar dispositions and interest, and thus of producing similar practices and adopting similar stances. (Bourdieu 1984:231)

Actions, reactions, and relations one to another are socially *embodied* and are the consequence of *dispositions* which in turn are a consequence of *habitus.*

Capital for Bourdieu is an inclusive term comprising material resources such as income or property; cultural resources such as knowledge and/or professional qualifications; social resources as in connections or networks; or symbolic resources such as respect and/or reputation (Crompton 2008; Skeggs 2011). The endowment of, or lack of these resources, may be found in various combinations, and are associated with any one particular grouping or class.  Essentially, this grouping of resources is *habitus.*

*Dispositions* are derived from *habitus* and are the shared, group oriented, socially acquired habits, thoughts, behaviours and tastes 'associated with particular positions in the social order. This could be in terms of gender, 'race' or class. Dispositions are acquired through early conditioning through experience as a member of any one grouping (ibid). These dispositions become *embodied* – that is

> "…they function below the level of consciousness and language, beyond the reach of introspective scrutiny or control by the will. Orientating practices practically, they embed what some would mistakenly call values in the most automatic gestures or the apparently most insignificant techniques of the body – ways of walking or blowing one's nose, ways of eating or talking – and engage the most fundamental principles of construction and evaluation of the social world, those which most directly express the division of labour (between the classes, the age groups and the sexes) or the division of the work of domination, in divisions between bodies and between relations to the body which borrow more features than one, as if to give them the appearances of naturalness, from the sexual division of labour and the division of sexual labour. Taste is a practical mastery of distributions which makes it possible to sense or intuit what is likely (or unlikely) to befall - and therefore to befit – an individual occupying a given position in social space. It functions as a sort of social orientation, a sense of one's place guiding the occupants of a given place in social space towards the social positions adjusted to their properties and towards the practices or goods which befit the occupants of that position (Bourdieu 1984:466)

Bourdieu goes on to say that a shared, meaningful, common sense world arises through the embodiment of cognitive structures, including the social structuring of class. The practical knowledge and the manner in which this knowledge is applied, acted out, and acted on, by individuals, is inextricably linked to the structures and divisions of the actor's class, race, or gender. Functioning 'below the level of consciousness and discourse' this knowledge when applied, serves to reproduce inequalities through the minutiae of daily

experience and interactions (Bourdieu 1984:468). This does not reduce

inequality to the activities of individuals but rather it is an acknowledgement

that the subtleties of unconscious, embodied practices, in interplay with

institutional processes, reinforce and reproduce systemic inequality

(Crompton 2008). In other words

> "…the set of agents who are placed in homogenous conditions of
> existence imposing homogenous conditionings and producing
> homogenous systems of dispositions [are] capable of generating
> similar practices." (Sayer, 2005:101)

This is not unlike Marx's false consciousness, but is clearly more detailed in

the manner in which it is both generated and expressed and as such

provides a link and lead into the psychological processes associated with

class divisions and distinctions. Furthermore, Bourdieu in the manner of the

linguistic tradition of culture, power and social structure, expressed within

language and meaning (see Moi 1990; Foucault 1982; Wittgenstein 1988),

provides an analysis of the process of objectification seen in the use of

oppositional linguistic categories attaching value, classifying or categorizing,

*dispositions,* as basically acceptable or not. He notes 'a network of

oppositions' listing a number of examples from 'high (sublime elevated,

pure) and low (vulgar, low modest), strong versus weak, so on and so forth

to 'unique (rare, different, distinguished, exclusive, exceptional, singular,

novel) and common (obscure, grey, mediocre)'. These oppositional

categories with similarly expressed values and distinctions, appear in all

class divided societies and represent divisions between elite, dominant

group/s, and the dominated. Dispositions which are encouraged, valued and

rewarded are those of elite groups but are posited and accepted as societal

values. Those associated with other social groupings, including the working

classes are with few exceptions, proscribed and not accepted as societal

values (Bourdieu 1984:469-71).

> "The network of oppositions between high and low is the matrix of all
> the commonplaces which find such ready acceptance because
> behind them lies the whole social order.  The network has its ultimate
> source in the opposition between the 'elite' of the dominant and the
> 'mass' of the dominated..."

A 'sense of ones place' arises from the limiting images and organising

effects of dispositions leading to either a taken-for-granted acceptance of

being in a dominant, elitist position visible in 'bearing and gestures that are

self-assured' a presence, or conversely, acceptance and self exclusion 'from

the goods, persons, places…from which one is excluded… a reserve and

acceptance of insignificance in …"that's not for the likes of us." ' Thus the

'social order is decisively reinforced' with those lacking *capital* both

'consenting to what they have to be, 'modest', 'humble' and 'obscure,'' and

in the manner in which embodied practices and judgements find expression,

for instance, the way in which when talking to someone both the speaker

and the spoken to, are classified.  The speaker both identifies his own class

and the class of the 'other'  'by speaking to him in a certain way' and this is

'never more clearly expressed than in the space and time one feels entitled

to take from others' (Bourdieu 1984:471-73).

> "Agents and groups of agents are thus defined by their positions in
> this space.  Each of them is confined to a position or a precise class
> of neighbouring positions and one cannot in fact occupy – even if one
> can do so in thought- two opposite regions of the space." (Bourdieu
> 2010 229/30)

Furthermore, rejecting the notion that classificatory systems are a matter of knowledge, Bourdieu (1984) argues that such classifications, embedded as they are in social functions, represent the interests of elite groups and either overtly or covertly satisfy such interests.  Qualifications are an operant example of this.  They are a symbolic representation of the legitimised vision of a social world that values and rewards those with this form of symbolic capital whilst excluding from the rewards, those without. (Bourdieu 2010:239).  But it is the power to define 'legitimate' that is central. The symbolic power to define what is valuable, acceptable and good by elite groups, is at the same time an act of symbolic violence through the symbiotic exclusion of all that is not so defined, in other words the 'dis-identification of inferior groups.' (Sayer 2005:101).  What is not valuable is invariably associated with 'inferior' groups but not only as symbolic capital. The acquisition of a particular habitus is accompanied by the evolution of very real structures of social and economic advantage and disadvantage as for instance in an education system that is defined and legitimated by middle class practice, aspirations and rewards, but which systematically exclude or 'fails' those who do not or cannot comply or conform (Crompton 2008:101).

## Cultural capital, the therapist and the client

Bourdieu can be criticised on several counts: as overly deterministic and tautological; for embodied practices and habitus in their entirety determining reaction, outcome and compliance; for his underestimation of resistance and reflexivity, which by definition should also be considered part of habitus; for his use of binary definitions and his inability to go beyond them; for the

danger in ethnographical accounts of endorsing the 'culture of poverty' theses. All are questionable most especially his proposition for 'high' and 'low' culture (Crompton 2008; Sayer 2005).  Nevertheless, with these notes of caution, the strength of his propositions is that they provide a framework for understanding and reflecting on the embodiment of class dispositions within the therapeutic relationship. The habitus of both the therapist and the client will, as a matter of course, affect the therapy and the transference. Class distinctions will be found in the manner and patterns of thought, the judgements made about one another, the mode of relating, the presentation of self, the use of space, self definition, deference or confidence, expectations, transference interpretations, and so on and so forth. Furthermore, therapists tend to be middle class, (Bourdieu (1984) incidentally makes this distinction) or hold middle class values and aspirations, using theoretical perspectives rooted in those class values. This means that the client is faced with not only the power and authority of the professional role, but also all the symbolic capital that goes with it.  In essence the relationship in the room is not just between two people but also what they both represent in a stratified social world.

As argued in the previous chapter, Klein (1940) and object relations theorists are clear that the baby incorporates, within his or her unconscious, the parents' experience and impressions, and as proposed in this chapter , including the social world, the parents own internalised feelings, fears, oppressions and power relationships.  Accordingly, deeply embedded within the unconscious, lie aspects of class as experienced through primary object

relations. Furthermore, these experiences and dispositions are reinforced through secondary processing – the lived experience as a child of belonging to one class or another.  As Liu (2011) notes, from an early age children systematically judge other children and themselves, by what they wear, how they speak, how they look, and so on, especially noting difference such as receiving free school meals, who their parents like, defer to or ignore and, in Bourdieu's terms, how they use social space  with confidence or tentatively.

The consequence of Klein's primary object relating is akin to Bourdieu's *dispositions,* the embodiment of unconscious experience of the social structures which construct, modify and circumscribe our experience of ourselves, one another, and of the world. Object relations theory emphasises the associated psychological processes, but does not identify or make the link to cognitive and social structures causing pain and suffering through the experience of marginalisation and exclusion, and lack of *capital;* or conversely the confidence and a sense of one's self that is engendered by being a member of an elite class; or any of the differences in *capital* and *habitus.* A lack of such conceptualisation results in misinterpretation and misidentification by the therapist and thus poor therapeutic outcomes for many clients, with the unrecognised elements manifesting in transference and counter-transference or being dealt with defensively by the therapist. Javier and Herron (2002) found that not only do therapists have trouble relating to 'poor people' but they also resist the notion that there could be classed based counter-transferrential issues in their practice.  This failure implies that those who cannot acknowledge the privileges that accrue to

them based on their class status, or who have not dealt with associated emotional issues cannot appreciate the experience, or dispositions of their client (Smith 2010).  Liu (2011) exhorts those in the helping professions to reflect on their own class biases, traumas and assaults and consequently become aware of their counter-transferences and how these may impact on the effectiveness of therapy.  For instance, citing Zhou and Gao (2008 in Liu 2011) he notes recent research, demonstrating social isolation of any kind is experienced as psychic pain. Social isolation based on economic exclusion may lead to later acquisitiveness, buying for the sake of it, and other money related activities, which unconsciously insulate the individual from a repetition of the earlier painful feelings of shame, embarrassment, and humiliation. He suggests relevance here for the therapist and the client:  For the former, who may have grown up poor, experiencing educational marginalisation, perhaps feeling the need to work harder than everyone else, to compensate for the earlier lack, it is not difficult to surmise on the impact on the therapeutic relationship especially in the first encounter with a wealthy client (Liu 2011:110-11).  Conversely, a poor working class client could trigger a defensive reaction, or collusion. Furthermore, whilst the middle class therapist may be able to identify with upper class clients through their own desires and self identification, they may have considerable difficulty identifying with those that they have no wish to be and cannot identify with, or have an unconscious fear of identifying with what they do not want to see, and, as a result, even though they may wish to do their best for working class clients, they avert their gaze.

> "In essence…the potential for disruptive counter-transference is high and prone to override egalitarian and altruistic desires as well." (Javier and Herron 2002:9)

A Bourdieuan analysis would add that an unconsciously fought for, inhabited, maintained and defended social space is not easily given up for a perceived 'lower' place in the hierarchy.  Thus the therapist defends.

Drawing on Schnitzer (1996 in Smith 2010:60) and her own research and practice, Smith notes examples of defensive comments from clinical practitioners such as "They don't come in;"  " They're so disorganized;" "They don't care;" as rationalizing working class clients as respectively 'unreliable', with 'cognitive shortcomings' and 'depleted moral and ethical standards.' Moreover, she notes that such comments 'parallel national cultural narratives' especially those regarding single parenthood. Characteristics are viewed as personality traits or embedded habits and are therefore posited as the *cause* of the social and economic position the clients are in rather than the *result* of their social and economic positioning. A different reading of 'not turning up' is suggested as an element of cultural capital or rather the lack of it. Being on time, phoning in when sick, or notifying others of your whereabouts, for example, are all part of workplace culture and are, by definition, one of the dispositions of the professional. Those who have not worked, who in addition have low self esteem to the extent that they think they are not important enough to matter, are unlikely to make the expected contact even when asked to do so (Smith 2010).

Functioning normatively, middle-class dispositions lead to assumptions which overlook the operant differences of capital in and between classes, or as Liu (2011) puts it, the different world views – the 'lens' by which we mark out our own, measure ourselves, and differentiate the 'other.'  Although Liu (2011) appears to be in danger of tautologically 'fixing' identities and therefore coming close to the culture of poverty thesis, his different world views are nevertheless a useful heuristic device to explication and exploration of difference.

To develop a class-based analysis appropriate to therapy, it is necessary to appreciate the habitus and dispositions of both the client and the therapist, to recognize that both professionals and clients are part of an interrelated class structure with different narratives about themselves and others, and, to develop an appropriate understanding, it is therefore essential to move beyond an individual and individualised focus.  A good example of the power of a dominant narrative concerns how class has been constructed differently to other group memberships such as gender, sexuality, ethnicity, or 'race'.  The narratives associated with those groupings, are situated in the belief that membership is designated naturally, by birth, and therefore cannot be helped.  Even arguments over sexuality are posited within this framework.  However, class is ideologically different in that there is frequently a tacit discursive assumption that poor working class people have brought the situation they are in on themselves.  For instance, it is part of the myth of meritocracy and the American dream, that hard work equals economic success. In the UK exhortations across the political spectrum can

be heard equating success with work and being poor with laziness, de-motivation, poor parenting or becoming a member of a sub-culture. These ideologically framed narratives bear no relevance to the evidence base (Ferguson 2008; Crompton 2008; Smith 2010) but nevertheless become powerful, embodied assumptions informing or contaminating practice. Indeed, this is a prime example of Bourdieu's power of the elite classes defining and promulgating cultural representations that promote values specific to their own interests, as "natural" and "common sense."

## Application to practice

It is beyond the remit of this project to analyse and document all the possible ramifications for therapeutic practice. Therefore, a few, selective examples serve to illustrate the fruitfulness of concepts of capital, habitus and dispositions to the analytic framework.

As Smith highlights, the correlation between being poor working class, and psychological symptoms is 'one of the most thoroughly documented relationships in epidemiological research.' So consistent are the findings, over at least 30 years, she argues that it should now be accepted as a given, but notes paradoxically, there is still little reaction from the helping professions. This, she proposes, stems from 'individualised discourses' focusing on marginalized working classes, with 'helpful' interventions whilst simultaneously neglecting structural relationships and their symbolic and practical meaning (Smith 2010:47-49). Reviewing the literature for this project reveals similar attitudes. Rather than the therapeutic dynamic being

the focus of attention, there continues to be an emphasis on the client, and little if any reference to the embodied role of the therapist – it has to be recognized, with the best of intentions for the client. In addition there remain clear echoes of concurrent individualised discourses. For instance in the laudable 'Bridge Project' as conceptualized as 'Radical Psychotherapy for the 21st Century' by Chaplin (2005), there appears to be a lack of appreciation of the dispositions and habitus of both client and counsellor, and although the call is made in the paper for an 'equalising practice' and the active 'dissolving of hierarchies', there is still a sense that there is a separation between the primary and secondary processing. The situational position of the client, and the problems stemming from this, are dealt with as secondary processes much as is the main thrust of Layton et al. (2006). There is little to suggest that the therapists consider their embodied practices, and a hint that, theoretically, normative middle-class assumptions predominate.

A further example of the deployment of cultural capital lies with the therapeutic use of the 'blank screen.' It is generally accepted that transferrential relationships depend on the therapist's presentation of self as a blank screen, a neutrality affected by the minimal level of response to the client. Earlier chapters have questioned the viability of neutrality in a class context and in therapy, arguing that so called neutrality, a do-nothing position, is tantamount to endorsement of the status quo which allows oppressive practices to go unrecognised.

Moreover, utilising the Bourdieuan analytical concepts of embodied experiences and dispositions highlights a further complexity: Murdin (2010) exemplifies mainstream questioning of the received wisdom concerning the use of the blank screen. She suggests that the manner of the therapist's presentation will affect the therapeutic alliance and the extent to which neutrality is deployed is dependent on the therapist's value judgments. She warns that minimal responses to the client, the silence, especially in the first sessions, may be interpreted as a lack of humanity, coming across as cold and ungiving. This, in itself, will create an immediate negative transference in the client whose parental relationships were defined by absence or silence. The evidence suggests the client will not return (Murdin 2010). But there are further implications here in terms of dispositions. If the structured, class-based experience of the client is one of 'relational incompetence', exclusion, isolation, and 'not mattering' then there will be particular consequences. If this is too painful for the client to bear, he/she will not return. Should he/she return, then the therapeutic alliance may be characterised by an 'inauthentic relating' locking 'patients into a sense that their feelings and thoughts do not matter.' (Smith 2010:106). This is a reiteration of their subordinated class position and all that goes with it. The response that springs to mind is one of discussing difference with the client. However, this is fraught with difficulty not only in Skeggs' (2011) terms that working classes misidentify their class position, a finding supported by many others ( Crompton 2008; Sayer 2005;) but also the difficulty in the first instance in talking about class (see below).

Therapeutic distance can also promote mystification of the process, and idealisation of the therapist thereby enhancing the therapist's power and once again maintaining class positions. Poor and working class people 'readily read the signals that they receive regarding their devalued status' (Smith 2010:73-74). As with any marginalised group, and argued in feminist discourse of the 1980's, oppressed and subordinated groups become very competent at reading the signals or the world of the dominant groups and tend frame their sense of self from the received reflections and images (see for instance Harding 1986; Harding and Hintikka 1983). Elite groups holding the power to define 'other' who claim the world as their social space have no need to read marginalized others (Bourdieu 1984;1989). Indeed, this is an additional cause of difficulties in a class differentiated therapeutic relationship.

Skeggs' (2011) research focuses on the cultural capital of working class women and how their subjective identities are constructed against dominant images and representations of working class femininities as poor, deprived, dirty, dangerous and without value. Unable to draw on 'valorized social categories ' as working class men can (or could), as strong and hard working, none of her participants spoke of themselves 'in the traditional sense of recognition … " I am working class" ' . . they instead went to great lengths 'not to be recognised as working class' to disidentify with their structural position (Skeggs 2011:74). Respectability, responsibility and caring were key in their discursive constructions of self.

"Class operated in a dialogic manner: in every judgment of themselves a measurement was made against others – the respectable and judgmental middle class was constructed as the standard to/from which they measured themselves. The classifying of themselves depended upon the classifying system of others." (Skeggs 2011:74)

Denial, disidentification, and dissimulation characterize the response of the women to their positioning and to their differentiated capital rather than adjustment or assimilation as Bourdieu (1984) would suggest. The women understood their place even though they did disidentify, but they were always trying to leave it, promoting a discourse of improvement. Their appearance; their bodies; their minds their homes; their relationships; their futures were all used as sites of improvement (Skeggs 2011:82-84). At pains to distinguish themselves as respectable they described 'underclass' women (a Thatcherism influenced slippage, according to Skeggs 2011:76) as all that they were not: Having nothing, being scruffy, fat or rough, not caring about self, inappropriate dress such as white high heels and too short skirts, and not looking after children 'properly', were all expressed as signs of working class women – by their own definition what each respondent was not. Bodies and their presentation, are a form of cultural capital signaling who a person is and also who they are not (Bourdieu 1984). Of her research Skeggs states that 'It is a study of doubt, insecurity and unease: the emotional politics of class' (Skeggs 2011:75 )

Smith (2010) found that working class mothers' lack of economic capital leads them to disguise their poverty. Whilst the middle classes feel no compunction or need to use display to validate their class position, they may choose to do so. More often than not, the evidence of their positionality is

clear in other more subtle forms of membership, manners, the way they speak and interact with others, their use and domination of social space, etc.(Bourdieu 1984). Skeggs' (2011) working class subjects framed their classifications with an emphasis on display of the body, the house, the job (or lack of it), children, and so on. Hence poor mothers do their utmost to 'rescue their children from cultural exile'. Anything left over after paying for essentials goes on clothing for children – 'since children's sloppiness could be seen as evidence of failure of poverty winning its battle against you' (Smith 2010: 74). Whether it is the manner in which they are cared for (Skeggs 2011), or the way they are displayed (Smith 2010), children and their presentation become a signifier of class or the 'passing' as middle class. Thus forms the potential for misunderstandings of why children's clothing, the labels, the tidiness and cleanliness, are so important to working class mothers. They proclaim what they, the mothers, are not rather than what they are which is a far more problematic conception (Skeggs 2011).

Resisting the classification of working class, and the construction of a form of middle class respectability, is predicated on limited knowledge of the middle classes taken from popular media representations, experiences of education, and some minimal and specific contact with those in authority such as teachers, doctors and social workers (Skeggs 2011:88). But apart from affecting a form of passing as middle class, a great deal of what is considered to be middle class is a 'source of ridicule and contempt. What the women want is to be accepted and valued, not to 'be pathologised' (ibid 94).

Apart from providing insight into the discursive practice and the construction of working class subjectivities, the women's accounts are relevant to therapy and the therapeutic alliance. The middle classes and their behaviours are imagined as heterogeneous.  Although there was recognition of differences such as young middle class students dressing down (the style of grunge), more often than not there was a perception that the middle classes were alike, most especially in interactions with the 'other'.  Cited are repeated comments signalling middle class devaluation of the working class. Attitudes found expression in perceptions such as "looking down on" them, and class-based action such as they were being "treated like shit". They were made at the same time to feel proscribed and invisible but also under scrutiny - 'designated wrong or feel they do not exist' (ibid 93).

> "They [the middle classes] always assume they have the right to anything and everything.  It's like whatever they are doing that's their right.  They just think the world is made for them" (Angela, 1989 cited Skeggs 2011:92)

When considering the emotions and perceptions of working class clients and positing these within the context of the meeting between a middle class therapist or medical professional who uses the 'blank screen' approach, it is difficult to see how a working alliance could be generated.  In this instance creating a working therapeutic alliance may be dependent upon a procedurally different therapeutic practice or somehow addressing the class issue in the first instance.  However, the latter may be fraught with difficulty for reasons that Skeggs (2011) notes.  The women in her study carefully avoided directly speaking about class, echoing similar responses found in

research by others.  Citing Frazer (1989 in Skeggs 2011) she notes that when the latter asked two groups of girls – one working class and the other middle class - about class, the responses were considerably different.  The working class girls were reluctant to speak.  They were ambiguous, vague and embarrassed.  The middle class girls by contrast were assured and confident.  It was as if the working class girls did not want to be reminded of their subordinated position and that they did not have the confidence to claim a social space for themselves.  For therapy and in order to create a working therapeutic alliance, the import of these findings is crucial if somewhat tentative.  Indeed it goes some way to explain why many working class clients do not return after the first session (Liu 2011; Murdin 2010; Smith 2010).

Exploring capital, habitus, dispositions and class, giving some thought to the consequences for therapeutic practice, highlights and points to the need for a re-assessment of practices and class cultural competency on behalf of the practitioner. Thus far, the practice rather than the theoretical perspectives underpinning the practice has been the focus.

## Dispositions, language and emotion

Taking account of capital and dispositions and how these are reflected in the language of emotions and their interpretation, once again highlights the power of capital and the consequent dominant position of being the definer discursively constructing the 'other'.  Sayer, (2005) considering the moral significance of class, eschews a reductionist reading of sociological projects

which concentrate only on the 'bad' in subjective experiences, implicitly criticizes Bourdieu, but nevertheless draws on his propositions to argue that binary divisions are significantly complex and that

> "…the vices and the virtues cannot be understood separately, for they are interlinked; for example shame and humiliation are internally related to their opposites – pride and respect." (Sayer 2005:140)

He identifies sympathy or fellow feeling, benevolence and generosity, compassion and pity, envy and resentment, justice, toleration and mutual indifference, shame, and humiliation as particularly relevant to a moral analysis of class.  Whilst all of these sentiments and emotions are relevant, envy and resentment, and shame and humiliation, speak to therapy as they rightly signal 'issues' which in the past may have been misinterpreted (see chapter 2). Their binary counterparts, however, are also important as therapy rests on the relationship between two people, and both will be using embodied experiences to make judgments about one another.  Indeed, in many instances, it may be the only intimate cross class contact that either participants experience, and as such has the potential to stimulate embodied 'classism' in both the therapist and client.

**Envy and Resentment**

In psychoanalytic/psychodynamic practice, envy and resentment are generally viewed as negative feelings associated with the passive/aggressive position or as Klein makes clear

"…envy is an oral-sadistic and anal sadistic expression of destructive impulses, operative from the beginning of life, and that it has a constitutional basis" (Klein 1947:176)

A harsh destructive impulse positively mediated through early object relating or if this has not occurred, through later psychoanalysis, envy is in this sense a core aspect of psychotherapy. However, although a class-oriented therapy could well use this notion, there is the potential for the therapist to misidentify envy.

Hayek, the political theorist and economist stated, as an anti-egalitarian, that he has 'no respect for the passion for equality, which seems to me merely idealizing envy' (Hayek 1960:85 cited Sayer 2005:148). Today this sentiment underpins the frequently heard expression – "the politics of envy." This kind of sentiment, Sayer argues, intimates that egalitarianism is founded on base and unworthy motives rather than justice and fairness, and implicitly, that 'the envied are worthy when of course the opposite may be the case.' He makes the further point that those holding the view that there is no substance to egalitarianism other than envy, are undermined by the fact that no criticism is made of those who are the envied. In other words the power to define and deny sits with those with appropriate capital, and their dispositions betray the contempt with which those who have benefitted from the social structure hold for those who have been 'dispossessed or blocked by it' and also their contempt for middle class egalitarians (Sayer 2005: 148-9). In response, Sayer suggests that there are two forms of envy - resentful or unresentful. The former appears akin to Klein's (1947) destructive envy and the latter, at the other end of the continuum, a more

'resolved' form of envy.  But much therapeutic theorizing posits envy as a biological drive, a fact of being that we all experience to different degrees. The difficulty with this for a class-based reading is that so doing pathologises what Sayer terms legitimate envy, envy with little resentment or destructive impulses, 'the enviers regret at what s/he lacks'(ibid 149).  It is, by definition, a disposition of the client but not the therapist on two counts: The first, because the therapist represents the envied class and second, because there is an expectation that the client will feel envy. Murdin (2010: 72) writes

> "Envy will also affect the patient's ability to give anything to the therapist/parent who already seems to have so much"

There is a clear articulation of how the envy transference may develop in the context of mainstream therapy in Klein (1947) and also, although not intentional, the signal of a class-based practice. However, traditional theory would have it that envy is a consequence of primary processes and indeed it may be, but not always so.  For a class-based therapeutic approach, envy would be alternatively conceptualised as a social construct and this would underpin the practice approach. Thus envy would not necessarily be considered as an unresolved earlier issue.  Instead it would be posited as a disposition derived from a lack of capital.

**Shame and humiliation**

Shame is another emotion central to therapeutic theory and practice. Generally accepted across the therapeutic paradigm as aroused by ridicule, criticism, and scorn it lends itself to a class analysis.  Similarly to envy, it is

dynamically constructed in relation to 'other' - a socially embodied

experience.  Whilst envy is stimulated by the capital of others, shame is a

consequence of the perception and reality of disapproval from others.

> "Shame is a complex emotion evoked by failure of an individual or group to live according to their values or commitments, especially ones concerning their relation to others and goods which others also value, so that they believe themselves to be defective" (Sayer 2005:152)

Once again, making a distinction between two elements of the same

emotion, Sayer (2005) proposes that intense shame as a result of some

shameful act has the power to torment to the extreme of prompting suicide

or aggression.  However, shame derived from lack, is a low level, barely

conscious, sort of emotion, difficult to articulate but nonetheless feeding into

a sense of self-contempt and low self-esteem.  Shame is a feeling of

inadequacy where the shamed 'shrink from the gaze of others'.  Publicly

humiliating it is generally only acknowledged through the use of

euphemisms. Common in the context of class and associated with

unwarranted class contempt by the elite groups of the dominated, three

specific forms are identified by Sayer (following Bourdieu 1984): aesthetic

shame – for instance the inability to achieve valued appearance for instance

dress or body shape; shame related to performance – for instance the

inability to find employment or provide for the family; and moral shame – for

instance the inability to be "proper" to live in an acceptable way; or the

'invidious comparison with others' (Sayer 2005:153).  Common to all classes

and other social divisions is the use of moral and other evaluative and

discriminating distinctions, to delineate the boundary between self and other.

These distinctions are informed by habitus and thus situated in the social relations between the definer and the defined.  'Such relations occur among people occupying the same position' but 'they are not related to relations among unequals' (Sayer 2005:142 following Bourdieu). Shame in this sense is relational.

In class structured societies the education system serves as an example of systemic class shame.  It is a supposedly meritocratic system but generates systemic class-related failure which is perceived as individual failures (Crompton 2008; Sayer 2005;).

> "…class ideology prescribes both similar and different standards for different classes; the working classes are both imagined or expected to be able to compete on equal terms with others, and expected to fail" (Sayer 2005:154)

Skeggs (2011) and Liu (2011) provide other evidence of the operation of shame:  One of the women in Skeggs' account, rather constructing her self and family as different from her image of working classness, is concerned with shielding herself and her son from shame, from the gaze of the middle class parents of her son's school, who have the 'power to judge and inflict shame on her family' if they are 'recognized as poor, as working class' and thus she makes sure that her children have the best, that they 'pass' (Skeggs 2011:88).

For Liu (2011:86) shame is an internalised form of classism, the knowledge that one cannot maintain the acceptable societal standards or social status and the noxious feelings generated can lead in the extreme to destructive

and self-destructive behaviour and arguably the less destructive behaviour of consumerist compensation – shopping as noted before, to defend against noxious feelings.

**Time and space**

Bourdieu (1984; 1986) makes much of the time and social space that the elite classes appropriate for themselves at the expense of the dominated groups. Crompton (2008) provides the example of football as appropriated by middle class 'omnivores'; Skeggs (2011) argues that although stigmatised working class identities and culture are presented as valueless, they are also 'plundered as mobile resources in middle class careers' (Crompton 2008:111).  But for therapy there is an added aspect to time and space: it is considered professional, part of the holding process, and boundary setting to provide and hold to the 'contract', usually comprising a 50 min hour at regular intervals, for a period of time.   Although this may be 'agreed' with the client, it is nevertheless, in the context of a class analysis, potentially problematic.  The dispositions of the working class client may be situated in enforced middle class authority on timing – in school, appointments with professionals, in work and so on.  Historical evidence and educational theory (see for instance the seminal work of Bowles and Gintis 1976) supports the contention that appropriation of working class time and the setting of time parameters by elite groups is relatively new, and arose as a consequence of working class need to sell their labour.  The buyer holds the advantage and can define the limits. Compounded by the industrial revolution, time-keeping and setting is ahistorical and has taken on

the mantle of common sense or 'natural.' Time setting, appointments, and time limits, are examples of elite dominance and demands, constructed in the interests of this group over another. For the working class client, entering therapy for the first time, dispositions representing these historical associations may impact on the course of the therapy.

## Summary

A critical look at therapeutic practice does not signal a retreat from therapy per se, but rather more supports the notion that, until recently, the proscription of a political and class-based analysis has severely affected the contribution of the field to a practice that can incorporate and recognise class as a structuring phenomenon of the therapeutic relationship. To create the possibility of a therapeutic relationship, usefully constructed to address this absence, both the tangible and intangible elements of social structures need to move centre stage, into the primary relations processing. To ignore class allows class privileges and capital to enter the therapeutic relationship unopposed. This is at the very least a disservice to the working class and poor client and is likely to compound the misery of being constructed as the 'other'.

An analysis predicated on Bourdieu's notions of class, mediated by Skeggs', Liu's and Smith's research, Crompton's critique and Sayer's development of the moral significance of class, demonstrates the need for a re-reading of current theory and a re-structuring of present practice in the field to ensure that class is not just an add-on but finds a place central to therapeutic

procedures.  Analyses of capital, dispositions and embodied practices can also highlight resistance not just reproduction, and carefully deployed, avoid the culture of poverty arguments, which effectively blame the working classes for their 'low aspirations' and 'stunted' lives (Sayer 2005; Crompton 2008).

# Chapter 5:
## SUMMARISING THE THEORETICAL CONCEPTS

This analysis has argued that class can and needs to be, conceptualized in three distinct ways: Class as structured social and economic inequality; class as a relational concept; and class as a subjective entity after the 'cultural turn' in social theorising.  Furthermore, it is proposed that the diverse nature of class affects the theory, practice and provision of therapy, with each conceptualisation having different import for the therapeutic relationship. No one analytic strategy has primacy over the others as each contributes to the complex picture of the phenomena of class in helping relationships. The different conceptualisations, however, need to be worked with in acknowledgment or recognition of the significance of the others.  As Crompton (2008:12) notes, 'working across and with conflicting approaches and methods' is necessary to obtain a grasp on the totality of social inequality.

Chapter 2 focused on class as structured social and economic inequality, citing research that measures the effects of class position on the allocation of resources, differentiated income, health outcomes, morbidity and longevity. These accounts, it is argued, demonstrate that class exists 'out there' and can be seen in institutionalised structural inequalities that highlight the income gap, or share of GDP, between the highest earners and the lowest and how this gap is increasing. The link was made to neo-liberal political agendas and associated dominant discourses which, it was noted,

find expression in methodological individualism circumscribing psychological theories and practice.

For therapy, utilisation of the structural concept of class can inform allocation of resources and ensure access for marginalized groups. Furthermore, this concept highlights how the structural position of the working class client can be the cause of distress and ill-health. Statistical analyses also offer challenges to popular misconceptions about the working classes, employed or unemployed, and the poor. Following Smith (2010), it is argued that the poor (and thus poverty) are part of structural inequalities and as such they should not be separated out as a class in itself such as 'underclass' theories that pathologise the poor. The research demonstrates that many working class individuals experience poverty at key points associated with life transitions. Few remain in poverty all their lives.

Chapter 3 argues that, drawing on Marx's relational concept of historical materialism and selective aspects of object relations theory, a conceptual link can be made between the inner and outer worlds. The threads of the social in object relations theory, including the unconscious coupled with the social individual, in historical materialism, offer a challenge to the erstwhile (and traditionally concurrent) separation of the individual and society. In terms of object-relating, a class analysis binds the client and the therapist into an interdependent class-based relationship. Transference, counter-transference, and the interplay of power were highlighted as problematic, but containing the positive potential to address class and power in the

therapeutic relationship.  In this sense, it is argued that class should be a reference point within the use of transference.

Chapter 4 concentrated on cultural theory and the subjective experience of class and class identities. Sustaining a relational approach, subjectivities of the client and the therapist were explored.  A few selective examples were used to highlight the usefulness of this approach both in identifying class differences in cultural capital and dispositions, but also in reflecting on the potential  misidentification of emotions, for instance that of shame and envy. A class analysis offers an alternative reading of these emotions which then appear misappropriated by traditional psychological paradigms.

Of the three concepts of class discussed here, it is perhaps the latter one that speaks most clearly to the necessity of re-reading current mainstream psychological theories and the practice of therapy, and is of the most use to therapists who wish to incorporate a class analysis within their practice, but with a couple of caveats: if cultural theories present 'economic inequality and cultural hierarchy' as 'seamlessly fused' then there is a danger of 'displacement'.

> "That is economic inequalities are effectively subsumed within (displaced onto) cultural concerns, and within this model: to revalue unjustly devalued identities is simultaneously to attack the deep sources of economic inequality and no explicit politics of redistribution is needed "(Crompton 2008:112).

If recognition of difference becomes the primary concern, then redistributive politics and the issues surrounding it, lose their importance (Crompton

2008).  Given that inequality is increasing, seemingly exponentially (see

Chapters 1 and 2), then identity politics and the cultural turn on their own

without reference to Marx's relational conception of class, may paradoxically

serve politically conservative forces, just as the psychoanalyst did in the

past.

> "Thus, while helping professionals, psychologists and counsellors are
> interested in the idiosyncratic ways in which individuals perceive their
> social class contexts, social class is always dependent on multiple
> and simultaneous macro-level operations" (Smith 2010:19).

Bottero (2009:7) warns of the consequences of taking a cultural approach as

an isolated concept rather than situating it in the bigger picture of how

'systematic inequality generates disadvantage.'  Cultural readings of

inequality that focus on 'the distinctive cultural values of disadvantaged' or

'unequal groups'

> "…is just a short step away from arguing that the poor are
> disadvantaged *as a result* of their supposed cultural deficiencies."

Following a cultural reading thus leads to the promulgation of the deficient

'social type' (ibid) as in Murray and  Philips' (2001) underclass thesis – the

'single-parent, low achieving, rottweiler-owning, council estate dwelling,

cultural minority' (Bottero 2009:7) whose poverty is a consequence of faulty

choices and lack of motivation.  The class contempt that these concepts

generate are visible in the dominant discourse about families and poor

parenting which cite cultural and moral deficiencies as the root cause of

structural positioning, surfacing in 'epithets such as 'chavs', 'asbo' and

'pramface'' (ibid).

Like racism, class is structured and by classism which is external, contextual and situational (Smith 2010:20-25), and concern with the consequences of inequality should be central to any class-related endeavour (Olin-Wright 2008:26).

With these exhortations in mind the following empirical analysis is theoretically underpinned by both the relational and the cultural concepts of class. The other component of class, class as structural social and economic inequality, has been addressed by analysis of secondary sources in chapter 2.

# Chapter 6

## METHODOLOGY AND METHODS

## Research Thesis, Questions and Outcomes

## Research Thesis

Following the thesis that class affects the therapeutic dynamic, the initial generalised research question became 'how does class influence the dynamics of the therapeutic relationship?'  This first question was then divided into two: How can class be usefully conceptualised to provide the foundations of a class analysis within counselling and therapy, and how does class operate within the dynamics of the therapeutic relationship? Whilst these questions have remained the same, the first having been addressed in the preceding chapters, the sub-set of specific research questions related to the second question, has been refined.  This process led to a clear division being made between those questions associated with theoretical reasoning and those underpinning the empirical aspects of the work.

## Research Questions

Punch (2005:44) indicates that specific research questions may evolve as the project progresses. In so doing they may influence and change the methodology and methods.  The methods follow the question by providing the best means of answering it - that is to say, the way a question 'is stated shows what data is necessary to answer it.' Thus the content of the research has logical priority over the method of the research.  The progress of this project reflects this, specifically in the development of the empirical research

– as the questions have become clearer, the methods by which they may be answered have followed.

The questions initially proposed were premised on recognition of an absence of discussion centring on class in the related discourses of therapy and identity politics. These questions have more or less remained the same, providing the basis for a theoretical analysis. Conversely, although the empirical questions were clear from the outset, it took time for the appropriate methods to become distinct. Methodological detail followed as the study progressed (Mcleod 2001; Punch 2005).

## Specific Research Questions

The study was guided by the following specific research questions.

The theoretical reasoning:

1. What does class mean?

2. How and why has the diversity debate virtually ignored class?

3. How does class impact on identity and relationships?

4. What relevance does this have for counselling and therapy?

5. Can class be usefully conceptualised for the therapeutic relationship?

6. How does class affect the relationship between the inner and outer worlds of the therapist and the client?

The earlier chapters on theorising class have addressed these questions. It remains for the empirical enquiry to answer the following considerations:

7. What attitudes and perceptions do working class people hold about counselling?

8. What are working class people's perceptions of counselling?

9. What is the working class client's experience of counselling?

10. What is the therapist's experience of class in counselling?

11. How do people construct their class position/identity relative to the 'other'.

## Utilising Qualitative Methods

The choice of qualitative methods for the empirical research is based on the following considerations:

First, that the wording of the questions carries methodological implications (Punch 2005). For instance, 'describe', 'discover', 'seek to understand', 'explore a process', 'describe experiences',  type questions imply a qualitative approach, whilst terms such as 'variables,' 'factors which affect,' the 'determinants' or 'correlates',  are associated with quantitative methodology.  Questions 7 to11 in this study are about seeking to understand a process, an experience, so they are clearly aligned to qualitative methods.

> "Research cannot provide the mirror reflection of the social world that positivists strive for, but it may provide access to the meanings people attribute to their experiences and social worlds.  While the interview is itself a symbolic interaction, this does not discount the possibility that knowledge of the social world beyond the interaction can be obtained." (Glassner and Miller 2011)

Second, qualitative methods are utilised because this study is situated in the social world and seeks to describe processes constructed by and within that world. Qualitative research is able to uncover complex relationships, and deep underlying mechanisms within and between social structures and how these are experienced at an individual level. It is 'particularly appropriate for examining process, through its attention to context and particularities' (Holland et al 2005:1) hence it is applicable to this thesis.

As previously stated, qualitative methodology highlights the political nature of social research. It is a human activity and as such promotes conceptualisations of knowledge as constructed and contested. Rejecting the objectivist/constructivist divide, Glassner and Miller (2011:137) argue that the strength of qualitative research lies in its ability 'to access self-reflexivity among interview subjects, leading to the telling of stories that allow us to understand and theorize the social world.' Citing Orbuch (1997) and with reference to the use of in-depth interviews, they suggest that 'culturally embedded normative explanations' structure the views that individuals hold about themselves, others and the social world. Normative explanations, and the 'cultural frames people use' in making sense of their experiences, are uncovered by this approach. 'Combined they offer important insights for theoretical understanding.' (Glassner and Miller 2011:137). Given that the project, as presented here, focuses on how the dynamics of class plays a role in the therapeutic relationship, and how social structure is represented by the individual perceptions people hold about one another, taking a qualitative approach with interviews as a tool for data collection, seemed the appropriate course to follow.

A logical consequence of this is that the qualitative researcher is also part of that social world and as such should take a reflexive stance to their research and be 'constantly taking stock of their actions and their role in the research process, and subject these to the same critical scrutiny as the rest of their data '(Mason 2002:7).  (See below for further discussion of Researcher Reflexivity).

Third, the choice of qualitative method was guided by the questions and the focus of the study which speak to both action research, and emancipatory research.  Action research does not use any one particular method, but is more about the purpose and consequence of the research. It is about acquiring information, by research, which has practical implications for solving specific problems related to the workplace (Punch 2005).  This study is concerned about the missing dimension of class in therapeutic practice, most especially accounting for it within the transference and counter-transference in the dyad.  Should the research be successful in identifying aspects of this dynamic, there may be implications for practice.

Emancipatory research is perhaps most closely associated with social work and may be variously named - justice based research, advocacy research or empowerment research (Shaw and Gould 2001).  The common aim of research carrying this label is that the research, whatever its methodological orientation,

> "supports values of decreasing inequalities and increasing life chances of all citizens by documenting inequalities in lives and analysing precisely how social structures and social policies enhance and restrict opportunities for individuals and groups" (Riessman 2001:73).

According to Whitmore (2001:84-6), emancipatory research has four key elements. It challenges notions of neutrality or value free inquiry by accounting for 'the influence of social, political, cultural, economic, ethnic, gender and disability values of both the researcher and the researched.' To be emancipatory power has to be a central issue - 'how are otherwise silenced voices heard in the research' and who 'conducts, controls and benefits from the research and for what purpose is it carried out?' The researcher has to be receptive to 'other' ways of knowing as 'legitimate and indeed necessary'. And there are 'clear and explicit links to action.' Although I would hesitate to make a claim for emancipatory research for this study, the four elements coincide with and are an extension to critical theory and the softer end of standpoint epistemology and therefore proffer a useful framework or counterpoint to maintaining a reflexive stance to the research.

## Finding Working Class Participants

The next issue to arise was how to identify and find working class participants. As discussed in preceding chapters, self definition is not necessarily reliable. The literature suggests that working class research participants (see for instance Skeggs 2011), tend to align being working class with poorer, paid or unemployed, members of the communities (more evidence of the Thatcherite 'slippage' - ibid) rather than the better paid

working classes, thus misidentifying their own structural position. Therefore, self definition by potential participants would have provided a different type of sample and consequently, study. Needing to find a clearly identified group of working class people, I finally settled on children's centres and particularly the concept and purpose of Sure Start, Phase One, situated in low Super Output Areas (see below). I was familiar with the concept and practice of these interventions, so this became the choice location for holding the research focus group interviews.

Interviewing is widely used in qualitative data collection. In this instance both focus groups and individual interviews were conducted. Focus groups were held in the Sure Start Children's Centres, and individual interviews with counsellors.

## Focus Groups

The focus group form of data collection was chosen in preference to individual interviews with participants as it was surmised that the one to one interview could mirror negative experiences of ostensibly middle class interviews and be intimidating for the participants (Mcleod 2003). In addition, the one to one interview mirrors the one to one nature of the counselling process. As an erstwhile counsellor, I felt the method of the focus group assists in preventing a misinterpretation of the interview by the interviewee, who may see it as a quasi-therapeutic encounter. Indeed, this proved to be a correct assumption in that on the day of one of the pre-arranged focus groups, I was presented with a unilateral decision by the

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manager to provide individual interviews instead on the basis that "…it would be more comfortable and confidential" for their service users. This is centre LE (see below). Following Mcleod's image of 'researcher as *bricoleur*'

> "The notion that the demands of qualitative research require the researcher to improvise and create his or her own techniques for collecting and analysing material is captured in the concept of the *researcher as bricoleur".* (Mcleod 2001:119)

I decided to accept what was presented to me for two reasons: primarily, because the women were waiting and had given up their time to speak with me; and secondarily because I felt that the data could still be used if I framed the interview as constructed for the focus groups and with the same questions. I used exactly the same questions as in the focus groups, thereby paralleling the defined research process. However, the original speculation that individual interviews may be more difficult to handle was correct. Each participant wanted to tell their story and balancing their need to share with my need for data called forth different skills than those used in the focus groups.

The relevant data from these individual interviews is included in the overall focus group analysis. The coding for each focus group also identifies the centre in which the individual interviews took place (see page 128).

The individual interviews also demonstrated in stark relief the richness of the focus group as a method of data collection where the participants share in, stimulate and construct their own answers to the questions (Willig 2006).

Furthermore, another positive aspect of the focus group is the principle of safety in numbers, the voice of the group and feelings of comfort of the participants in the known environment rather than the unknown, would provide an ethical experience for the participants. The pilot bore this out and provided a more empowering process for the interviewees (Whitmore 2001).

Wilkinson (2011:181) proposes that the focus group provides appropriate data when the purpose of the research is focused on how the participant's talk about their lives.  If the objective of the research is conceptualised as either a 'window' on life or an analysis of participants' underlying beliefs and opinions, then focus groups are useful means of data collection.  Indeed, focus groups have a specific contribution to make in that they can be data rich as the group constructs their understandings together (ibid) generating 'useful qualitative data not only in responses to the researcher's questions but through spontaneous dialogue with each other' (McLeod 2001:138). The interactions of participants become the source of data, allowing statements to be challenged, qualified or undermined providing the researcher with the opportunity, to question the construction of meaning, how justificatory strategies are deployed, and how views change in the light of interactions with others (Mcleod 2001; Willig 2006). It is perhaps less artificial than the one-to-one interview (Ryen 2011; Willig 2006).  Through the experience of conducting this study, I was aware that increased interaction with one another the participants' focus on the interviewer lessened, arguably providing access to more in-depth discussion.

The dates, timings and composition of the groups were arranged in advance in conjunction with the centre managers or their appointee.

As a method of data collection, interviewing, including focus group interviewing, is flexible and, when deployed, relatively unstructured but, with an agreed discussion point, it can purposively generate a non hierarchical discussion between researcher and participants.  A more informal, and less hierarchical approach was deemed appropriate to the material and structural situation of the focus group participants, given their differential position to the researcher.  With this in mind before each focus group, the participants and I exchanged some information about ourselves in areas of mutual interest.  We tended to discuss children given our shared interest.  As McLeod (2003:76) notes, 'the researcher should be willing to be know by, and identify with, the informant.'

In conducting the focus group the researcher's role is one of moderator able to gently steer the discussion, identifying any agreements and disagreements in the group (Willig 2006), 'actively encouraging group members to interact with each other' (Wilkinson 2011:169), negotiating the parameters for the group, maintaining the bounds of confidentiality, keeping to time and to the prepared questions, but allowing for flexibility.

The focus groups all took place over one hour.  A semi structured approach was taken.  Five basic questions were used as prompts and to provide structure.  The questions were:

1. What do you think counselling is?

2. Who might go to counselling and for what reason?

3. If the need arose, would you use counselling?

4. If not, why not?

5. What might prevent you using counselling?

The first question was an introductory question aimed at getting people talking together. Questions 3, 4, and 5 were the questions that elicited the data, informing and constructing the 3 main themes. The centre managers were provided with a copy of the questions prior to the interviews. All focus group interviews were recorded and later, transcribed.

I decided not to ask the focus group participants directly about class, nor did I ask them to identify their class to me. Evidence suggests that the working the classes misidentify and disidentify when asked directly (for instance Crompton 2008; Smith 2010; Skeggs 2011) and in the process become embarrassed (Sayer 2005; Skeggs 2011). Furthermore, I did not want to provide a leading question, preferring to see whether class in all its manifestations and as theorised, did appear to be a factor. Therefore questions 4 and 5 were for me the most important – 'what might prevent you from using counselling?'

The individual interviews with focus group participants used the same question format but as one to one, they took less time, about 40 minutes each.

As the focus group discussion is usually recorded and transcribed, and then analysed using conventional techniques such as content or thematic analysis, it is therefore noted as primarily a method of data collection (Wilkinson 2011:173). The focus group in this study is used as a form of data collection only.

## Ethics

The research was conducted in accordance with the ethical requirements of the University, BACP guidelines for ethical research, and the guidelines associated with counselling and psychotherapy (for instance Mcleod 2001; 2003).  In addition to receiving an invitation letter setting out the purpose and method of the research, each participant signed a form agreeing the terms or 'contract' for the interview.  With traceability in mind, it was agreed on request from the centre managers, that the consent to participate forms would be held by the children's centres. (Appendix 1 for the invitation letter and the agreement to participate form)

In discussion with the centre managers, the question also arose about how to assist those who were not fully literate to participate with informed consent.  The strategy developed was that consent form would both be circulated prior to the focus group meeting, with the invitation letter, and also be presented at the focus group meeting where I would read it out.  Doing this with would clarify confidentiality and anonymity but would also allow anyone who had not signed a consent form, but was already in attendance, to sign including those lacking the ability to read.  I had been reliably

informed in one of the groups that all could sign their signature, but not all were literate.

The dates, timings and composition of the groups were arranged through an advanced visit with the centre managers or their appointee. The centres also generously provided childcare for the participants whilst the focus groups took place.

Aware of the potential for emotional distress (Ryen 2011; Shaw and Gould 2001; Willig 2006) stimulated by the discussion – anything could transpire - it was important to ascertain what supportive services, counselling or other, that the centres offered their service users.  Of the five participating centres only one did not offer a counselling service.  In the other four the county psychology services provided a visiting counsellor and/or Relate marriage guidance counselling.  In discussion with the centre managers, the decision was taken that the manager or their appointee would gently remind participants what was available.  For my part I built in an appropriate strategy to ensure that all were protected from the intrusion of others and from revealing too much of their vulnerabilities (Ryen 2011; Shaw and Gould 2001).  Although no occasion arose where an individual disclosed too much information, I was acutely aware of holding the power to define the parameters of the session. To re-dress this imbalance it felt important to enable the discussion to develop as naturalistically as possible (Willlig 2006) thus allowing the participants the space to construct their own positions.

Equally it was essential that the sessions did not become quasi-therapeutic interviews. On ethical issues, Mcleod (2001) writes

> "collecting qualitative data from clients or patients, for example through interviews, can be intrusive and demanding, and therefore ethically questionable; reporting rich qualitative data (for example client narratives) may compromise confidentiality;" (Mcleod 2001:15)

The procedures in place and the method of data processing protected the confidentiality and anonymity of both the participants and their centres. Mcleod also raises the issue that sometimes the normal ethical procedure of informed consent can seem inadequate. He quotes Josselson (1996), where although participants freely agreed to publication, they felt differently when the information became part of the public domain. Josselson felt 'dread, guilt and shame that go with writing about others':

> "My guilt, I think, comes from knowing that I have taken myself out of relationship with my participants…to be in relationship with my readers. I have in a sense been talking about them behind their backs and doing so publicly…I am using them as extensions of my own narcissism and fear being caught, seen in this process".
> (Josselson 1996:70 cited by Mcleod 2001:198)

To a lesser extent I found myself relating to the feeling of having been in a relationship with my respondents and somehow altering that relationship, by writing up and analysing their material for my own purposes.

The participants were not paid for their involvement. However, it seemed appropriate to make an individual gift at the close of the interviews. For the pilot this took the form of chocolates but after receiving feedback from the centre manager as not in line with their healthy eating campaign, in the

subsequent group and individual interviews, the gift took the form of a £5.00 Boots voucher.

## The Pilot Study

A pilot study was conducted in a Sure Start Children's Centre. The focus group was set up, conducted, and recorded as per the section on ethics. The questions providing the semi-structured framework for the group are the same as noted in the focus group section. The discussion provided rich data, and appeared to be enjoyed by the participants. Informal verbal feedback was sought from the focus group immediately after the recording. No negative feedback was received. Indeed the women stated that they liked being asked for their opinions and that "…it was good to sit down and talk"… "doesn't happen very often". Feedback was sought from the centre manager at a later date and again this was positive apart from the gift of chocolates as discussed above.

The questions appeared to stimulate the discussion appropriately and provided the data needed. As such they were retained for the rest of the focus group interviews, providing a flexible, structured approach. The commitment to one hour was also confirmed as the correct timing.

## Individual Counsellor Interviews

It was considered unethical to conduct research with therapists and clients in either a present therapeutic relationship, or subsequent to that relationship (see Ethics section).

Semi structured interviews were conducted under the same ethical principles as the focus groups with the same level of anonymity and confidentiality.  With the counsellors the questions were similarly orientated but I did ask the counsellors directly about class if it did not arise as a consequence of the earlier questions:

1. Where do you counsel and who are your client group (other than the centres)?

2. What are the types of presenting issues of clients drawn from Sure Start centres?

3. Why might clients from Sure Start's refuse an offer of counselling?

4. Do you think class matters in this context – if so how?

5. Do you work differently with clients from Sure Starts to clients you have in other contexts?

The questions were used flexibly as each interview with the counsellors developed differently.  All the interviews were recorded and transcribed.  At the outset in discussing the purpose of the research and the interview process, I disclosed to the counsellors that I was a counsellor but presently inactive.

## Sampling Process and Participant Profiles

## The focus groups

Five focus groups plus one group of individual interviews took place in Sure Start children's centres across the West Midlands region.  After gaining

clearance from the respective county councils to approach their centres, contact was made with fourteen. Of these, ten agreed to participate. Each centre was contacted initially by phone, followed by a formal email confirming the purpose and manner of the research, with an attached letter to parents inviting them to participate and confirmation of anonymity. Once interest was indicated, a visit was arranged and the purpose and details of the research was discussed with the centre managers. The pilot indicated that this was the correct approach to take.

All centres were Phase One Sure Start, serving geographic areas in the West Midlands with the highest percentile of social and economic deprivation. The West Midlands has nearly 15% of England's low Super Output Areas (SOAs) as defined by the UK Government Index of Multiple Deprivation (2004;2007;2010), making it only second to Humberside in terms of density of pockets of deprivation, with an overall ranking of third in the number of low SOAs in the region. Of these, the West Midlands, has 474 of the most deprived SOAs. Only Humberside and Yorkshire, and the North West are higher (The West Midlands Regional observatory 2007). The latest government unemployment figures for the West Midlands Region (January 2012) show that 9.2% are unemployed and this figure is rising, compared with the national average of 8.5%. The ONS figures for regional economic inactivity (November 2011) show that the West Midlands, at 39.5%, is second only to the North East at 39.8%, whilst the national average is 36.5%. Each of the participating Sure Starts are in areas included in the 474 top 10% of low SOAs This means that the participants

all live within an SOA in the highest percentile of deprivation. The centre managers confirmed the location of the participants. It is with some confidence that the assertion can be made that the focus group participants are poor working class. It is not known for certain whether the participants were employed but given their circumstances, all had children under school age and daytime availability, so any employment is likely to have been part-time. No other references were made to their personal circumstances related to employment other than lack of money, although several mentioned the unemployed status of their partners.

The fact that the Children's Centres and their service users either declined or agreed to participate designates them as a self-selected sample, and attendance indicated that they were interested in the topic. It is assumed that those potential participants who declined were not interested. Therefore it is acknowledged that this is a self selected group and the findings cannot be generalised across the working classes per se. Nevertheless, the data from a total of 31 participants across 6 different groups, is sufficient to suggest that there are issues distinct to being working class that are present in therapeutic procedures.

## Focus Group Participant Profiles

The focus group participant profiles diagram (Table 6:1) includes centre code, age and gender.  Centre DH offered two focus groups, one in the morning and one in the afternoon recorded as DH1 and DH2.  Including the group of individual interviews in one centre this gives a total of six focus groups across five centres.

| Centre Code: | Number of participants And gender: | Ages: |
|---|---|---|
| KT | 8 female | 25 - 45 |
| RW | 6 female | 20 - 35 |
| RB | 4; 3 female plus one male | 2 x 20 – 25 (1male;1 female 1 x 40-45 (female) |
| LE - 4  (Individual Interviews) | 4 female individual interviews | 20 - 30 |
| DH 1  groups: Morning | Group 1  = 5 female | 20 - 30 |
| DH 2            Afternoon | Group 2  = 4 female | 20 - 30 |
| Total centres = 5 | Total focus group participants = 31 | Age range: 20 - 45 |

**Table 6.1 – Focus groups participant profiles**

The majority of the research participants were white women, who were mothers, ranging in age from early twenties to mid forties. Two had a non-British heritage. One male, who had, notably, received counselling, accompanied his partner to the focus group at centre RB.  There was nothing distinct or related to gender in the data recorded for RB consequently his input has been merged into the appropriate data sets.  His individual code is RBB.  RBB was one of twelve of the participants who openly declared that they had received some form of psychological

intervention.  These ranged from outpatient psychiatric services to relationship counselling offered by the Children's Centres.  At least two participants had been 'required' by social services to attend counselling.

Two participants in DH incidentally stated that they were looking for part-time work.  Three of the four in RB had never worked.

Although the invitations to the focus group went to all the parents, only those with white ethnicity, attended.  However, the centres utilised, served predominantly white working class areas where black and Asian groups are in a minority.  This suggests the study by default, is representative of the white British working classes rather than across the whole British working classes.

## Counselling interviews participant profiles

| Centre code and counsellor pseudonym | Gender: | Age: | Years counselling: | Theoretical Orientation |
|---|---|---|---|---|
| DH1 Pat | Female | 30-40 | 4 PT | Integrative |
| DH2 Jan | Female | 30-40 | 8 PT | Integrative |
| LE Dora | Female | 40-50 | 5 FT Family Mediation service; 18 months PT Children's centre | Systemic family work/Person Centred |
| PS1 Lou | Female | 40-45 | 6.5 FT | Systemic Family Work/Person Centred |
| PS2 Kay | Female | 40-45 | 8 PT | Person Centred |

**Table 6.2 – Counselling interviews participant profiles**

Counsellors (see table 6.2) in similar circumstances to the focus group participants were sought. This was not as straightforward as it first appeared. First, some sure start children centres did not offer counselling. Second, those that did had visiting counsellors from either the county psychological services or through Relate. This meant that timing and access was limited. All the participating centres were asked if their counsellors could be contacted. Out these 11 counsellors were identified and then individually approached. Five agreed to participate but two of

these cancelled at short notice.  As a result a further two were sought.  A repeated request to the centres without counsellor participation was made but did not result in any further commitments.  Having exhausted the possibility of interviewing counsellors attached to the same centres as the focus group participants, two counsellors working with families in the same lower SOA areas as the Children's Centres were located.  The main difference between the latter counsellors and those from the centres lies in the fact that the former provide services to families with children of any age whilst those in children's centres work with families with under school age children.  This apart, they were considered a reasonable match and are noted as PS1 and PS2 in the table above.  Both these counsellors were providing therapeutic input to families with designated 'problems.'  The other 3 counsellors were from two of the same centres as the focus groups, DH and LE.  The counsellors have been given pseudonyms for ease of reading and to distinguish them as individual interviews rather than members of a focus group.

All the counsellor's were white British, four of them defined themselves as working class and the fifth LE was not sure what class she belonged to.

Three of the counsellors worked in two of the centres which were involved in the focus groups, DH and LE.  Unsuccessful at gaining the participation of counsellors in other centres, counsellors working with families in the same lower SOAs were approached.  Two agreed to participate.  Their centre code is noted as PS standing for Psychology Services.  At their request due

to time constraints, the DH counsellors were interviewed together.  All five

counsellors worked almost exclusively with referred clients.  Lou's clients

were all referred.  Kay had referred clients when working for the psychology

services but had worked and did work with self-referred clients in other

services.  Pat, Jan and Dora had mainly referred clients but also took some

self-referrals from within the children's centres.  Although not asked, four of

the counsellors declared themselves as working class.  The fifth, in centre

LE, Dora, did not know her class, but having declared it as irrelevant at the

beginning of the interview, by the end she acknowledged that she needed to

think more about it.  Three of the counsellors were interviewed in their

centre workplace, and were dressed casually in jeans.   The other two

counsellors were interviewed outside of their workplace and were similarly

dressed, casually, but not in jeans.


## Data Collection and Analysis

## Qualitative Methods

A number of qualitative methods of data collection would have been

appropriate to this study:  Hodgkinson (2005) argues that ethnographic

participant observation is useful in research with marginalised groups but

difficult to carry out if there is little or no basis of shared membership with

the researched group, as in this instance.  Although I share the same

ethnicity and gender as the research participants I am older and ostensibly,

not of the same class.  Participant observation would have been

inappropriate.

Wilkinson (2011:174) suggests that ethnographic accounts can work with focus groups. However, such ethnographic accounts are usually premised on a different epistemological standpoint, that of analysing the *processes* involved in the focus group meeting '…seeing the focus group discussion as a social context in its own right.' Once again, though thought provoking, this was not my project. Narrative accounts located within the interpretative tradition limit the use of critical objectives, accepting as they do, that the data provides an authentic insight into the participants world (Freeman 2004: Glassner and Miller 2011; Silverman 2011) and similarly biographical methods are oriented to focusing on the coherence of participants' interviews (Holloway and Jefferson 2000).

Drawing on Charmaz (1995) and Dawson and Prus (1995), Glassner and Miller (2011:135) propose that 'to assume that realities beyond the interview context cannot be tapped into and explored is to grant narrative omnipotence.' Charmaz's (1995 cited by Glassner and Miller, ibid) account of her research with the chronically ill illustrates this point: her research participants experienced sickness, whether they participated in her interviews or not. Similarly, my research participants experience class with its concomitant outcomes, whether I interviewed them or not. 'Reality,' however it is defined, exists outside the interview process and is not contained singularly within the interview.

Data analysis depends on data collection (Silverman 2011). Following Crompton (2008) this study has argued that class is multi-dimensional and

thus, analytic accounts of class should acknowledge if not be predicated on class so defined. Three concepts of class are conceptualised in the earlier chapters: first, class as in, for instance, the Registrar General's scale, measuring class outcomes such as health, mortality and morbidity; second, the relational concept of class (Marx); and third, the subjective experience and construction of class by actors (Bourdieu). The first of these, the empirically measurable realities of class are discussed in Chapter 2, drawing on secondary sources to support an argument that class exists. The second and third conceptualisations form the theoretical bases of the thematic analysis, the purpose being to establish how class manifests in counselling and therapy.

With the second and third concepts in mind, it was concluded that interviewing working class clients and their counsellors would best serve the research purpose and would at the same time give voice to the structured position of the clients. However, in exploring the possibilities of conducting research thus, many ethical issues arose (Mcleod 2003), the primary concern being that of the consequential effect of my 'interference' on the therapeutic relationship and the impact on the client, either during the course of therapy or following therapy. After careful consideration, both came to be viewed as unethical. As a result, the decision was made to step back from the relationship and look at its component parts – potential working class clients, and therapists, but not in any particular therapeutic relationship.

## Analytical procedures

"Sometimes it can be extremely valuable to look beyond intended meanings and pursue the possibility of different ones altogether" (Freeman 2004:69)

Freeman's comment accords with the epistemological position taken in this study. Interpretivist accounts positing an 'insider' rather than an 'outsider' approach fail to consider the material reality of the discourse in question (Mason 2002) which is an important aspect of this study. However, the mechanisms structuring social reality, are not directly observable. This means the terms of engagement with research need to be theoretically grounded (Crouch and McKenzie 2006:489) suggesting more of a theory-oriented classical approach, as is taken here, rather than one aligned to a post-modernist project. Furthermore, this approach challenges the epistemological premise of grounded theory and certain interpretivist accounts, in that it pre-supposes that the social context of participants cannot be produced solely out of the personal experiences which arise out of the data. Knowledge and theory is extant (Crouch and Mckenzie 2006).

" To give those experiences sociological meaning is to comprehend them in the context of the social conditions within which they arise, it is to attempt to explain those experiences 'vertically' by addressing crucial questions about the necessary conditions under which experience is possible at all. As the 'system elements' of social life are rarely more than hinted at in respondent accounts, the emergent analysis and interpretation of these accounts require reference to relevant social circumstances to be grounded in extant sociological (including, of course, theoretical) knowledge" (Crouch and McKenzie 2006:490)

Braun and Clarke (2006:78-81) provide a thorough account of thematic research. They argue that thematic analysis, though often framed as a

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realist experiential method is epistemologically compatible with *either*

essentialist/realist or constructionist paradigms, the former defined as the

reporting of 'experiences, meanings and the reality of participants' and the

latter as an examination of how 'discourses operating within society' effect

'events, realities, meanings, experiences and so on.'  However, they

propose that thematic analysis can also borrow from both essentialist *and*

constructionist paradigms, forming and becoming a contextualist method by

> "…acknowledging the ways individuals make meaning of their
> experience and in turn, the ways the broader social context impinges
> on the material and other limits of 'reality'.  Therefore thematic
> analysis can be a method that works both to reflect reality and to
> unpick or unravel the surface of 'reality' (Braun and Clarke 2006:81).

This is the epistemological position taken here.  A contextualist approach

structures the thematic analysis on the grounds that it is theoretically

coherent with the earlier chapters conceptualising class.  In essence, a

contextualist form of thematic analysis is utilised, with the aim of identifying

the directly observable class themes, *and* the latent class themes,

underlying the interactions.  However, although the approach here borrows

from the essentialist paradigm, epistemologically it is, on balance, clearly

aligned with a constructionist perspective that sees 'meaning and

experience as socially produced and reproduced' (ibid) rather than located

within individuals.

The application of theoretical concepts to data is compatible with a

constructionist/contextualist framework.  This means the analysis is explicitly

'driven by the researcher's theoretical' interest. That is the position taken

here.  A theoretical thematic analysis constitutes a detailed analysis of one or some aspects of the data, identified here as the latent themes of class, rather than a 'rich description of the data overall'.  This method enables analyses of data to go beyond the spoken word, working towards the more hidden level of meaning by identifying underlying ideas, assumptions and conceptualisations. It seeks to theorise the socio-cultural and structural conditions of class in the context of therapy.  Coding is conducted with specific research questions in mind and across the data, in this instance across all the focus groups, and separately, across the counsellor interviews 'to find repeated patterns of meaning'. The themes identified are consequent to the latter process. Moreover, as a latent approach, the development of the themes themselves becomes part of the interpretative process.  This means the analysis 'is not just descriptive but already theorised' (Braun and Clarke 2006:84).

However, an over-analytic approach that *imposes* the themes on the data, can lead to the oversight of previously unidentified categories.  In this sense the realist element in the analysis is closer to the stance of grounded theory method, in that it calls for data-dependent themes and categories to be accounted for.  However, unlike grounded theory, the process is informed by the use of theoretical concepts.

At the risk of over-simplification, a theoretically based thematic analysis constitutes in approximate order: 'engagement with the literature prior to analysis'; familiarisation with the data-set, making initial comments and

looking for patterns of meaning; open-coding the data set with the express

purpose of identifying new information; searching for themes by collating

codes and identifying key themes and subthemes; reviewing the themes –

checking they fit or, importantly, do not fit; and refining the themes and

making links between them to generate propositions and complexities

(Braun and Clarke 2006;86: Rapley 2011). Offered as flexible precepts by

the authors this framed the process enacted here.

NVivo computer analysis was considered.  Though potentially useful, this

was rejected out of preference for first-hand immersion in the data.

## Researcher reflexivity

Qualitative methodology highlights the political nature of social research.  It

is a human activity and as such promotes a conceptualisation of knowledge

as constructed and contested.  The logical consequence of this position is

that researchers are also part of that social world and as such should take a

reflexive stance to their research, 'constantly taking stock of their actions

and their role in the research process, and subject these to the same critical

scrutiny as the rest of their 'data'' (Mason 2002:7).

Willig (2006:45) argues that some forms of qualitative research such as

grounded theory 'sidestep questions of reflexivity by leaning towards

positivism' in which it is assumed that 'the data speaks for itself'.  But all

data is epistemologically positioned and standpoint specific (Harding 1987;

Willig 2006).

"Whatever emerges from a field through observation depends on the researcher's position within it. In the same way, whatever emerges from the analysis of a set of data is theoretically informed because all analysis is necessarily guided by the questions asked by the researcher." (Willig 2006:45)

Categories are constructed by the researcher during the research process just as themes and sub-themes exist only as they become designated as such (Braun and Clarke 2006; Willig 2006).

A thematic constructionist approach highlights the subjective view of the researcher as part of the social world that they are investigating. The researcher designates the categories, highlights and chooses the themes, whether they are conducting inductive or deductive inquiry (Braun and Clarke 2006). It is an accepted viewpoint in qualitative research that subjectivity should be a visible part of the project, so that any other researcher could follow the undertaken process of inquiry (Braun and Clarke 2006; Harding 1987; Punch 2005). Equally though, should another researcher analyse the same data corpus, their subjectivity, the social or political 'lens' through which they view the data including theoretical propositions framing the inquiry, will affect the data analysis and hence the outcomes.  In this manner, the choices of the researcher about what to include and exclude, become part of the research process.

Reflexivity, that is to say thinking about the way our subjectivity affects the research,  can be divided into two: First, personal reflexivity is about 'reflecting upon the ways in which the researchers' own values, experiences,

interests, beliefs, political commitments, wider aims in life and social identities have shaped the research.'  Second, epistemological reflexivity  is about engaging with questions such as how do the research questions construct the inquiry, 'How has the design of the study and the method of analysis 'constructed' the data and the findings'; – could the questions be answered differently; would this give rise to a different understanding of the phenomena.  Epistemological reflexivity encourages thinking about the assumptions made in the course of the research (Pryke et al 2004; Willig 2006).  This study has aimed to do this in the accounts above.  However, it avoids the introspection by which some reflexive accounts appear to take precedence over the content of the inquiry (Mason 2002; Punch 2005).

The basic assumption informing this project is that class matters, that it exists historically and contemporaneously and it is an overlooked aspect of therapy. This standpoint has underpinned the theory proposed, the framework for the analysis and structuring of the themes.

I was originally a sociologist with a particular interest in social theory and social structures, who at a later date trained in counselling first as a person centred and then as a psychodynamically oriented practitioner.  My interest in theory and social structures has remained with me and clearly informs the epistemological position taken and the relationship between theory and practice evident in this thesis.

I can only surmise and acknowledge the effect I had on the participants'

discussion. Aware that I would have an effect (Mason 2002; Mcleod 2001;

Willig 2006; Silverman 2011) I moved to mitigate this in several ways: First,

having previously visited I noted the dress of the people working in and

accessing the Sure Start centres and presented dressed in a manner

compatible with both the focus group members, and the staff. Second,

during the focus group recordings I prompted the discussion rather than led

it allowing the participants to develop the discussion and only intervening

when we were veering off too far. But I also participated in that I made

encouraging comments and acknowledgements and purposely presented in

a friendly open manner. Third, originally from the Black Country, I am at

home with dialect, accent, and other localised usage of language. Fourth,

before we recorded I chatted to the participants about their children, and my

own. Quite how effective this was it is hard to say. However, I did feel a

rapport develop between us all and I let it be known that I considered them

as constructing the research with me rather than me as 'objective' observer.

However, being middle class, as defined by my occupation and income, I

have no doubt that that was visible to them and may have affected the

narratives.

## Summary

This chapter has provided a rationale for the methodology and methods

utilised for the research process. How the research questions articulate with

the methods, and how the methods underpin the analytical procedure

demonstrate the link between the research focus and outcomes. A

justification for a theory-informed contextualist/constructionist thematic

analysis (following Braun and Clarke 2006) has been presented.  The

thematic analysis underpinning the next chapter is predicated thus.

The fundamentals of the research process - the data collection, the

sampling process, the participant profiles, ethics and researcher reflexivity

circumscribing the research, have all been addressed.

# Chapter 7

## THEMATIC ANALYSIS OF THE SURE START FOCUS GROUPS

The thematic analysis is theoretically driven and following Braun and Clarke (2006) is constituted as a contextualist, constructionist account. Given that the focus of the study is the class dynamic in the therapeutic relationship, and a class is a structurally-defined social grouping (see chapters 2, 3, and 4) the analysis does not conform to analytic procedures that prioritise individualised and individual narratives. As argued earlier in the study, to understand class, it is necessary to appreciate the habitus and dispositions of both the client and the therapist, to recognise that both professionals and clients are part of an interrelated class structure with different narratives about themselves and others. Habitus and dispositions are shared across a group or class. To articulate the class dynamic, it is therefore, essential to move beyond a focus on the individual. Instead the themes are connected and discussed in relation to evidence suggesting similarity across accounts that as individuals the participants are calling on latent socio-cultural structured accounts of class, constructing themselves as a class, and thereby constructing the class of 'others.'

To demonstrate consistency across the focus groups and thus a 'convincing analysis' it is essential to 'provide adequate examples' from each data set supporting a claim (Braun and Clarke 2006:95). Therefore, whilst the most apposite participant quotes are presented in the text, the full data set for this theme and its sub themes are in Appendix 2.

Terms used are consistent with the approach. The 'data corpus' refers to the complete focus groups transcriptions including the four one to one parent interviews; 'data set' refers to the combined participant extracts associated with a particular theme or sub theme; a 'data extract' is an illustrative section of an individual narrative.

Key themes, sub-themes, and sub-theme categories are hierarchically ordered, with key themes representing the overall significant theme, sub themes representing elements within any one key theme, and sub theme categories reflecting elements within a sub-theme.

The analysis uses actual numbers involved in preference to percentages, which, in a small-scale study, can distort the picture (Punch 2005).

## Thematic analysis stage 1

The initial phase of coding the focus group data corpus identified 34 different categories constituting 8 initial themes (see Figure 7.1). The 3 key themes associated with class, as conceptualised differentially in the preceding chapters, were then identified, and the other themes rejected. The categories within the rejected themes were then re analysed to see if they belonged elsewhere. Where appropriate these were re-allocated.
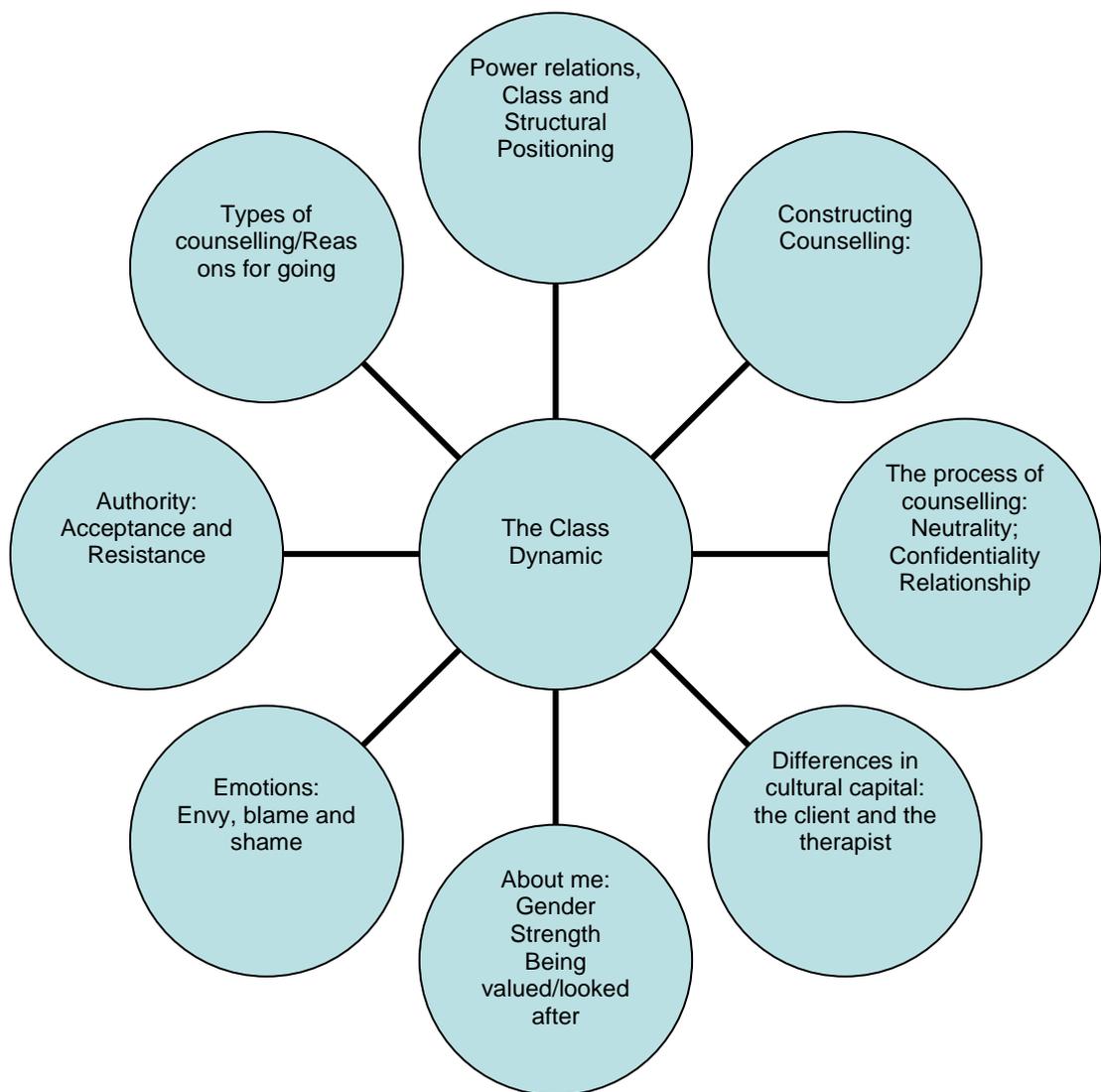
**Figure 7.1: The 8 Initial Key Themes**

Of the rejected themes, 'Constructing Counselling', and 'Types of Counselling and Reasons for Going', were unproblematic: the participants' constructions were accurate and echoed the descriptions of counselling and psychotherapy found on the BACP website. The theme – 'About me' – was subdivided amongst the three other themes, although a more focused sub-theme 'About Me' remained.  Issues of gender were rejected unless they came under another key theme as none were recognisably class-related,

tending towards general findings on gender within the extant literature in gender and counselling. One interesting aspect that was discernable but not class-related, in the sense of class discussed here, was that the gender of the counsellor being male was likened to having a male midwife suggesting a sensitivity to cross-gender, intimate relationships.

The data was then re-analysed and from this, the data sets for each key theme were constructed (see Figure 7.2). A part of this process was the allocation of the separate elements into sub-themes and sub-theme categories (see Figures 7.3, 7.4 and 7.5)
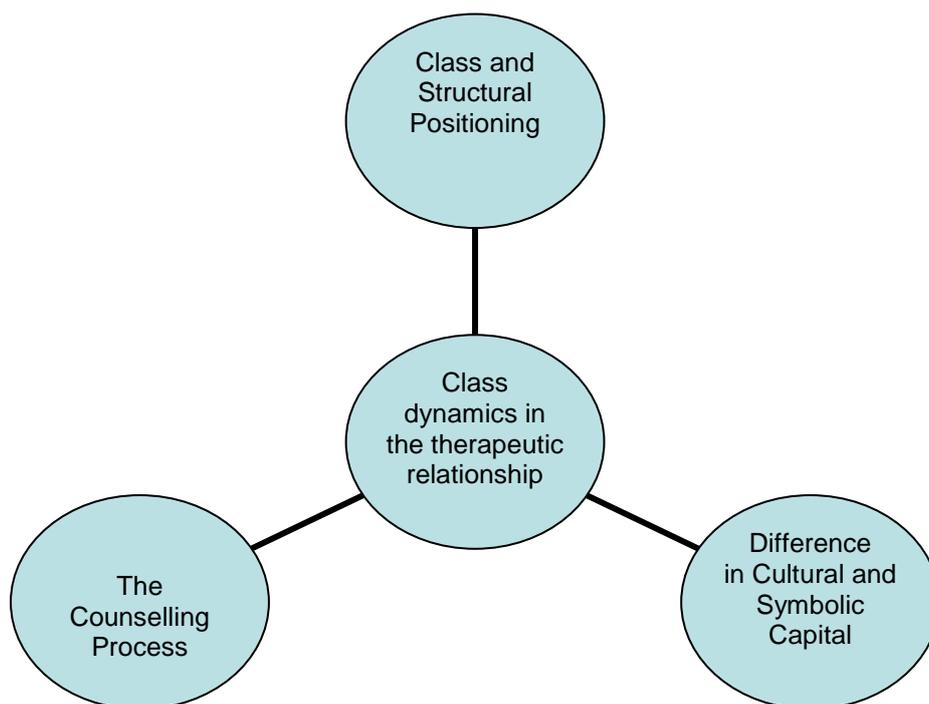


**Figure 7.2: Illustrating the overarching key themes**

## Thematic Analysis Stage 2

## Theme 1:  Class and Structural Positioning
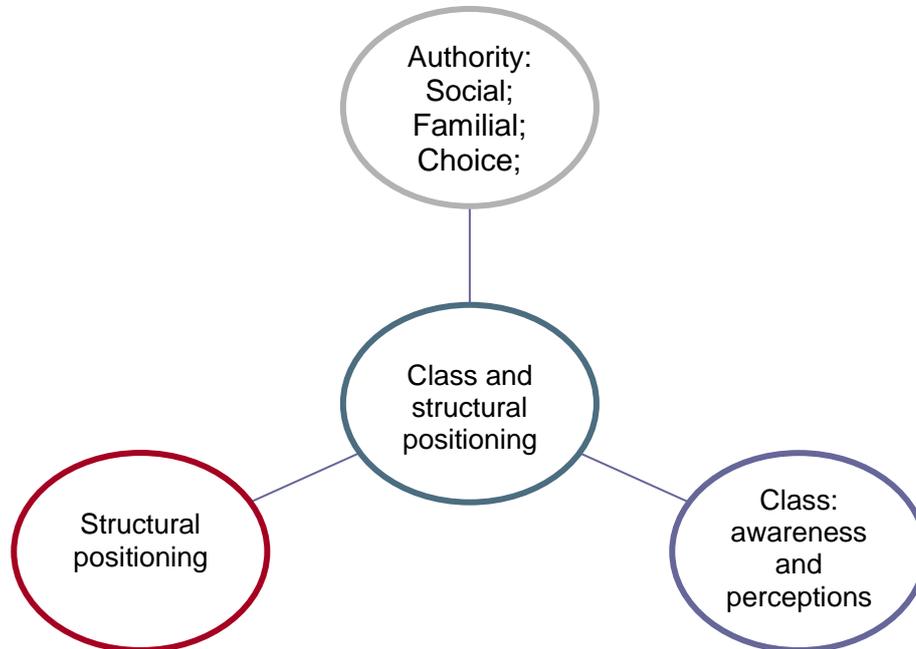


**Figure 7.3: Illustrating the sub-themes to the key theme - class and structural positioning**

As argued in chapter 3, the relational approach to class suggests a fluency that embraces the therapist's world view and identity, as well as the client's. In practical terms, this means that the symbolic or actual class of the therapist and client become visible in the transference, pre-transference and the power relationship.  Other conceptualisations of class discussed in this study can obscure the fact that Marx's two classes, the bourgeoisie and the proletariat exist in a dependent and antagonistic relationship to one another (Crompton 2008).  Although a Marxist analysis problematises the position of the therapist – few are strictly the 'owners of the means of production' (see Chapter 3), it is what the therapist symbolises to the client, what they

imagine their therapist to be, both before they enter a therapeutic

relationship and within the context of therapy, which has import here. The

theoretical assumption is that the therapist represents the dominant class,

Marx's bourgeoisie, in the relationship, whilst the client, the proletariat or

subordinate class, and where appropriate, vice versa.  So for the client, it is

the symbolic role of the therapist, what they represent to the client, and what

they imagine their therapist to be, and, for the therapist, what the client

symbolises for them that defines the dynamic of this aspect of the

relationship.  The authoritative role of the therapist and the acceptance of

middle-class theoretical propositions cement this position. What is argued

here, by drawing on the participants' accounts is that they do precisely this –

the therapist is constructed as representing the dominant class and the

working class (potential) client constructs themselves in a subordinated

position.  Following Marx, this is a relational dynamic.

The obverse of the relationship is the feeling of powerlessness, and actual

powerlessness, experienced by the oppressed group in the face of

domination by the 'other'.  Again, this is evident in the data set. To re-iterate

Fanon's (1967) superior/subordinate position: middle class/working class

relationships, in common with the black/white dichotomy, share a historical

superior/subordinate position within a class-stratified society. Symbolically

and, in material reality, they are also defined in contradistinction to one

another.  Fanon identifies the relational quality of oppression, citing hatred,

envy, anxiety and shame as emotions located within and expressed by both

groups in relationship to one another. Frosh (1999:272) suggests the

content of transference is collective, in the sense that it has grown out of the 'accumulated experience' of one group in relation to another and is reinforced by institutionalised social structures. 'Power relations are the means by which society enters into the consciousness of each person'. The power relationship and the introjected societal structure will be part of all relationships preceding any oral communication. This has import for the parent/child transference and counter-transference as these are suffused with symbolic and literal power, allied to the imagined and real power of parents. In this way the therapist becomes the focus of power in the dyadic relationship, with poor and working class clients readily picking up signals regarding their devalued status (Smith 2010 73-74).

There is no suggestion here of stating that this conceptualisation of class as a relational dynamic is *the* class relationship. It is not. Class is far more complex than that, as argued in the earlier chapters. However, what is suggested is that in the particular relationship OPF therapist and client, class structures the dynamic between them in a number of different ways.

**Sub-theme**
**Structural positioning**

In contradistinction to commentators and research suggesting that the working classes may misidentify and disidentify their structural position and their class (for instance Skeggs 2011), the evidence here suggests that these respondents clearly understood their hierarchical position in a class-based social structure. The groups in this study are particular in that they were not aspirational in the sense that they were not in education or seeking

a career (Skeggs 2011). Neither were they asked directly to identify their class position or that of their counsellor/therapist. However, the evidence here does suggest that their working class identities are constructed on the basis of the dominant classes' 'other'. Comments were not directly prompted by asking about class but arose relatively naturally in the course of discussion, either as a consequence of the discursive process, or in response to the general question 'what might prevent you from using counselling?' Responses citing the attitude of the counsellor included: being not 'equal' not 'high', 'stuck up', 'thinking they are better than you', being 'patronising', the counsellor's use of language, same and different backgrounds, dress, being made to feel small or inadequate, judgment, condescension, and also money and cost. These are all indicators suggesting the participants are aware of where they sit in the social structure. This was consistent across all six groups including the individual interviews. The transcripts indicate that not one of the participants saw themselves as anything other than working class and they were clearly aware of their hierarchical positioning.

The following examples drawn from all the focus groups are quoted extensively and more or less verbatim. Some can be referenced to other themes but primarily illustrate awareness of class and structural positioning through feelings of powerlessness, being devalued, envy, anxiety and shame. Hesitations and agreements such as "Yeah" and "Mm" have been deleted to enable the flow.

Extracts from the data set illustrate how the working class participants

perceived and received their status as devalued and subordinate.  This is a

key theme running through the data corpus but contextualised here within

structural positioning and class:

> KTA19  Think it would put me off if I thought the person would be
> patronising…
> B That's the word I was looking for.
> C Well, the last thing you wanna hear if you're going for counselling
> or you've plucked up the guts to go to counselling is that, you know,
> your problems are insignificant or, um, you know, they're, they're
> putting you down or making you feel small…
> A Inadequate.
> C… Or inadequate or…
> D It does happen in all walks of life doesn't it?
> KTA18.11 Some, feeling like somebody's judging you and being a bit
> patronising about you. ..As if you were talking to a friend so there was
> no barriers like desks and things like that so that you feel an equal as
> opposed to they're above you because they're trained or
> professional.  You're there as… an equal to both of you try and
> discover why you're feeling the way you are really, so yeah, being
> treated an equal.

In extract RB anxiety, anger and shame associated with being in a

subordinate position, not heard and seen only as subject to a regulatory

gaze (Foucault 1987) are present in the narratives.  There is a distinct

structural separation between 'them and us'. RBB also alluded to dress and

the wearing of suits as being "high" and  "… as if she was better than you

and I hate people like that":

> RBA6.10 Especially if you get that feeling that they think they are
> better than you then that does put you off.  Like when I go shopping if
> I get followed by the security guards then I put the shopping down
> and I won't bother shopping in that shop again.  Because they think
> you are up to no good – that's what really puts me off. So if they think
> they are better than you then I wouldn't go again
> RBA5.15 If they dressed like us maybe, not in suits. They look a bit
> high don't they?... I am quite common and when you see someone
> like that you think they're stuck up their own arse aren't they.

RBB5.28 And when they say things like "and one does do this and one does do that".

.

RBA6.16 If you talk about all your problems they think they are better than you because they've got perfect little families and they've got no problems or they just think they are better than you anyway.

RWC25.10 Yeah, cos it was just the sort of aura, is that the right word?... that he gave out about himself, like it was almost like oh well I'm just doing this job because I get paid for it. Not because I like want to help. I'm just condescending towards you for an hour because I get paid…

Direct reference to structural position is exemplified by participants RB, A and RWC, that people from a different background would not be unable to understand their structurally differentiated experience and therefore not understand or empathise with their position.

RBA6.22 Well you wouldn't want them to be from exactly the same background because they would be visiting a counsellor themselves but kind of the same background. Not so posh but not common. RBC7.19 Do they really know what's going on with you, do they really connect with what you're saying. Because you get people saying yeah, yeah I know what you are going through, I've been through it, and people saying I understand but really they don't because they are not opening their minds and thinking if I was like that how would I be.
*(All participants in BR had received therapeutic interventions)*

RWA 29.20 …and I was really like quite scared about seeing this psychotherapist and everything and I was thinking oh my God what's she gonna be like and everything and I just imagined her to be like this really sort of like stuck up and you know…Just really stuck up and quite like judging, judging me and that, and also like wearing really formal clothes …so I was thinking oh my God this is gonna be awful like she's just gonna sit there and judge me and everything, but she wasn't, she was really nice and she was like really laid back and she was dressed in like, she was like dressed down in jeans and everything and she was like "oh hi, you know, I'm such and such and um I work for like, is it the British Board of Psychotherapists or something like that and she was actually really nice.

This perception of being positioned as structurally different to the therapist was present in the majority of the individual narratives and in all focus

groups, and was suggested as a reason for being misunderstood by the therapist. Also present in all the focus groups were similar references to cost and finances such as KTE7.1 "Costs can keep people away;" RWB12.20 "…and be prepared to kind of pay for it. It just makes it more of a rich person's therapy really doesn't it?" In each instance these comments were posited alongside references to not being able to pay and therefore an awareness of a differentiated financial status from those who could afford to pay.

> DH1C 6.11: If you've got enough money you've got your own shrink and that's…
> A10.42 Well if you've got enough money in America you've got one haven't you, you've got one…
> B: yeah, yeah. That you go and see every week.
> C: If you're rich, yeah, and you haven't got a shrink…
> B: Exactly.
> C: … you're nothing, you know, but…

In all the focus groups, represented by the participants' comments from the data set above, there is a strong sense of the manner in which the participants read their positioning from the attitude of others, how they know their devalued status and how this colours their perception of the therapist/counsellor. With these participants there is little difference between those who have received some sort of therapeutic intervention and those who have not. A socially informed imagination constructs the pre-transference with the potential to affect a therapeutic relationship. There is a distinct separation between the therapist and 'me' but at the same time the 'me' is aware of being devalued and apart. Only when the therapist provides the immediate opportunity to challenge these pre-transferences, both in dress and attitude, does a different relationship emerge (RWA29.20).

**Sub-theme**
**Class awareness and perceptions**

This data set illustrates how direct references to the experience of class, or perceived class, differences were constructed by the participants.  Class, as noted here, is referenced  to income, lifestyle, and status, for example KTC7.1 "If they have to pay for it themselves and can't afford it then that would  … prevent them…" The 'us and them' elements are delineated by a completely different lifestyle and, as suggested elsewhere in this study, limited contact with the other classes in the context of authority for instance, teachers, doctors and the police and media images (Skeggs 2011; Liu2011).

*On counselling*
RWD12.23 … and be prepared to kind of pay for it.
B It just makes it more of a, more of a rich person's therapy really doesn't it?
C Yeah, status thing isn't it?
D  It's a status, yeah.
A So it's not necessarily, it might be a taboo for people like us to say "Oh I'm going to go and see a counsellor, but you know, if you're earning fifty thousand pound a year and you've got a high status in society and you're off to see a counsellor, it's just a…
D It's just the same as us going to M….s.(a *local nightclub)*
… it's just a normal thing.
A Exactly, it's just like oh…  It gives you something to talk about at the tennis club!
E "I've got too much money, what can I do?  I think I'll see a counsellor!"
B… but not so normal, for want of a better word, for…
C I think it's hard…
B… people who have got less money.
C I think it is harder, for people who have got less money to access.  I think it is.
B Even though it is more widely available you've still got, you've got waiting lists and it is harder to access.

RWA37.26 Yeah, I was about to say the glasses like that. (*Moves glasses to end of nose and peers over the top*)
E And the clipboards.
A Because then they're like looking down their nose at you.
C And the tapping, sit there (drums fingers) and you just think…
…They need to be on the same level. More or less.
It's like you don't have to relate to me, you don't have to, to have lived the same things as I have lived or, you know suffer what I have suffered…But just don't think you're better than us.…
D But you're not better than us?
B… judge me, yeah, in your, you know…
A Look down your nose while you're in your…
B Seventy thousand pound…
A…fifty quid shoes or whatever.
C Seventy thousand pound a year job
D Yeah, thinking "oh look at her she's wearing fake…"
A Kind of normal… person
E Yeah like on your level, just somebody you're going to get on with.
B Normal person.
C Someone normal.

Apart from the direct references to class based income levels RW's

construction contained reference to 'normal'. 'Normal' in this sense, and as

used elsewhere by the participants, means 'like me' or 'nearly like me', not

"stuck up" or "high" and "different".

RWC39.29  Yeah, same sort of thing they need to be on the same sort of level, they need…… to know where you're coming from.
A Well, you get somebody that's sort of you know, middle class, that's doing the job because they're paid well and you know, they don't actually need to be there but they feel they probably should work to give something back to the community when they've earnt so much money they can't think of anything else to do and then they just sit there with a really bored look on their face like "oh for goodness sake, thank God that money's going in the bank, wonder what time the golf course opens later" and you can just see it.
C But if you've got somebody just, you know, on a normal…
A … Is doing it because they're there because they want to be there.
C Working class, really.
A Yeah, working class, yeah you know, somebody that's worked themselves up to where they…and that's where they ultimately, that's where they want to be, then you know…it's gives off a whole different perspective.
RWB40.15…it's just like an afterthought.  Yeah they've got to really like…

A …Not just because it looks good on their social CV if they're a counsellor.
E Yeah, they've got to really care about their job.

The construction between the participants in focus group RW moves into different territory with the therapist constructed as working their way up from the working class and really needing to care, to be there for them as a client. This appears to satisfy the need to challenge the difference and gap between the middle class therapist and the working class client by producing one of their own. LEA similarly constructs her ideal therapist. These two lengthy extracts RW and LEA demonstrate construction and movement towards a resolution that defines therapy in their interest. LEA had received therapeutic interventions. Her father was a bricklayer at twelve years old and her partner was also a bricklayer.

LEA I know this sounds really, really strange, this is personally speaking, but I find posh people a put-off because as much as I know there's people around there are some people that you walk into an interview and they talk the way they do, but then there's people like Joe Bloggs walking down the street who's from working class who's actually been there who's actually had the family. Where although posh people exist - they're lovely but there are some people that let the money go to their head and that's all that comes across. That's not what most people want. What most people want is somebody who's had a bit of life experience, who they can turn to and feel comfortable with, not somebody who's coming to them with the posh voice and them kind of going to them "well how the hell would you know?" It's not what most working people want. Most people that come to counselling, I presume, are working class unless they're very, very highly paid and they can afford the best. And then obviously they get the best and that's in a different class but most people I've met around here are either very, very, very rich or they're working class. And most people round here I presume want the same as everybody else.

We all go through different experiences and we are all different people and I'm not saying that the person you meet in counselling is going to have gone through the same kind of thing, but if the counsellor is the same type of class or has worked say from school or college and everything else and got to where they want I think class

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does have something to do with it because I think if you put someone who's working class in the same league as with someone who's say an MP who is on a ridiculous amount of money a year as someone who's working 24/7 for their family just to put food in their mouths and rent on the table or housing money and stuff, or whatever I think a lot of people, I think, the classes, I think if you mix the classes you can kind of get a gist of it. I don't know if that makes any sense? If you put a counsellor who has an awful lot of money, a serious amount of money …They can't understand what it's like for somebody from a working class. Unless they've been there themselves. That might be biased I don't know and there's a lot of people out there who are working class who have gone from nothing all the way up but there's some people who've been given it by silver spoons in their mouths but don't appreciate what we've got.

LEA clearly articulated at some length the more disparate and prosaic direct class references in this data-set for example:

LEC7.3 I would rather see someone in Jeans and a T shirt, a bit casual you know, nobody in a suit, you know. Somebody who is down class, not somebody dressed in a suit or serious…

Referencing of class background, as important to understanding the working class client, was present in all groups. Family upbringing however, was only mentioned once in RWA 20.25 but this participant makes an important point about class differences in priorities in mothering – between the need to provide materially for the working class mother and limited emotional support, and the perceived emotional availability of the middle class mother. The extract also overlaps with another data-set, that of 'the acceptance of the cultural capital of the counsellor' in that RWA was accepting the middle class definition of mothering as prioritising emotional support of offspring above the need to materially provide, a consideration and focus for the poor working classes but not for other classes, at least not in the same manner (Bourdieu 1984; Liu 2011; Smith 2010).

> RWA20.25 …I was sort of raised in the same way, you just get on with it really don't you?  I couldn't you know, couldn't go to my mam, you know and sit down and have… chats that you see on the movies…"mum I've got a problem" and blah-de-blah.  "Oh yes, darling, yes" (*said with upper class accent*).  And whatever.  You know, she had four kids, she was you get on with it.  … everyone around you hurts and, and that's it… you've gotta be a very strong person to keep it so much under control and not let it affect you always on the go, she had to keep a job and you just get on with it, you suffer you hurt …

Significantly, across all the focus groups represented by this data set, there is a sense of a homogenous middle class, a group of people who have an easy life, an idealised life, who are therapists for their own purposes rather than for the client and the client's world. Negative constructions of therapists, and the construction and interpretation of the working class experience of actual counselling and therapy, present a profile and a background of the counsellor apart from and different to them and their experiences.  In this section and the previous one it is also clear that they feel misunderstood and misidentified by those whom they perceive as 'above them'.  In each focus group, there were nods and verbal agreement with those who articulated class issues.  There is also a separation in 'them' and 'us' evidenced by statements such as "people like us" and the use of "they" to denote the other class.  The following statement, though not directly mentioning class, further demonstrates the construction of group-based oppositional class categorisation evident in the two data sets above and generally across the corpus:

(*my emphases*)

> RBC10.21  **We** know our depression. If **they** kept coming and listening to us then perhaps **we** would go back to them.  It's just getting to know who **we** are if **they** kept coming and meeting **us** and kept listening to **us** perhaps **we** would go back to **them**.  It's just getting to know who you are, that's the main thing.

The perceptions of those who had not received any (declared) therapeutic intervention were supported by those who had declared direct experience. Only one person, out of the twelve participants, who had received therapeutic support, had had a positive experience of therapy in this respect – RWA. Her therapist equalised the relationship from the start, through her dress, therapeutic style, and as noted below, her demystification of the process.

**Sub-theme**
**Authority**

The discussion in Chapter 3 makes reference to the authority of the counsellor and how social and familial power is enacted in the therapeutic relationship. Although the participants referenced both forms of authority, social and familial, social authority was referenced across all groups while familial was only discussed group KT. Three sub-theme categories structure the following account: social authority, familial authority, and choice and authority.

*Social authority*

Social authority was used as a reference point across all focus groups and was invariably aligned with class dispositions. Often discussed in relation to age – either too young or too old - of the counsellor, the participants situated themselves as being within the right age group – more like 'me' than not like me. RBB5.1 exemplifies this:

RBB5.11.You wouldn't want them to be young would you, because you'd think they haven't got much experience? You wouldn't want and you wouldn't want them to be too old in case they had too many opinions.

RB were the group that had all received therapeutic support of some kind and they were the group that directly articulated the social authority of the middle classes as being inimical to a productive counselling relationship:

RBA3.2. Really like strict. Like meeting the headmaster when you've done something naughty.  Real tension like.

RBB3.12 She had power over me like I was a little kid….
RBC9.3  The way they speak to you.  You don't need this, you don't do that…
RBA10.6 …its like maths teachers gave us a load of work but she knew we couldn't do it but she left us to deal with it on your own.  It's like the counsellor. But that's what I've come here for, I've come here for help not to deal with it on my own…

DH1A 8.6: But social services think I need counselling at the moment. Cos my little girl's in foster care at the moment, it's all going a bit… Well, it's going well now, she is coming home so that's a good thing, but I'm on the waiting list to see one [*a counsellor*] now.  They just want me to sit and talk about my background, my life and stuff, but it's something I don't really like talking about.

DH2C 10.19 I think with, certainly with close bereavements I just, just feel that you should just be given a session, even if it's just one session…I really think my sister should be pushed into a little bit of counselling, you know, just to assess her…I don't want to put it as compulsory, you don't want to back people into a corner…
B: No.
C: … but I think for certain things you should have an appointment just to check that you are dealing, cos it's very easy to walk, to turn your back and just go into your hole, your cave, and say no, no, I'm fine, I'm fine and actually you're not… dealing with anything.

LEB6.1 I appreciate everything that's been given to us…My Mum kicked me out when I was sixteen so without the help of counsellors I wouldn't be here. I appreciate what I have but it's helped me get stronger as a person…

LEA2.1… But, they're sending me to it again, same person, and I did ask is there anybody else because I don't feel like, you've got to feel

connected with them, even though they're a stranger, you've got to feel…

LEA4.43, I wouldn't have liked to say no, because it's their job at the end of the day, you know, I'm no expert but like this was sort of digging back…years ago, over thirty years ago and I thought well if it's took me like thirty years to just suddenly be like this and be told it's because of that…

KTF10.10 No when I was… we was told to go and see Relate and it was in R – well it's no good if you haven't got a car and live here… B… and you have to go to R.
F And it was probably like about eight o'clock at night. But I wouldn't go, no.
KTC…I wouldn't go, why would I go into a room with someone that's gonna, you know, crack the whip on me and telling me nyeh, nyeh, nyeh. I don't need that, I've got that in real life, that's why I come to the   counsellor, thank you.

Underlying these narratives is an awareness of the authority and dominance

of the middle-class professional, the doctor, the social worker and to some

extent the teacher.  The therapist is aligned with these other professionals.

However, there are differences in response to that authority:  There is no

sense of questioning the usefulness of the professional, at least not in this

data set, as for example in "social services think I need counselling…you

gotta deal with it ain't you?" by DH1A,  or RWAs "suggestions…give us

advice…alternatives… build up better coping strategies – different ideas."

Indeed there appears to be a desire for advice and answers, an

acknowledgement of the therapist's cultural capital as in their knowledge

base, but paradoxically a sense of resistance to unappreciated outcomes -

the questioning of the referral KTE "….bullied into it by my doctor", and the

therapist's apparent ability and therefore capital, in being able to define the

course of counselling, evidenced in refusal to accept the authority of the

doctor or the counsellor likened by RBA to the teacher "like meeting the

headmaster when you've done something naughty" or RBB "she had power

over me just like a little kid." There is both an acceptance and recognition of the embodied power and authority of the middle classes, but there is nonetheless resistance.

There is also a reflective attitude taken towards structural positioning and the power of the therapist in why the therapy did not work for them. This is perhaps best exemplified by RBA who both accepts the authority of the counsellor and challenges it, who likens being left to get on with it by her maths teacher who knew she could not do maths, to having counselling. "I've come here for help not to deal with it on my own…" This data-set suggests considerable ambivalence towards the authority of the middle class professional. Authority per se is reviled and resisted but authoritativeness is generally if somewhat reluctantly, sought and valued as useful. The latter suggests the acceptance of the value of education. This paradoxical position appears uncomfortable and suggests a source of social anxiety associated with being in a subordinate position (Fanon 1967).

*Familial authority*

The family and the role of parental authority is a fundamental aspect of psychoanalytically/dynamically oriented therapies and much of the narratives in the preceding section would be analysed in these terms should a therapist discount a reading of class in the dynamic. However, there was only one direct discussion referenced to parental authority:

> KT16.18 …Cos a lot of the older generation *do* think like that. .
> F Yeah, yeah, our parents…

C My Dad's like that – thinks he knows best.  My Dad is like, he'll tell me what do like even now with my kids and I'm thinking mmmmm.
E Oh yeah, my mum's like that.
C "Shut up!"  I have to bite my tongue half the time!
D Yeah

There is resistance here to parental authority but at the same time resistance to the idea that anyone younger than them could be knowledgeable.  Age of the counsellor was referenced similarly in all groups.  The participants were positioning themselves as *the* authority on their problems, which coincides with other references of 'similar to' and 'different from me'.  Notable, however, is that social authority came through in all groups much more strongly than parental authority, not dissimilar to Smith's (2010) findings.   KT is the only discussion oriented thus.  Where mothers were spoken of in a number of groups they were seen as local, supportive and essential to coping.

***Choice and authority***

Lack of choice went hand in hand with authority and the power and dispositions of the dominant groups to both define and to act as gatekeepers to services.  This is evident in both RB's and DH's dialogue above and the following.  Lack of choice can be related to structural position in the sense of lack of money and choice and accessibility of services, gate-keeping by professionals, and acceptance of authority. Money, access and choice is best exemplified by RWC 12.11 that on a close bereavement the sister of the participant found a six-month-long waiting list "something ridiculous like that"  and was advised to go private, "….but then people can't always afford to go private like, I couldn't afford to go and be privately

counselled." And KTF who was referred to Relate some 25 miles away and therefore found it impossible to access without a car or a baby sitter.

Gate-keeping and waiting lists when unable to go privately to see a counsellor was another issue: DHA 2.19 "I've been on the waiting list with my doctor for over a year." And…

> KTF5.40 My daughter was waiting for counselling and she never heard anything …when one of her friends committed suicide she needed some… somebody to talk to. She was referred, but we never heard. And, I mean, she's past it now, like it's, something that was done and dusted so.

Authority and lack of choice were cited as problematic by all groups. Examples included RBA who was "sent" by Connections; KTC whose doctor "palmed her off" to a counsellor "not doing what he should be doing"; KTE who was "bullied into it by my doctor"; LEA who was being "sent" again to the same person who she did not feel "connected with" and although it was "not likely to be any better" was going "because I think well what else do I do if I don't go there"

There is a strong sense of powerlessness and sometimes helplessness expressed by the participants in this data set. Indeed other extracts though not so explicitly, also support the notion that the participants felt powerless to affect change when entering the realm of the dominant and authoritative position of the professional. KTA voiced most clearly the frustrated response that some participants articulated.

> KTA7.7… if somebody's on a waiting list and they don't hear back that can be even more damaging for that person because they feel

rejected then. They've asked for the help, they've plucked up the courage and then they've been left hanging high and dry really. And that's not gonna help them if they…… can't, haven't got the support around them to get them through it.

## Summarising class and structural positioning

The analysis of the three sub themes to the key theme, Class and Structural

Positioning, draw attention to the symbolic and real power differentials and

relations between Marx's two classes from the point of view of the working-

class participants and their disempowered structural position. The vision of

the therapist, drawn by those with actual experiences of therapeutic

provision, and also drawn through the perceptions of those without

experience, is one of a powerful figure of authority, especially socially

embedded structural authority, embodying all that is not for them as the

"down" class, or their kind, as opposed to the "high" class. There are in

these data sets the perception of a therapist formed on a distinctly two-class

basis as the only separation made is between 'me' and the 'other' 'them' and

'us' and the other is 'all that I am not and has all that I do not have.'

Oppositional categories structure the participants' understanding of

themselves, their social position and their class. But there is also an

acceptance of the authoritative position of the 'other' class. There is a hint,

however, of a separation between the professional who could have come

from their own background who has "worked their way up" (LEB) and an

altogether 'other' in this instance suggesting an ambition and longing to

belong, embodying the root of that person's powerlessness in a class based

society.

In psychoanalytic/dynamic therapies, familial authority and the family as a structuring entity are very important themes in the transference. Yet in this analysis it was evident that themes on social authority occurred with far greater frequency than that of the family. This may have import for the therapeutic relationship and the transference as argued in Chapter 3.

There are other issues in the data sets here which do not constitute themes as they were not present across all focus groups or the majority. However, a closer inspection of differences between the participants and the therapist's cultural capital highlights how the former, both accept their place 'consenting to what they have to be' decisively supporting and reinforcing the social order (Bourdieu 1984:471-73), and simultaneously offer resistance to the cultural capital of the therapist.

## Theme 2: Difference in cultural and symbolic capital

The focus group participants made little reference to capital in terms of material or social resources. Direct reference was made to the former by group RW discussing counsellor pay and the price of shoes. And social resources were limited to references to the role of family and friends. These were the exceptions rather than the rule. However, cultural and symbolic capital, were referred to across the groups. The sub-themes constitute references to both symbolic and cultural capital.

**Figure 7.4: Illustrating the sub themes to the key theme - Difference in cultural and symbolic capital.**

**Sub-theme**
**Experience versus book learning:**

The cultural resources of the counsellor, their qualifications and training are resisted across all the groups. 'Experience' was continuously prioritised over 'book learning,' 'experience' being the form of cultural capital relevant to the participants. DH1A exemplifies this when she states "Someone who has just read all the books…rather than having actually dealt with it themselves".

She goes on to suppose that experience would lead someone to "knowing how you were feeling a bit more" than someone who had not had the experience. LEB makes reference to"actual life experience" being "more beneficial" than "going to university" because they "can put you in the right direction." LEA suggests "somebody who's sort of been there themselves, who've had the same sort of experience" as the 'best' type of counsellor.

Prioritisation of experience over book learning is similarly found in other direct references but also indirect references to learning and education such as considering whether support groups are better than individual counselling on the basis that those involved share experiences in common.

> KTB4.21 …counsellors, they train in all the different various things like bereavement, domestic violence, things like that? But to me, unless you've actually been through that situation yourself, I don't think you can help.
> A Yeah, I must admit, how can somebody preach on a subject that they…
> B When they know nothing about…
> A …don't know an awful lot about. So I think yes, in that respect if you're going to somebody it would help if they knew situations.
> F Yeah through the actual situation…
> E Rather than just training
> F …that they've actually been through that sort of situation themselves.
> C It's like the scenario with Weight Watchers – the leaders are all people that were there themselves.

It is clear in this data-set, that, apart from the constructions of the therapist as 'similar to me by having my experience', a direct challenge is made to the cultural capital and dispositions of the professional. The habitus of the participants is different to that of the therapist/counsellor. Knowledge of the disjunction between habitus functions below the level of consciousness and,

whilst the working class participants accept their positioning (Bourdieu 1984), they also have embodied dispositions of resistance to the cultural capital of the therapist, in this instance, through prioritising experience over learning.  Furthermore, in so doing they position themselves, by experience, as the authority on their condition, and the qualified therapist, without direct experience, as lacking such knowledge.

**Sub-theme**
**Claim to social space:**

Bourdieu (1984) identifies the use of and the power to define the use of space, or the lack of power to do so, as an essential class-based disposition.  In psychotherapeutic practice and theory, creating a 'safe space' for therapy, and the 'holding' environment for the client - the time, timings, place and regularity of the sessions - is a priority.  Anything other than this is posited as inimical to the process.  Although the perception of these participants may not differ greatly to oft-voiced objections, about timings and other boundary issues, by those entering counselling and therapy for the first time, when these objections are analysed in the context of subjective class dispositions, a different reading emerges, one that suggests that the 'safe space' and the 'holding' of the client reinforces the cultural capital of the therapist at the expense of that of the client, and that for the working-class client the literal (as opposed to the holding relationship) safe space is anything but safe.  The section above on authority provides a number of examples that fit within the theme of defining and claiming social space but there are also a few others.  The timing of the

sessions both when and where and the time limit provoked negative

responses in half (3 out of 6) but not all of the groups.

> KTC5.2 Like you said about clockwatching as well… Most of the appointments are only for about an hour…
> B  And once a week, or once a month it's not enough.
> C Yeah but some people d… they need more than an hour - but what I'm saying is they go for that hour… but they might need it for a couple of hours that one day – they're really low and they need it for more than an hour.  But come two o'clock, the appointment's one o'clock and come two o'clock, they've gotta go.  And they're really low – can you see what I'm saying?
>
> LEA8.30 And people looking at their watches. That does my head in because you're not supposed to be there on a timed thing, although you are, it's more about talking and if people open up then does time really matter. But unfortunately there's not enough counsellors to go around and that's why time is the worst enemy of the lot. And saying the next client is coming in.
>
> KTB14.15 Even when you can drive you know, you can just get yourself flustered by going somewhere where you don't know where you're going.
> D That can cause problems... … before you get there
> E Strange buildings…
> F Timings.  No, when it's not suitable for families.  But then when I went to see that psychiatrist the once, I refused to go again cos I had to get two buses to see him and I hadn't a clue where I was going.  In the state of mind I was, that was the last thing I wanted to do…So he eventually come to the house and he seen me at the house…
>
> LEB2.25 …but many a times I went and it was like for half an hour and it felt all rushed and that,

The therapeutic literature picks up on time, boundaries, continuity, and

professional attitude, but conceptualises and often separates them into

particularities.  What is suggested here is that, if instead of such

conventional approaches, differences in cultural capital frame the analysis of

these issues, and further, if they are taken together as constituting part of

the unquestioned cultural capital of the therapist, for instance the power to

theoretically and practically define (Bourdieu 1984), this different reading

suggests that the cultural capital of the therapist is not taken for granted by

the working class client but unconsciously it is experienced as embodying

antagonistic class dispositions.


**Sub-theme**
**Dress and Appearance as Cultural Capital**

The appearance and dress of the therapist was extremely important to all

participants across the groups.  The measured thoughtfulness that went into

the responses below cannot be emphasised enough.  These are considered

opinions.  Liu (2011), Skeggs (2011), Smith (2010), all found that dress was

a major signifier of class, either in self-presentation, the dress of children, or

dress of 'other'. In the working classes, when there are few other extant

symbols of capital, dress and the body become the most important signifier

of self.  There are once again, commonalities in the participants' comments

across all groups represented by the data-set. Suits were vilified and

derided as "posh, "and "high," symbolising being "better than you."

RWA30.30 coined the phrase "not suited and booted" and this in various

forms was repeated across the data corpus. The following extract appears in

a previous sub-theme.  However, as Braun and Clarke (2006) note the

narrative extracts can fall into more than one sub-theme.


> RBA 5.16 If they dressed like us maybe, not in suits. They look a bit
> high don't they
> 5.25 A…because I am quite common and when you see someone
> like that you think they're stuck up their own arse aren't they?
> 6.25 B Not so posh but not common.
> A Mine weren't posh she was just dressed as if she was, not posh,
> but…..

B Very high.
A Yeah.  As if she was better than you and I hate people like that.

DH2B 4.1 I mean, not necessarily sort of suits but not sort of jeans and trainers.  You know, someone that's made a bit of effort I think.

LEA4.7 First impressions if they were suited and booted and they were in skirts and suits and everything else I don't think people would gel to them.  I think most counsellors if they go in very smart casual, cardigans and trousers or how they want to dress, that's lovely but I think if there's a lady there or a gentleman there with glasses and suited and booted. I really think that would put people off …. ..You want to talk to people and is there any point in going there in an Armani suit when all they want to do is talk?  Be different if it was in London and you're on Fleet Street and you're a banker.

LEC7.3 I would rather see someone in jeans and a T shirt, a bit casual you know, nobody in a suit, you know. Somebody who is down class, you know, not somebody dressed in a suit or serious, you know.

The participants' comments suggest that being "suited and booted" symbolises middle classness and being "high" or "stuck up" to the respondents.  In two instances, glasses and the way they were worn, were also cited as off-putting, RWA37.26 states "the glasses like that (moves glasses to end of her nose)…because they're like looking down their nose at you." In all groups, suits were discussed as a barrier to understanding and building a relationship with the therapist.  A clear image of the ideal dress for a therapist emerged as someone not quite like 'me' but near enough, smart casual, and wearing jeans and T-shirt (the interviews were conducted in the summer months) as a favoured option.  There was also a sense of how the participants would like to dress themselves given the option and money. This can be most clearly seen in group RB's discussion; they were evidently the poorest of the participants.  Furthermore, and once again, there is a sense of positioning the therapist as almost but not quite 'like me'.  Evident,

also, was how the participants read being valued from the dress of the therapist. Although suits signified distance and being "high" and "stuck up" being smart and casual in dress, rather than "slobby looking" with "horrible hair all over the place" and "BO" (KTC, D and F), signified that they as clients were respected and valued.


**Sub-theme**
**The room as symbolic and cultural capital:**

The room as a symbol of the cultural capital of the therapist appeared very important and what is visible in this data-set is that, far from the counselling 'safe space,' the rooms that had been visited were far from safe or comfortable for the participants. The data set is drawn from across the corpus indicating a strong sub-theme. The room being too small, too clinical and sitting either side of a desk were repeatedly cited as problematic. Comfy seating, warmth, a relaxed or informal environment a "home from home" (RW and KT) were what the participants wanted. Symbolic of how they constructed being looked after was reference to a "nice cup of tea." All groups referred to a drink of some kind.


> LEC7.31 It was the surroundings in the office, the questions fired at you… made me feel intimidated.
>
> KTE.6 Wouldn't want a small room.
> A If you want to go in like an office, well you know like a room sort of like this with a desk but some people like to go where it's comfortable and where they can relax I think, if I had to go…
> C I wouldn't want to be like sat in a Doctor's chair…
> D Or like a hospital.
> E Too clinical.
> B No, wouldn't like to be in a little room.
> C Bit claustrophobic?
> F Yeah. Big room. Comfy settees…

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LEA25 A cold room.  Personally I have this condition which is a pain in the bum.  If a room is cold I think that's terrible. If its warm chances are people are going to take their shoes off, have a cup of tea, feel chilled.  But when it's a cold room it feels so uncomfortable and they're thinking hell I want to get my jacket on and get the hell out of here. But I think if it's comfortable and there's coffees and teas and it feels casual.

Of all the aspects discussed by the respondents, when the room arose I felt there was something in each of the groups, preceding interviewing focus group DH2 that I was missing.  DH2 directly articulated what this was. Some of the rooms that the participants had experienced had been police interview rooms (LEB & DH2A) or they had been  interviewed by other services such as LEC and social workers.

DH2 6.5( *Laughter and conversation between the 3 participants*)
B You need a window to look out of – to see something
A A nice view …something to look at
B Not a room without windows..
C Too small
A Locked
B Not a police interview room!  Laughter
A Or a cell!  Laughter.

LEB2.4 Say for example if it was in a police station you would feel uneasy but if it's in a friendly environment where you feel comfortable.  I think feeling comfortable in that environment and not thinking that you're going to be locked in or you have to stay.   If you wanted to go you should be able to go. If you are in an environment where all the doors are locked and the windows have shutters on and stuff like that I don't think that's a very warm environment.

LEC10.17 The questioning in an office. The room. Across the table…just uncomfortable.  I think it's that bad experience people have had of being in offices and then having to talk about really personal thing…across the table or someone who's there writing everything down.  It's intimidating.

In the light of this information, and in reviewing the transcripts and notes, I realised that there were other experiences which would lead participants to

being in a police or social work interview room.  This is a significant issue in

creating a safe place for clients who may have had experiences of this kind.

Consideration of the room also highlights a difference between the cultural

capital of the researcher and the researched, the client and (most)

therapists.  It is possible that a number of working class clients may have

experienced social work and police rooms or interviews during their life and

it is unlikely these would have been comfortable occasions. To reiterate: the

working classes are more likely to be the victims of crime (Goldson 2000 in

Ferguson 2002) and be victims of domestic violence and sexual abuse,

(Corby 2006) and people in low socio-economic groups are over-

represented in the prison population (Clark and Dugdale 2008).


In contrast to the room in which they would all like counselling to take place,

what they did not want, in addition to the above, was either an office with a

desk between them and the counsellor, or a sterile, clinical environment as

had been the experience of all but one of the participants (RWA).


Resistance to the cultural capital of the therapist is evident here in the

participants' perception of the former's ability to create the room.  However,

their perceptions and comments were also posited in such a manner to

suggest a challenge to the respect and reputation of the services, in a sense

returning the disrespect that they experienced in such rooms.  The rejection

of the room, as defined by the participants, challenges both the therapist's

cultural and symbolic capital.

**Sub-theme**
**Confidentiality as Cultural Capital**

The power to define what is confidential and what is not, embodied in the role of the professional, was an issue for the participants, a number of whom at some time in their life had been subject to or were concurrently subject to the social work 'gaze' and regulation (Foucault 1987). LEB best exemplifies the fear of information disclosed being shared across agencies.

> LEB1.22 Somebody that you can actually trust to talk to and know that that information is not disclosed to anybody…if I tell people this how will they react? What will they do? Will they do something about it?  I think the relationship with that person and the relationship grows over the weeks and weeks you trust them to a point –
> LEB6.19 I had a terrible time because I wasn't able to trust anybody and not being able to trust anybody and thinking oh well the agencies are going to share information with everybody and there's times when its appropriate and there's times when you're scared and thinking what if I get into trouble over this that an the other
> LEB9.35 I always panicked when I got home and thought oh my God, what if she does this, that and the other

Although not all groups cited this as an issue, and thus this is not a key theme, it is nevertheless important to appreciate how confidentiality could be construed given the background of the client.   The other aspect of confidentiality that was discussed in four of the groups was living in tight knit communities where everyone knows everyone else's business.  Some of these discussions continued with the participants focusing on stigma and shame and are referred to below.

> DH2B 2.5.7 I'd probably do it *[counselling]* if possible away from where I lived so that it was somewhere completely neutral, if it was something to do with me and less chance of anybody knowing.
>
> LEA3.6 …And also it was difficult because he knew my parents as well…

LEA4.9.  I think that because of having to go to L and it was at the hospital and everybody knows you and it was like opposite the physio and everybody's in and out and they can see what's happening and L is a gossip town as well that made me feel a bit oh God, I hope I don't get spotted here.

KTE19.40  I think that everybody would know I was going..
F Paranoid!
(Laughter.)

KTA20.1 Confidentiality…… was the other thing. Making sure it's all confidential and….I know in most places it is but… you've gotta build that trust.
C Wondering why you're going.
B …that's quite important in communities where everyone knows one another as well.

Defining the parameters of confidentiality is part of the role of the professional often in the best interests of their service users and clients. However, it also symbolises the power of the professional to define in their own terms what is acceptable or not, what should be or should not be disclosed to others in the professional team.  For the clients, confidentiality, or the lack of it, appears to create ambivalence and sometimes fear.  There was also in the interviews a hint by omission of an acceptance of the role of the professional in defining confidentiality but also a sense of how this supports the rise of an asymmetrical relationship.  RW, the group that contained the one individual who had a successful therapeutic relationship (RWA), conceptualised confidentiality differently to the other groups, presenting the relationship with a therapist as one of confidentiality as opposed to a non-confidential relationship with friends:

RWB 16.20 But like S said…I think with friends… … with friends you can't burden……it tends to just slip doesn't it? People tend to talk and they don't mean to and then it gets round…… but with a counsellor it's confidential and it doesn't go any further than you in the room. … and you don't want your business going around…

A I understand what you mean cos it does slip out doesn't it?
D I'm very careful what I say to people…
C… with friends…
E It does.
F Definitely, yeah.
E Not necessarily intentionally.

Confidentiality as part of the cultural capital of the therapist, who holds the power to determine the parameters of confidentiality, can be problematic for all clients including working class clients. However, the class difference between a person who can take up the offer of counselling outside their community because they can pay for counselling or have the means of transport to move outside his/her community, and consequently protect his/her anonymity, is markedly different to the client who does not have the material means to travel to or pay for therapy and therefore has to accept what is on offer locally.  After the recording in focus group KT had finished, just such an issue arose.  They were reminded prior to the interview (see preceding section on ethics) that their centre offered a counselling service should they require it.  The participants said that they would not use it "because everyone would see me going in."  But this was also the group who had the most difficulty accessing counselling elsewhere.

**Sub-theme**
**Resistance to the capital of the therapist:**

Liu (2011), Prilletensky (2010) and Smith (2010) amongst others, note how poor and working class clients' resistance to the capital of middle class therapists is expressed in actions such as not turning up and non acceptance of the definitions and links made by the therapist. The findings

of these commentators accords with the evidence here. Further, until personal experience demonstrated that it could be deserved, respect and acknowledgment of the reputation of the professional was not apparent in the participants' accounts, exemplifying a rejection of the cultural and symbolic capital of therapists. There was also an underlying suspicion of the position and the motives of the therapist. Their authoritative position was frequently alluded to but distinctively not appreciated. Conversely, there was also awareness that, even if they as an individual would not seek counselling or take it up when on offer, some people would benefit from the experience and, from two of those that had received counselling, a clear recognition that it had helped. Across all groups, the respondents appeared to want to be 'made better' even though they felt they had little choice, through the manner of the referral to define the counselling in their terms. Examples of resistance to the cultural capital of the therapist include refusing counselling in the first instance, for example DH1B "I wouldn't trust a counsellor to help me …would they do the proper job?"; KTG10.23 "…if it is bereavement then, you know, sometimes it's not easy to keep talking about that over and over again…And that's why I refused counselling, cos I didn't *want* to keep reliving it, you know."

> LEC2.6 And I just want to be my own little family and try and get on with life. And you know, put things what happened years ago behind me and just go forward. I just don't like talking about it anymore. I just want to move on. Even my GP's suggested I have counselling. And I keep refusing that [laughter] I say no but she says it'll do you good. She says you know, you need to talk about these issues and you know I can understand that but I don't know if I could…

These refusals to consider counselling demonstrate resistance to the cultural capital of the professional's knowledge. More complex is the resistance evidenced by those who terminated current therapeutic interventions, indicating resistance under considerable pressure to conform to the counsellor's capital. LEC binned the questionnaires' sent to her. LEB took one of the prescribed anti-depressants "then flushed the rest down the toilet" stating that she "didn't want to be like that I wanted to be able to do it myself." Further resistant refusals are exemplified by the following data extracts:

> RBA4.9 …she used to text me saying are you coming to counselling today and I used to say, no, not today. I used to say things like, I'm not very well. (*At this point she became distressed*) I've spoken to the doctors since and they keep trying to get me to go back but I don't want to because I think it took me 100 steps back to what I am now.

> RBBI kept going for about three or four months for an hour every week and then I said look I just don't want to do it anymore and she was like why, why, why, and I said it's not helping and I think I'm ok now. I just didn't want to see her no more, it was like really intense and I just felt awkward.

> LEC7.9. I just didn't want to see her again and she kept trying to ring me. I just ignored the phone calls and my doctor said why didn't you go, and said I just didn't feel comfortable with her. It was the surroundings in the office, the questions fired at you…So… to be totally honest with you it did my head in.

Non-acceptance of the interpretations and links made by the therapist (Liu 2011; Prilletensky 2010; Smith 2010) were also present in the accounts. Two of the most apposite participant extracts representing similar comments within the data-set are:

> RBA Every time I went we just seemed to be talking about the same thing; my family. She asked me about my Nan dying and I told her I had got over my Nan dying and she kept asking me why I felt this

way but I didn't know.   I couldn't tell her why but she still kept asking me. Why ask me if I don't know because you don't always know how you feel.

LEA 4.24 …like the feedback come just way out the blue because I thought well like saying about this lad we adopted I mean, knowing he had a problem, he went back to the best place that could help him. He'd have more help, you know, with people knowing what to do, but I didn't feel that was the key issue really

RBA10.21 goes on to suggest that "…if they kept coming and listening to us then perhaps we would go back to them…getting to know who we are" "Meeting us", "keeping on listening"' and "just getting to know who you are", are the main things.  It is clear that resistance is framed by cross-class misunderstanding and misidentification, culminating in the termination of the therapy, the refusal to go.  Present across the data corpus and adding to other themes the participants' comments signal a disjunction between the perception of therapeutic endeavour, on the part of therapist and client.

**Sub-theme**
**Accepting the cultural capital of the professional**

Two narratives clearly indicated an acceptance of professional power and how the participants were positioned and defined by it.  There is a sense here that both participants accepted the definitions and labels they had been given. Someone had told DH2A that she was an angry child, needing anger management, and there is a sense in LEA's account that parental domestic violence caused her problems.  Both current issues in common parlance.

DH2A 9.28: Cos I was always an angry child I was always an angry child and they wanted me to go to anger management…  It's to do with my mum going. It wasn't so much me, it was my, well seeing my mum, my mum's ex hurting her all the time…
.

> LEA: Yeah it was his dad, real violence, my mum, for like ages, you know.  And just seeing all that, they reckon it does, it affected me really, it's only me that it affected out of the kids there.  I grew up, started drinking, hanging round with the wrong people, getting into trouble, but now I don't like… Come out of that now, you know, I've grown up

Acceptance of the cultural capital of the professional was present across the data corpus but as an underlying narrative rather than a strong presence. As such it illustrates an ambivalent attitude towards the therapist who is strongly resisted within other sub-themes, but here there is an unquestioned acceptance, or at least use, of their cultural capital.


**Sub-theme**
**Strength, resilience and self reliance as cultural and symbolic capital**

As previously noted, the cultural resources of the participants were largely defined as experiential knowledge over theoretical and "book" learning. There was also another resource that was referred to in all groups: their construction of self, predicated on strength and resilience. Posited against weakness, and therefore the need for counselling support, it was clearly a defining feature of the majority of participants across all groups.  More usually associated with working class men, strength and resilience were constructed as a source of symbolic and cultural capital for these female participants.

The discussion in group DH1 refers to the English stiff upper lip and discursively suggests "…but you just get on with it don't you?", at the same time recognising that  "…can be our downfall at times."  Groups KT and DH2 echo such resilience with comments such as "I've managed and I've worked

through my problems and… I think I'm quite a well-rounded human being now." "I just picks meself up." (KTC) "Some people are really strong, and can make, get themselves through it" (KTD). LEC stated that "I'm determined to try and be strong and to do all this myself now". These were oft-repeated sentiments across the data corpus. Also present was the desire not to be labelled or stigmatised as in LEB "I didn't want to be a statistic, I wanted to be somebody who got through it and I did get through it." Usually the discussion was coupled with an example of the strength and resilience as in extract RWA quoted above in the section on class. Another example of how the constructions developed is provided by the following extract:

KTC 7.8 I *did* turn counselling down at one point when I lost a child…
I didn't want to go down that line, because…
E I would if needed be, but… I always think I'm a strong person, so, I mean I lost my mum five years ago and I got myself through that so… Yeah, I think I'm pretty strong.
F Yeah it's like me isn't it? I lost my husband, what fifteen years ago you know, so I got through that. I was pregnant as well. So, pretty strong. Domestic violence. He just, perhaps it's just in the genes.
E Again, lost my mum five years ago so… I got through that.
F I was offered counselling.
E You know. I didn't wanna… I did go on, as the Doctor did, put me on antidepressants because…
B I was offered that
F I was the one that was like keeping like the family going while, you know, everybody else was grieving.
F Then when everything had settled I sort of did have a bit of a breakdown and I did go on antidepressants but I got myself off those and I thought well you've just gotta get on with your life… You know, got my own family so…

KTA10.44 Thing is I think if you've got kids anyway especially us lot we've got little children you can't fall apart in front of them. That's what kept me going.
B You can't walk round the house crying your eyes out every day. Your kids are going think "well what's going on?" so if you need to cry you can control it enough to do it in private, when you're in bed or something like that, you know.

The manner in which the discussion developed is most clearly expressed by group KT, "…eventually end up turning to counselling" (KTC) or more pertinently, counselling for the 'weak' KTB "… a stronger person will last a bit longer than a weaker person", and KTC "…weaker one will just turn round and go to a counsellor straightaway, whereas somebody who's got a strong personality might leave it for a few months…" . However, most of the participants in the other groups posited counselling as a last resort, as in DH2B "... I sort of I try and deal with things myself, so I don't know.  I think it would be a very, very last resort before I went to counselling."  Two participants who thought otherwise were RWA, who had received successful counselling, and LEB "…but it's helped me get stronger as a person, I've had to because I've had to learn how to deal with not having any family at all…"  Notably, both saw counselling as a means of gaining strength and becoming resilient…  I didn't want to be like that I wanted to be able to do it myself" (LEB).

Towards the close of this part of the discussion in group KT, all participants stated that they would not go for counselling and laughing, said that they were strong enough to cope with almost anything ( "I'll just sit in the corner with a bottle of wine – I'll be fine") and that there was a stigma attached to it ("..that if you go then…you're weak.").  There was also was some recognition of a line that could be crossed.  "But if I've been low, then perhaps yeah I probably would if I was really at rock bottom." (KTB).

Counselling is constructed here as a last resort and as a challenge to those who see themselves as strong. In group KT, who discussed strength as an oppositional category to weakness, that strength and resilience were an important part of their individual sense of self and *their* cultural capital. The evidence here suggests that strength and resilience are perceived by the participants as part of their cultural capital and that counselling challenges this position and undermines their sense of self and their self-reliance.

**Sub-theme**
**Constructing counselling ' for me.'**

The prevalence of noted experiences of 'not being looked after, was high across the data corpus, for instance RWB, who attended NHS psychological services:

> …and he just sat there and he just picked at like everything I said, like he was like "oh why do you think you feel like this," well, that's why I've come to you, so you can help me sort of thing. And then he was like "oh well I'm going to have to go and speak to my boss," the actual doc, like the doctor and I was like right "OK how long's that gonna take?"… he's like "you'll have to go away for a couple of hours", I said oh "don't bother." So it kind of like put me off a bit…

Additionally, there was plenty of positive imagination of how therapy could be constructed as a resource for the working classes, as represented by these groups. These images are both drawn in opposition to actual experiences, and from the perceptions of those who had not received therapeutic interventions. In addition, they draw on sections above (therapist dress, the room, and the defining of social space) and from Theme 3 – The process of counselling. This specific data set can be divided

into four sub-theme categories: inform me; make me comfortable; be friendly

and remember me; and be aware of presentation.


### *Inform me*

Quite clear was the desire to be informed.  This sub-theme category

overlaps with the counselling process.  The two data-sets suggest that the

participants wanted to be informed about the process, the form of

counselling, what they can expect, the timescale, including time to review

progress, and alternatives if progress is not achieved.  Indeed, the

successful counselling received by RWA included such information.  The

desire to be informed is most succinctly proposed by RBA but was evident in

shorter propositions across the data corpus.


> RBA5.5 I didn't know why I was there…I'd like them to talk to me first and tell me what they could do what could happen, like say in three months – like progress.   Be down to earth and let you talk about what you think you should talk about first and then say let's talk about this for this week and next week let's talk about something else… Explain what their job is and what they are going to do.  How long the sessions are going to take and how long you are going to need counselling for.  And if it doesn't work then suggest something else.

Being informed about the process of therapy was construed as the opposite

to experiences of not knowing about the process or the type of counselling.

This threaded through the themes as presented here.


### *Make me comfortable*

A relaxed atmosphere, the room and comfort, symbolised being looked after

for the participants.  Eschewing a professional environment, as clinical or

like police/social work interview rooms, the preferred option across all

groups was comfy sofas or chairs, a "Home from home" (RWE28.17) and,

for instance, "I'm sat on a nice comfy chair so I'm relaxed and that" (LEA).

One quite significant request in the data corpus, but easily disregarded or

overlooked as short references, is to having a cup of tea.  Such cosiness is

generally not considered acceptable in the professional therapeutic space

but is evidently important to these participants as a symbol of being looked

after and a recognition of what they would expect as a source of relaxation

and comfort in their own lives – a bit of time out.  The extract from LEB

exemplifies the reference:


> LEB4.1 I think what would be helpful if there was tea and coffee
> making facilities.  I think a lot of people when they go to counselling
> they're a bit shook up and that would be useful because it would calm
> people's nerves down.


In a jocular fashion group KT revealed how and when they felt looked after

proposing burning candles, relaxing music, Bacardi and coke or G&T, foot

massage and someone washing your hair.  Though presented in a light

hearted fashion, their construction is an indicator of an unconscious desire

to be taken care of through symbols from both their own world, and that of

the 'other' and thus out of reach but still desired.


### Be friendly and remember me

Friendliness of the therapist appears as a relatively strong factor in the

accounts across the data corpus.  There is a sense that the meaning of

friendliness in this context is coupled with a relaxed professionalism as

opposed to chumminess and hence possible collusion.  The initial greeting

and introductions were coupled with friendliness, as in RBA ".. she was

alright because she introduced herself and that…" and KTC "Like you know

if you went in, and you know, like how are you Mrs so and so or you know,

come and sit down". Direct descriptions were provided, for instance in…

> LEA8.13. Somebody who's sort of cheerful themselves, who's, who's not gonna like have a straight face and you know somebody who makes you feel relaxed and, and not sort of on edge in a way.

> RWC1.27 Somebody who for me if I walked into a room and they were very miserable, not very happy, you feel uneasy with them - they just don't come across very nice.

> RBA8.35 I'd like them to talk to me like a friend instead of like a professional but in confidence. Not so strict.

The therapist's neutrality and desire to promote the (negative) transference

(see below) without prior explanation appears to confuse and create

resistance in the working class clients as represented here.


Being remembered did not appear across the data corpus. However, when

it was alluded to by three participants, it was presented as a symbol of

caring. KTA 17.4 proposed that remembering somebody "…shows you

actually care then…You know rather than just being like a number or a piece

of paper or a statistic…"


### Be aware of presentation

Being a valued individual was read by the participants through the manner

of therapists' self-presentation, the process of informing, the comfort they

were accorded, and the professional friendliness of therapist. Part of being

valued also appeared associated with the dress of the therapist, addressed

in detail above.  To re-iterate: "suited and booted" was dismissed as distancing and inappropriate to forming a useful relationship.  But also, when deliberating dress, three of the groups suggested that being valued could be read in the therapist "making a bit of an effort" DH1E  Whilst the reviled suit remained an excluded option, a "smart casualness" or "…jeans and T-shirt" appeared as a  representation of being valued as if someone had taken the time to look good for them.

## Summarising difference in symbolic and cultural capital

The thematic analysis of the nine sub themes of key theme 'Difference in Symbolic and Cultural Capital' highlights how the participants constructed their perceptions and reflected on their experiences using embodied dispositions related to their structural positioning.  The cultural capital of the therapist is strongly challenged and resisted by prioritising experience over education and a re-claiming of social space, whilst paradoxically the labels that professionals give them are appropriated to make sense of their lived experience.  Challenges to symbolic capital, though not so evident in these data-sets alone, are nevertheless present and present more strongly when coupled with the participants' comments in Theme 1.

What is also evident here is what it would take for therapy to be for them.  A genuinely safe room offering relaxed comfort, a lack of formality in both dress and manner, providing a professional friendliness, and a cup of tea, are constructed as making therapy suitable 'for me.'

## Theme 3: The counselling process
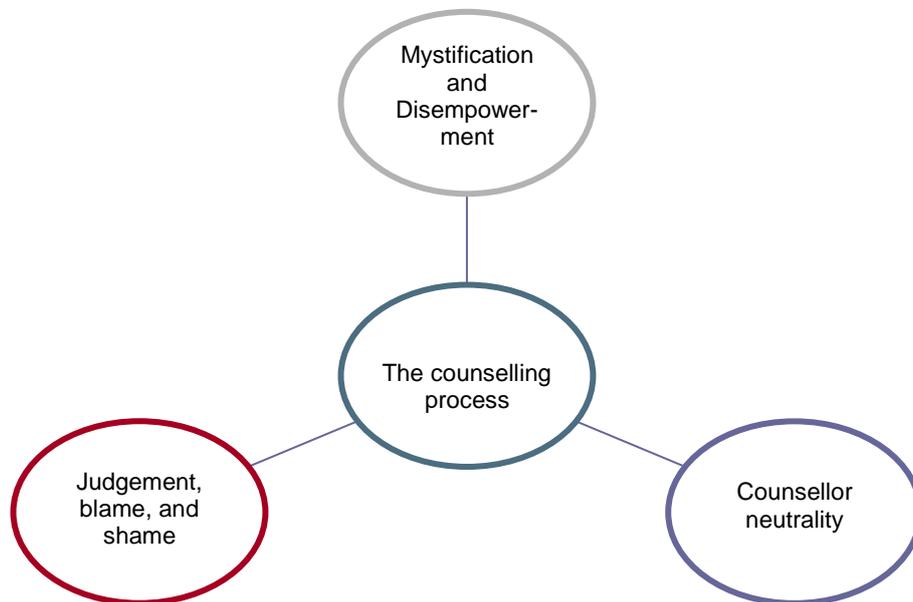


**Figure 7.5: Illustrating the sub themes to the key theme - The Counselling Process**

The experiences and perceptions of the focus group participants inform constructions and interpretations of some of the key aspects of the counselling relationship (see Figure 7.5).  The sub themes were present across the data corpus.

**Sub-theme**
**Mystification and disempowerment**

The transcripts reveal that, with a singular exception, all those who had received therapeutic interventions of one kind or another had not been informed about the process of the therapy, and as a result felt disempowered and somewhat bewildered and designated 'wrong' (Skeggs 2011; Smith 2010).  Of the two that had been informed, RWA found the detail of what she could expect very helpful.  Not knowing what she was

walking into, she appreciated the openness and clarity of the therapist, who

discussed confidentiality, explained the process and described what she

could expect:

> RWA31.16 .. and it was sort of like plain there, black and white,
> …almost explained to me like as if I was three years old, loved it, you
> know because you don't have the poncy words going back and
> forwards that you can't understand and you have the dictionary next
> to you trying to figure that one out but it was sort of - here, this is what
> it is, this is what I can offer to you, you know. I loved it, I loved it,
> because as I say it was an informal thing and I could get in, pour my
> heart out, laugh, you know, be silly, be stupid…I like the fact that
> when I went, they said …if you don't want to talk, you just want to sit
> but you don't want to sit on your own… Feel free, I'll just sit in the
> corner and do some paperwork …you can talk or you can just sit in
> complete silence for the entire session and we don't have to do a
> thing. And you know, I liked that.

A's description was enthusiastic and animated and suggests that such

openness may go some way to demystifying the relationship and the

process, and equally empowers the client to make decisions and to actively

participate.  Her testimony was in direct contradiction to the experience of

others whose therapeutic experience spoke of distancing and mystification,

thereby accentuating the power differential (Frosh 1999): For instance, RBA

"… they didn't tell me anything – nothing about how she worked. She didn't

say what the outcome would be, or how long I would be with her…I didn't

know why I was there". RBB reported that being told about the process

would have enabled a better understanding about what was being

experienced as it was "I don't know what I was experiencing was right."

There was also a perception of not being heard, such as RBB, "and they sit

there as if they haven't got a problem in the world and you are trying to

explain yours to them and it's like do they really want to hear it?" and RWB

"Somebody who understands you" with RWA responding "Ah no, they don't have to understand me, just listen".

Further mystification appeared to be connected with the both the lack of feedback (see below in counsellor neutrality), as exemplified by KTA who reported talking and talking never seeming to resolve anything, and not receiving any feedback which was needed or at least some reassurance. This was a common discussion point across the data corpus but so too was a reporting of a lack of contextualisation of the feedback received. Two extracts exemplify this:

> LEA 4.24… like the feedback come just way out the blue….but I didn't feel that was the key issue really…I wouldn't have liked to say no, because it's their job at the end of the day. I'm no expert but like this was sort of digging back: … years ago, over thirty years ago and I thought well if it's took me like thirty years to just suddenly be like this and be told it's because of that…

> RBB3.17 …and we just never seem to progress. Every time I went we just seemed to be talking about the same thing; my family. She asked me about my Nan dying and I told her I had got over my Nan dying and she kept asking me why I felt this way but I didn't know. I couldn't tell her why but she still kept asking me. Why ask me if I don't know because you don't always know how you feel.

In each instance, from a counselling perspective, it is not difficult to read where and what the counsellor might be doing. But utilising a class analysis, the lack of demystification through clarity, description and careful interpretative linking (amongst other things), supports the continuation of a structurally-informed, therapeutic relationship that entrenches the power of the therapist at the expense of empowering the client. Those who had not experienced counselling also held negative perceptions about the process

likening it to "the couch", "white coats and clipboards" and consistently little or no interaction.

The working-class clients wanted a response – to know that they mattered (Liu 2011; Smith 2010). They voiced this in the terms of what they would like and appreciate but also in the evidence suggesting that clarity at the beginning of the process, and a positive stance to demystifying therapy, assists in developing the therapeutic relationship, as in RWA. Notably this individual is the only one who stayed the course of therapy. The others felt perplexed by what they received. None apart from RWA had received any indication about the process or the form of counselling. Links were not made or tested and interpretations were presented that did not make sense to the client, creating confusion and mystification. The majority of those who had received counselling or other therapeutic interventions believed they would receive answers as to why they were feeling as they were at that moment in time, and had no inkling as to why their primary family was of interest to the therapist, or why links were made to the past. Most of those with experience sounded thoroughly confused and angered by the whole process. All, apart from RWA and LEA, prematurely terminated their therapy, that is, 10 out of the12 who had received some form of therapeutic intervention.

**Sub-theme**
**Counsellor neutrality**

Neutrality and distance may be maintained by the therapist to aid the transferential relationship. However, as previously argued (Chapters 3 & 4) a class-based therapeutic stance questions this, as many commentators

have noted (e.g. Frosh 1999; Smith 2010). The narratives also speak to an underlying inability to question and ask. There is an acceptance here of structural positioning of both the therapist and the client. To reiterate Smith (2010:106), if the client's experience is one of 'relational incompetence', exclusion, isolation and 'not mattering' to the dominant groups in society, then the neutrality of the therapist can result in clients sensing 'that their feelings and thoughts do not matter', a repetition of their daily lived experience. There is evidence throughout the data corpus that this was the experience of being a client. Some further examples follow: given the importance of neutrality to psychoanalytic/dynamic oriented therapy and the general absence of challenging it from within, most especially within the context of class dynamics, the five most apposite extracts from different groups follow:

> RBB.2.28 I thought counselling was when you went and talked to them and they talked back to you but she didn't talk back to me really. She didn't ask why did that happen, she just said well what happened next. It was just like me telling her a story, it wasn't like having a proper conversation.

> KTC4.28 So has it resolved anything do you know what I mean? If they need feedback, rather than just talking, and all they're getting is nothing, like a blank wall, then they'll come away thinking why did I bother doing that?... they could feel like it's a total waste of time

> LEB5.1: … but it's because I'm an only child, and I've got no brothers or sisters, and it's hard not talking you know, and it's just nice to know that there's somebody there to listen to you. He seemed to listen to me…but then it would've been nice to have something come back to me…

> LEA2.10 I just, I didn't feel anything there, I didn't, I didn't find it easy to talk to them at all. I think the way he sort of just sat there glaring at me, without sort of like blinking or anything…if I was saying something…he just… … Just didn't get no feedback. I didn't feel, comfortable, I was all right talking to him…I thought that when you

have counselling, it's like a two-way thing, …I didn't really feel that I was getting anywhere

LEC3.27 like when you're talking it's nice to have somebody saying "Yeah. I can see what you mean," but there was just nothing until the end and then you sort of like have this silence and then they sort of said things, but I don't know [laughs]. I mean I wasn't expecting for a miracle because I know miracles never happen but [laughs] it's just nice to have some, something.

Smith (2010:106) suggests the client will not return if the experience of the relationship with the therapist is too painful, that the client 'senses that their feelings do not matter'. As noted above the one participant with a positive experience of demystification and receiving feedback stayed the course of the therapy and was clear about how much it had helped her and why. It is worth noting that another of the participants with therapeutic experience also stayed the course of therapy and did not prematurely terminate, but her experience was markedly different. As one of the individuals interviewed separately she disclosed that she had been abused physically and emotionally as a child by a member of her family. The experience of abuse is suffused with a sense that the child's feelings are ignored or do not matter. Therefore, it is not difficult to speculate – and that is all it can be from a distance – that the painful therapy was born in a similar manner to the abuse she had received as a child. Indeed, her description mirrored this. She was in the process of refusing to return.

**Sub-theme**
**Judgment, blame and shame**

This sub-theme is split into two sub-theme categories: Judgement and blame, and Shame.

***Judgment and blame***

Feeling 'wrong', being blamed, and the inability to be 'right' , or what the dominant dispositions and definitions call for (Chapter 4), coupled with a lack of positive images and representations of the working classes (Smith 2010) is experienced by the latter as individualised judgment and blame associated with not being 'right.' In other words, working class individuals, experience themselves as not conforming to largely middle-class dominant perceptions and values. As consequence they feel 'not right' or 'not proper' (Sayer 2005; Smith 2010). There was consistent reporting by the participants of actual and perceived judgment, blame and being put on the spot. For example, RBA, B and C all referred directly to being judged, being told it was their fault, blamed, being continually questioned and put on the spot. RBC stated that "Sometimes it felt as if it was my fault and sometimes not. It depended on the questions he was asking… I just stopped the counselling and wouldn't go back to him". KTB felt "like somebody's judging" her and "being a bit patronising." DH2C felt similarly, getting the "impression they were judging me" and "you don't want to be judged". LEB felt on the spot with questions being posed all the time: "she kept pushing these questions and pushing them, and I felt that small and I just cracked. I just didn't want to see her again and she kept trying to ring me." LEB went on to state…

> …you feel like oh god what have I done wrong, you know? Because that's the impression - what have I done wrong to be like this with B [*her child*]. Do you know what I mean? And you feel like everyone's ganging on you.

RWD felt her counsellor picked at everything…. "and then it's taken me now a good couple of years to actually build up the confidence to actually go and speak to a counsellor - very off-putting."  LEA experienced her counsellor as glaring at her silent and judgemental.

An individual and individualised reading of these narratives might lead to the supposition that these are feelings associated with paranoia.  But, as a symptom of structural positioning, the group experiences of the participants accord with the literature and research about class (for instance Liu 2011; Skeggs 2011; Smith 2010).  These feelings are part of the dispositions of the working classes, how they, as a class, emotionally respond to their devalued status.

### Shame

Blame and judgement, phenomena in their own right, also overlap with the experience of shame.  Sayer (2005:152) comments that class-based shame is

> "a complex emotion evoked by failure of an individual or group to live according to their values or commitments, especially ones concerning their relation to others and goods which others also value, so that they believe themselves to be defective"

For Sayer, shame derived from the experience of lack, rooted in the inability to measure up to the dominant mores of society, is a low level, barely conscious, sort of emotion, difficult to articulate but nonetheless feeding into a sense of self-contempt and low self-esteem.  Shame is a feeling of inadequacy and public humiliation acknowledged only through the use of

euphemisms. Sayer (2005:153) identifies three forms of shame connected with being a member of a dominated group: - aesthetic shame in body and appearance; performance shame such as the inability to find employment or provide for the family; and moral shame – the inability to be "proper" to live in acceptable ways by the 'invidious comparison with others'. Moral shame underpinned some of the narratives. DH2A's daughter was in foster care. In her considerations it is possible to see that her life and that of her daughter have not been the norm, not the acceptable form.

> DH2A 8.6: But social services think I need counselling at the moment. Cos my little girl's in foster care at the moment, it's all going a bit… Well, it's going well now, she is coming home so that's a good thing, but I'm on the waiting list to see one now….They just want me to sit and talk about my background, my life and stuff, but it's something I don't really like talking about.

Similarly, LEB experiences shame in relation to her 'unacceptable' parenting both of her own daughter who she was unable to protect and her own mother's abuse and neglect.

> LEB6.16 I had a terrible time because I wasn't able to trust anybody and not being able to trust anybody and thinking oh well the agencies are going to share information with everybody… you're scared and thinking what if I get into trouble over this that an the other…

However, given the framework circumscribing the questions, most expressed shame as related to counselling, mental health problems, labelling and stigma. Embarrassment at failing to cope, being weak, feeling put on the spot and stigma were cited by group KT. Group RW discussed the stigmatisation of counselling as related to mental health, depression and severe lack of self esteem. But they also challenged themselves by thinking

about ways that stigmatisation of mental health problems has changed over the years, mostly through celebrity glamorisation, making it more acceptable.  High profile cases of "going into rehab" were mentioned as undermining stigmatisation and labelling.  The discussion in group RW concluded with two declarations of participants receiving counselling, one of whom, A professed to not being ashamed of it.

> RWA. I went when I was in my teens and I went when I was in my early twenties… and I think it did me the world of good.
> And I don't think it, some of you feel ashamed, but I'm not ashamed of it.  And I'm not ashamed to tell people I had counselling and I don't think there's anything wrong with it.

However, according to A (RW41.17) her partner felt ashamed that she went for counselling "the look on his face…It's like pure shock.… as if oh my God, get away from me, you've been in counselling." … "thank you, you know, don't give me the look, oh my god, get the cross and the holy water out, but it is, it is the sort of look on their faces."

LEC11.24 was ashamed to have revealed "too much" in the counselling "caving in" at sustained questioning. "I was embarrassed, not embarrassed, I don't know.  I was cross because I came out with things that J [her partner] didn't know, but he was OK." Later, it appeared that he was anything but OK about her going for counselling, seeing it as weakness on her behalf and stigmatised.  In RWA's and LEC's accounts, the public shame and humiliation of not coping or being strong is experienced by them and their partners as a challenge to perceptions of working class constructions of strength, and their self esteem.  Feelings of inadequacy and self-contempt,

though not strong are discernable in these narratives, but are also evident in the narratives of other participants. RWB, who declared feeling shame about receiving counselling, also stated that "there's no harm in feeling ashamed...it doesn't mean you are crazy or crackers"

Shame, as constructed here, is allied to mental health, and receiving counselling. Coupled with earlier accounts about being weak and consequently receiving counselling or strong and coping, moral shame (Sayer 2005) appears to be linked with not 'being proper', that is, the ability as a strong working class woman to cope with all that might occur in life.

## Summarising the process of counselling

The experience and dispositions of the focus group participants enabled them to resist counselling as defined by the embodied dispositions of the 'other.' Lack of interaction is perceived as a class-based non-interest and is found to be both confusing and disempowering. As a result, a lack of interaction in the therapeutic relationship supports the process of mystification, disempowering the client.

When the working class client's experience of counselling mirrors the exclusion, isolation and not mattering, the 'relational incompetence' they feel in respect to the dominant and elite groups in society, then the stance of neutrality by the therapist can result in clients sensing 'that their feelings and thoughts do not matter' (Smith 2010:106). The class-located feelings of not mattering are compounded by perceptions of judgment, blame and shame,

as Fanon (1964) and Sayer (2005) have argued feelings associated with being the dominated 'other'.

## Chapter summary

This theory driven, contextualist, constructionist, thematic account of the focus group discussions identifies three key themes of import to the manner in which the class dynamic impacts on the therapeutic relationship. The first theme, Class and Structural Positioning suggest that the therapist is seen as a powerful figure of class authority embodying middle class dispositions and values. Based on the evidence, it is argued that the consistency in accounts speaks to a relational class dynamic, an 'us' and 'them' approach whereby the working class participants structure themselves oppositionally to the dominant class, as the dominated, relatively powerless group. The therapist, either through experience or perception, represents the dominant elite classes to the participants. Across all the focus groups there is evidence to suggest that there is an overarching sense that classes other than their own, are as one, in other words, the dominant and powerful 'other'.

The second theme, Difference in Cultural and Symbolic Capital, provides an analytical breakdown of how the embodied dispositions related to difference in cultural, and to a lesser extent symbolic capital impact on the therapeutic dyad. Resistances, such as prioritising experience over education, re-defining and re-claiming of social space, and challenging presentation and dress construct a notion of therapy as not meeting the participants' own

needs. Conversely the participants constructed their own cultural capital as self as strong and resilient, and experienced.

The third theme, The Process of Counselling, takes the analysis into aspects associated with engagement in therapy. The evidence suggests that therapeutic distance and disengagement, exemplified as the lack of explanation about the process and what to expect, is perplexing to the working class client. Neutrality is received as a repetition of socio-structurally generated not mattering, being overlooked and not heard. Similarly, there is a perception of judgment, blame and shame mirroring the social discourses that blame and shame those who are unable to live up to the essentially, middle class aspirations and mores of a neo-liberal, individualistic society (Liu 2011; Sayer 2005; Smith 2010). Unsurprisingly, of the twelve participants who declared having experienced therapeutic interventions, ten had prematurely terminated the sessions, and the eleventh as a social work referral, was in the process of trying to refuse to go. Only the twelfth, who had received a very clear exposition of the therapeutic process in the first instance and who found her therapist relaxed, and professional, but informal, stayed the course of therapy.

# Chapter 8

## THEMATIC ANALYSIS OF THE COUNSELLOR INTERVIEWS

The thematic analysis of the five counsellor interviews followed the same procedure utilised for the focus group analysis, that of a theoretically informed, contextualist, constructionist account. The interviews were conducted under the same ethical principles as the focus groups with the same level of anonymity and confidentiality. Questions were similarly oriented, but the counsellors were directly asked about class if it did not arise as a consequence of earlier questions. The questions were flexibly deployed as each interview developed differently. All the interviews were recorded and transcribed.

As the interviews progressed it became apparent that all the counsellors practised within a humanistic/person-centred framework. The theory and practice differs between psychodynamic/psychoanalytic and person centred frameworks. At the risk of over-simplification, in psychodynamic work there is recognition of, and a working with, the unconscious through the interpretation and use of transference, coupled with an awareness of the importance of primary object relating. In order to develop the transference, relational neutrality is observed. In person-centred frameworks there is a focus on empathy, the here and now, and the core conditions (Rogers 1951). Far from psychoanalytic neutrality, the person centred therapist prioritises relationship building. The latter is apparent in the counsellors' responses.

Of the twelve focus group participants' who had experienced some psychotherapeutic intervention, it is equally apparent that at least some if them had received some form of psychoanalytic/dynamic intervention. Given the important differences in practice (outlined above), this means there is a disjunction between the focus groups' experiences of psychodynamic/psychoanalytic therapy as neutral, working with unconscious processes and exploring the primary family relationship, and the therapy offered by these five counsellors who emphasise the role of and the need for relationship building.  Keeping the two theoretical orientations in mind, the consequent disjunctions are addressed, as they arise and in context, within the analyses.

## Thematic analysis

The first stage of the thematic analysis constituted fully categorising the transcripts.  Twenty seven categories were identified as similar to or developing the focus groups' discussions.  For ease of cross-analysis, between the two sets of participants, and given that there was overlap between the two data corpora, it was decided that the same key themes would provide an appropriate framework.  Differences were catered for within the sub themes and the sub-theme categories. The following key themes (figure 8.1) correspond with the key themes in the focus group analysis.
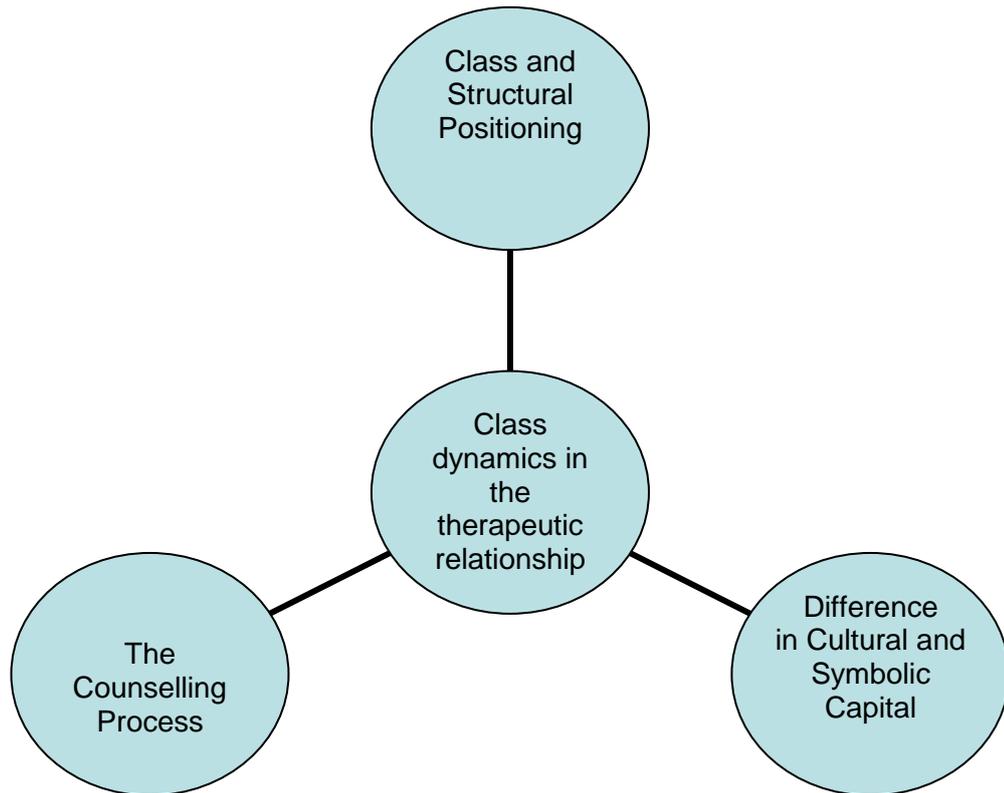
**Figure 8.1: Key themes used in analysis of the counsellors' transcripts**

## Theme 1:  Class and structural positioning

There are two sub themes in this theme: Class, and Power and Class

(Figure 8.2).
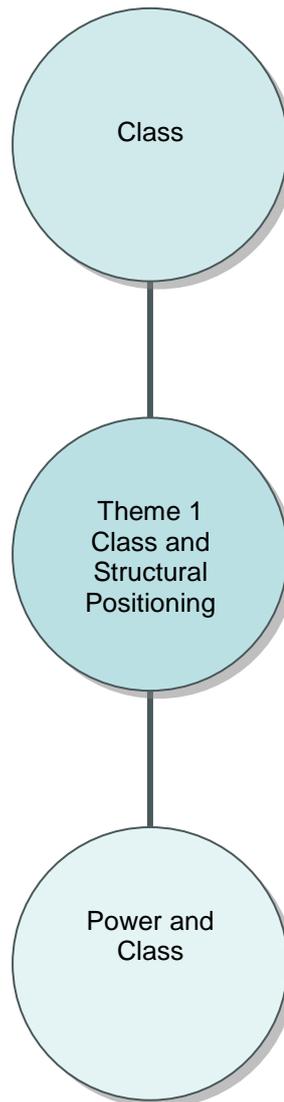
**Figure 8.2: Sub-themes to Class and Structural Positioning used in the analysis of the counsellors' transcripts**

**Sub-theme**
**Class**

The counsellors were all aware of the power of their position. However, they located this power more or less entirely within the role of being a counsellor rather than either their professional class status or individual positioning. Four of the five stated that they were working class but none demonstrated an awareness of how they may be perceived as middle-class on the basis of

their profession.  Indeed, Lou and Kay, stated, respectively, that '…the class background doesn't really seem to enter if people have felt comfortable' …and  'thinking about it is quite a difficult thing because it's not something I do pay much mind to when I'm working'.  Kay encapsulated the general response of all five of the counsellors.

> Kay; I guess if it's there, it's there in the background, and you know if you meet particular families who present in particular ways, it might cross your mind, you might consider it but I've never really kind of had it at the uppermost, I suppose, of my mind when I've been working, so to think about it now is actually quite difficult.

Sayer (2005) notes that the middle classes indicate their awareness that class differences lack moral justification by evasion in discussion, coupling this with a denial of the significance of class to them and their context.  In addition, he argues, they individualise difference.  These elements could be read in the counsellors' accounts.

Dora felt that her clients in the children's centre were 'different' to clients she had in other contexts and described differences which can be categorised as class difference, but declared she did not think about them as class differences. The two counsellors at DH, Pat and Jan, who had been working within this context for some years, were clear about their structural position as working-class, and that of their clients as poor working-class.  But in the following extract they also position themselves closer to their clients, rather than the professionals with power.

> Jan; If you look at a lot of professional people, people who've had an education, once they get into a profession they've got the income and everything else. Unfortunately, a lot of our clients… whether its doctors, health visitors, psychologists, social workers, anyone, they

just see them as being better than them. Very often, they feel very intimidated by them, and I think they feel that they have very little say in what's going to happen in their lives, and all these people have control over their children.

Pat;  And for a lot of ours within a social-care remit, you do have a load of professionals who are sat round a table who make decisions about your life, so anybody who they deem to be better than them has more control than them.

Jan; And also, I think with some families, this has happened for 2 or 3 generations and it's really ingrained in what happens in your life. 'This is the way life is and I can't change that.'

All the counsellors were aware of their client groups as poor and unable to pay and thus lacking the ability to make choices about who they see and for how long.   In much of the associated conversation, a distinction was made between those 'who may in other respects go and pay for their counselling or their therapy' (Kay) and those who could not.  Jan raised limited funding as a structural issue twice, and Pat, the inability to find counselling for anger management for one of her clients as highly problematic.

Jan; ...for people accessing counselling out there and paying for counselling.  They have an initial visit with their counsellor, and if they don't hit it off they say 'well I'll try another one' whereas the difficulty for parents coming in, if they don't connect with the counsellor then really their options… They have no option.

Pat; I hit so many brick walls with it.  I just could not believe that unless he had a drink or a drug problem there was nothing there for him.  And he was so willing to do anger management, and they were a lovely family unit bar this issue….And I was in a box, and every time I turned there was a wall, and unfortunately no anger management counselling was on offer.  There was no money; he didn't have any money to pay for it, and the relationship broke down. So, you know, the impact of that,…

In these accounts and across this data corpus, class was used as a structuring absence (Skeggs 2011), a comparative, relational device,

without consciously thinking about the structural position of their clients. For instance – Kay; 'I work in a short term way really so, you know, it's less to do with their perception of me per se, than about them and their problems and getting them sorted, and out again.' The counsellors nevertheless positioned themselves and their clients into class-based groupings, in terms of income for instance,

> Kay; I work in a lot of different *(named situations)* you know, some of them are more affluent than others, and I've worked with some very, very affluent families and I've worked with some really kind of deprived families and individuals.

Lou, who saw herself as working-class, considered that she worked differently with upper-class clients, than she did with middle- and 'lower-class' clients. Her differentiation appears to be based on her own symbolic capital and cultural capital, or at least how this is perceived by her clients.

> Lou; … what I do, I work differently with people who are upper class, rather than people who are middle and lower class. I think with, people that are, tend to be more upper class and much more protected, I tend to work much more professionally and people that are… middle class and lower class, I work professionally, but a bit more informally, if that makes sense. ..and that's something because I feel I need to because I think that people, that I see that are upper class often expect that of me. And anything less I wouldn't be doing my job. And it still gets there but I don't feel always as comfortable with that as I do with the others. I think that's how I work differently.

This counsellor works from a person-centred or humanistic base and, as she stated elsewhere, 'follows the client', doing so in this instance in terms of responding to the client's class by either being more professional or more informal. Kay discussed judgment, and evidently in the initial assessment

framed her thinking about the assessment by allocating some form of
structural notion of class, based on presentation and complexity of need.

> Kay; [laughs] oh, shameful, this probably is really classist actually,
> you know we're not supposed to judge, but of course we all do judge
> so from the minute a client walks through the door they're judging me,
> I'm judging them, …you know, you do judge, you judge people by the
> way they present, …if you go to a particular place (*named contexts)*
> you've got a feel for, …the type of client that's going to present and
> the kind of complexity of need.

> Kay; …for the, the kind of the less wealthy families often they'll be
> chasing the DLA… whereas a more affluent family or a better off
> family wouldn't need to do that.  The dad's in a very well paid job.

Kay stated that the outset that she did not think about class in her
counselling.  However, it is evident from her later comments that, when she
is judging and assessing her clients, the structural position of her client, her
client's class, is one of the bases of the assessment.  Furthermore, in so
doing, she is calling on deeply embedded social structures and perceptions
of individuals and their class backgrounds.

Interestingly, Kay and Pat present two sides of the same coin about judging
based on first impressions. Kay finds it difficult working with upper-class
clients whilst Pat has a sense of how the working-class client is being
judged in the first meeting.

> Kay; (*The upper class clients*) They don't engage in the same way,
> and, you know, again, I think you get a measure of that from the first
> kind of assessment appointment really of how things are going to pan
> out and yeah it's another judgment, but generally it tends to be how
> you think it's going to be from sort of first impressions so…

> Pat; (*on clients entering counselling*)…and it can just be that some people just have an instant 'no I'm not going to get on with her'. It's like going for a job interview really, isn't it? You walk through that door, and what they say within 3 seconds you know whether you're going to get this job or not.

In addition to her institutionally-based role, Lou visits people in their homes.

> Lou; I go into people's homes I think the, I instantly, can perceive [their class] from the house… and it could be a wrong perception, because people can have a lovely home, and it could still be that they're living in a similar way to maybe somebody who's a lot less fortunate.

Kay, Pat and Lou, call on socially informed ideas about people based on visual signals such as dress, language and demeanour.  Their comments reveal how important first impressions are and how the pre-transference operates. Kay has access to displays of material capital by visiting clients in their homes.  Housing and housing contents are the primary means of displaying or measuring material capital (Skeggs 2011; Liu 2011).

> Kay; And, and with the kind of the, the, families from, the kind of more impoverished estates there's often such a complexity of need anyway that you know with the best will in the world, a short term intervention off the back of the NHS isn't going to put a scratch in the surface.

**Sub theme**
**Power and class**

At the outset of this section it is important to reiterate the theoretical orientation of the counselling as represented by this group of counsellors. All worked from a person centred perspective and although two saw themselves as integrative and two worked systemically with families, none appeared to acknowledge or work within a psychodynamic basis.  This

means transference is not a central component of their work. The manner in

which they framed power was clearly from a person-centred perspective.

For instance

> Kay;…but it's a pretty diverse group … and I've never really kind of
> had any, particular conversations that I can recall about me and, you
> know, how I'm perceived…

This was common to all those interviewed indicating by absence that the

transference relationship was not part of their understanding.


The counsellors maintained a dislike of the power of their role and actively

challenged it through their presentation of self and language. For instance

Dora states

> I'm quite conscious of the power, much more than class, I'm always
> aiming to even it out.

However, taken together, their considerations suggest an alternative

reading, that some of the power they associate with the role is socio-

structural power associated with their symbolic middle-classness. There is a

definite hint here that they are misreading their structurally designated

power, or at least not seeing that power stems both from their structural

position as symbolically middle class, and their power as a professional

authority.

> Dora; Yes, I think it's so important because you create that power that
> you're already in a position of…'I'm the professional you're the one
> coming to see me.' That's there without you even saying anything
> unfortunately. And yes, I dress when I come to the children's
> centre…now I often dress in jeans because those are what removes
> barriers, the dress, and of course I have to feel confident within
> myself.

Dora refers to dress as important in dissolving the professional power imbalance as do all the other counsellors interviewed. However, in the focus groups, dress was overwhelmingly referenced to class. In a few instances, some mention was made of professional role and dress but far more references were made coupling dress with class.

Pat and Jan also mention dress as important to breaking down barriers, stating how they dress down in jeans and clothes similar to the parents they work with.

> Pat;…we could come with a nice smart pair of trousers and all the rest of it, but it's not going to do anything for the parents we work with. Put on a pair of jeans and a T shirt and you're in there because you know you're on their level It's helped give them a more comfortable feeling and that we're on their level.
> Jan; You'd be surprised how many parents have said that.

This accords with the preferred dress code for their counsellors as stated by the focus group participants. Dress and the use of language were cited by all the counsellors as ways to remove barriers stemming from professional power. The latter all demonstrate sensitivity to their client's impressions of them. Like the focus group participants they cite dress, the use of language, the room and the claim to social space as means of signifying an equal rather than a hierarchical relationship. Unlike the focus group participants they do not see these as social structural issues. As Bourdieu (1984) and those following his theoretical orientation such as Sayer (2005) point out, if you hold structural power you do not need to think about it. It is a taken for granted position. For instance Lou states that

...often background does seem very relevant, it doesn't seem to, the class background doesn't really seem to enter if people have felt comfortable.  I think it's more if you or they don't feel comfortable

Yet Lou had professed difficulties in working with 'upper class' clients.

Dora mentions dressing in jeans to encourage the empathy but also says

how she drops in swear words and is more relaxed in the approach she

uses in the centres compared with other contexts.

> I hate using it, the type of families we work with are often you know, limited incomes often, not all of them, but a lot of them are, and you just have to be mindful of all of that to get those barriers broken down.

This is similar to Smith's (2010) findings that a relaxed, informal approach

enabled wary working-class clients to build a working relationship.

> Dora; Language I think is really important.  If you, I often drop a swear word into the assessment and just say well 'I'm not going to talk about that because that's a load of bollocks' or whatever just to…Just to get on their wavelength really.  To let them know I'm with you, I understand you.  You know, I do have an understanding of what you might have to put up with when you walk out of this room.

Lou demonstrates a similar sensitivity to language but also shows some

awareness of class difference albeit from her working class perspective.

> Lou;… I probably feel a lot more at home with people from…… those kind of backgrounds *(poor working class)* … I find it easier to be myself in the sense of feeling myself. So maybe that's where I generally manage to build a quicker rapport with people from poorer backgrounds.  And also I think that many of the issues that people have, have been similar to a lot of the issues that I've had and I can relate and empathise a lot easier.

She goes on to differentiate between the poor working class and those with

> Lou;...a less educated background that have a different kind of language so I'm very careful that I explain what I'm doing more carefully …because as the counsellor you can be perceived as somebody who's… more middle class than what I perceive myself to be… I do tend to explain things more, but not in a patronising manner … to decrease that power imbalance.'

Lou used the example of 'locus of evaluation' and how she would explain this to a client. However, the cited extracts above form quite a long section of speech, in which at the beginning, she differentiates on a class basis but, by the end, the power has become situated within the framework of the counsellor as professional. This conflation, where the counsellor starts talking about class differences in relation to power, but returns to the power of the professional role, was present in three of the five accounts, Lou '…actually I'd really like to see you again…or it was much better than I expected, or it's more relaxed than I expected…and that's always been nice, and that to me means that I have broken down that… class or power thing…'. Kay and Dora make similar statements. This suggests that a relevant articulation or discourse about class is missing from the literature and in their training and thus is not available for them to use. Consequently they returned to familiar theoretical explanatory territory.

Kay, having clearly recognised that judgment is used by both counsellor and client in instantly assessing one another, uses 'whatever tricks I've got at my disposal' to try and heighten that empathy and make people think ' yeah! she's all right, I can talk to her, you know, it wasn't what I was expecting.'

Kay; … I will change my tone of voice, depending on…who… I feel I'm with to…If I'm doing it deliberately I think it's to encourage empathy…
I'm quite keen to present as… ordinary, normal, you know, nothing special, so if that is there [*power difference*] I want to get that out of the way as soon as possible… [*on working with children and their parents*] humour's a good one for kind of putting them at their ease, and the parents seem to like it as well.

Some of the counsellors also discussed other counsellors whose presentation and actions would not be acceptable in the context of children's centres. In so doing, they positioned and constructed themselves as consciously sensitive to power in the counselling role, but also as unconsciously sensitive to class difference. Jan talks about other counsellors as 'coming in a bit hippy-looking or whatever, and I can imagine *[pulls a face]…* and some are a bit upper-crust.' Kay talks about how other counsellors she knows accentuate the power differential, and Pat and Jan, followed by Dora, position themselves as not like other professionals. The extract from Pat and Jan's interview is also included in the previous sub theme of Class, but is equally relevant to the sub theme of Power and Class.

Kay; I mean I've got colleagues that I work with who will deliberately, you know, the door will knock and they will scoot the chair round so their back's to the door and they're kind of engaged in paperwork and they're like *(singsong voice)* 'come in' and the person comes in and it's all very here I am and I'm in charge and now I'm turning my chair round to face you. Well I can't be doing with any of that, so if the door knocks, I'll get up and open it and say 'oh come in' you know and depending on if I've met them before or I haven't or what have you but you can find a lot out about what not to do by watching the people around you sometimes.

Jan; If you look at a lot of professional people, people who've had an education, once they get into a profession they've got the income and everything else. Unfortunately, a lot of our clients… whether its doctors, health visitors, psychologists, social workers, anyone, they

just see them as being better than them.　　　Very often, they feel very intimidated by them, and I think they feel that they have very little say in what's going to happen in their lives, and all these people have control over their children.

Pat;...counselling needs to be with somebody that you gel with. Someone that you find easy to talk to, that you feel you're respected and listened to.  If you haven't got those it's not going to work.

Dora; ... but a couple of parents say well it's so much easier to talk to you than it was to the other one because I felt as though I was being judged and I didn't know how to… Well, I couldn't change because she's the only counsellor available in that place at the time.

Dora also brings up the question of lack of choice as related to structural position.  Each of the counsellors brought this up in some way or another but the manner presented suggested a deeply embedded acceptance of that is the way it is, if you cannot pay you have to accept what is there.  Less tolerant of a lack of choice were Pat and Jan who demonstrated concern at the time-limited counselling that her clients received and how dangerous that could be 'having opened Pandora's box.'

Jan; …you've had that 18 sessions funding - sorry that's it, it doesn't matter where you are the money's run out, and that's really dangerous.

## Summarising class and structural positioning

As person centred counsellors, the five interviewees located difference as a difference in power associated with the role of counsellor.  This contrasts with the focus group participants who constructed counsellor/client difference based on descriptions corresponding to class as represented in the literature.  The counsellors were not apparently aware that they symbolised middle class or elite power to working class clients.  However, their narratives demonstrate that they used class-based socio-structural

categories which they applied in their thinking about their clients and their clients' problems. Class is a structuring absence in this context (Skeggs 2011).

## Theme 2:  Difference in symbolic and cultural capital

There are five sub-themes in the second theme Difference in Symbolic and Cultural Capital (Figure 8.3).
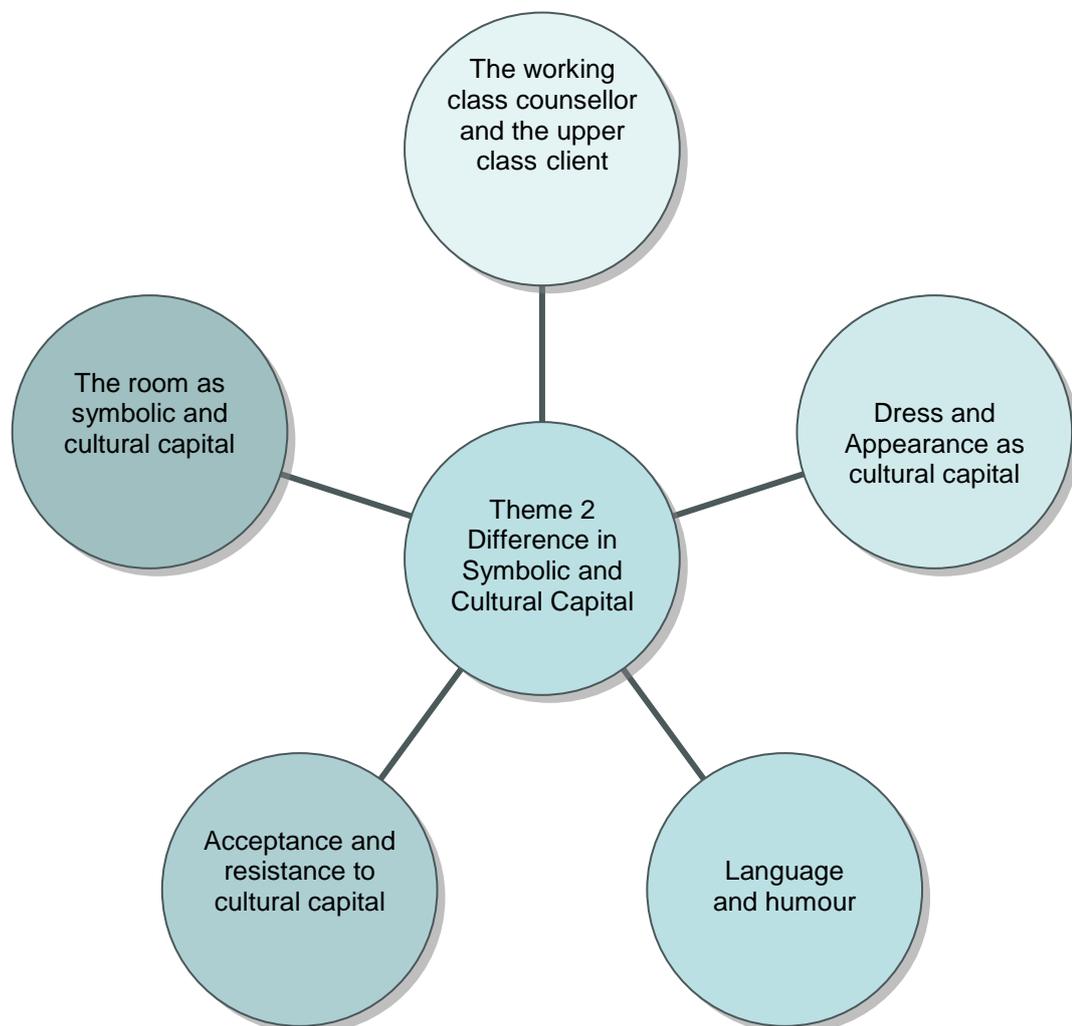


**Figure 8.3 Sub-themes to Difference in Symbolic and Cultural Capital in the analysis of the counsellors' transcripts**

**Sub-theme**
**The working class counsellor and the upper class client**

Recognition of class difference for two of the counsellors, Lou and Kay, who were working across services and within the NHS, respectively, was situated in the difficulties they experienced in working with 'upper class' clients. Kay stats that 'Of all the families I work with…if I'm going to struggle with a family, it is the very [pause] gosh, judgment now, very well-to-do family.' Lou similarly comments

> 'I find that possibly with the few people that I have seen that are… more higher class.  And I find… um… more higher class more difficult to engage with properly.'

Both counsellors were hesitant and apologised for making this judgment which was in marked contrast to how easily they spoke about working class clients as if the latter was acceptable, what everyone does in the helping professions.  This is the account of only two counsellors.  However, it corresponds to the evidence elsewhere (for instance Skeggs 2011; Smith 2010) that the unassailable structural position of the elite classes, including the professional classes, means that class-based challenges to their cultural capital and embodied dispositions, are not often articulated.  Therefore in common parlance there is a lack of an alternative discourse, unlike that for the regulated working classes. On working with 'upper class' clients Kay notes that they

> … have parented their children quite often in, 'special' ways, and… they can't take ownership, they can't take responsibility for the input they've had on their children as if they magically bring these children into the world and all they've got to do is love them and give them very special names and they're going to grow up to be well-rounded human beings and actually, that's far from the case…often, said child is deposited in front of me at age 6 or 7 and the attitude is 'it's broken, fix it' and I just find that extraordinary… in those very affluent, very

well to do families that's a definite subculture. Their expectation is that, you know, it's got the NHS badge on it, it can fix it. ..and what they fail to appreciate is it's an holistic process, this child or young person doesn't exist in a vacuum or a bubble they're in a dynamic ….and what are you contributing to it?  … I guess I always thought that people who are better off are more likely to see you as there working for them.  I think… less of an equal.

Lou; …I find that the people that I see that are higher class…it's almost like they're scared for you to know the truth about things. They're quite defensive, it's like, it's almost like they're, they feel in a position of power and this is as it is and you've come to see me about this …. and this is what we're going to talk about, and things that are relating to it, you know, you only want to know the good things and…it's sometimes quite closed and it's peeling back the layers, but sometimes those layers are more difficult to peel back the higher up the ladder they seem to be…and I sometimes think it's because you're there to serve them… so their expectations of you are the same… eventually it works out, but it's like initially it sometimes it can be quite tricky because you seem to be going…at different angles.

Both Kay and Lou believe and experience their upper class clients as seeing them as counsellors 'serving' or 'working' for them.  In both these extracts the counsellors seem to be indicating that they experienced the power of the dominant class and found this challenging.  The accounts suggest there is a sense that the clients are used to defining, claiming the social space and receiving what they expect to receive. As a construction of a counsellor/client relationship, this was not articulated by the focus group participants.  Although the latter could see that they could receive help from counselling, they were more likely to see it in terms of a range of support services similar to social service regulation and hierarchical authority, rather than serving or working for them.

Lou's narrative includes reference to a scenario which she proposed as causing one of her clients from an 'upper-class' background, to prematurely terminate her counselling:

> …and talking about dress, one thing I noticed a while ago I was seeing somebody – she was 'upper class' - and the counselling itself was going well, and… I saw them in town and I was absolutely drenched it was raining, … carrier bags [*named cheap super market*], friend's screaming child  with me, and they cancelled the next session and I never saw them again and that was interesting because that to me was about …maybe it ruined their perception of me. I found that really interesting that I didn't live up to… their image of a counsellor…it did really hit a chord…

Lou constructed an explanation of her client's premature termination of counselling as subject to this encounter and visible class differences.


**Sub-theme**
**Dress and appearance as cultural capital**

Dress was a very important indicator of cultural and material capital for the focus group participants.  Similarly, all the counsellors saw dress as a way of diffusing the power differential and, as argued here, a means of addressing difference in cultural capital.  Some of the references to dress have been cited above, such as Dora, Pat and Jan dressing in jeans and T-shirt as a means of making their centre clients feel comfortable.


> We dress down, don't we? We definitely dress down.  We have to be just average normal everyday people you see on the street.

 Kay did dress more formally, as required by her service, but was not happy doing so, recognising the distinction it caused between her and her clients.

…all things being equal, I'd be in there working in my jeans ...I think a lot of people would appreciate that because, you know, how you dress I think gives a measure of something.

She goes on to say that she dresses as alternatively as possible with jewellery so that 'they can see something else is there not just a suit sat in front of them.' Kay also mentions 'suited and booted':

Kay; …Suited and booted would put me off as well if I was going into that kind of environment. It, it would make me feel very uncomfortable…and I've come from domestic abuse and, you just wouldn't, unless you were taking a woman to court, you wouldn't wear clothes like that. So, you would be in there in your tracky bottoms or your jeans or whatever, and actually that was quite normalising,

Lou talked about dress more in the context of her other clients who she visited in their homes, rather than the centre clients:

PS1; as relaxed as I can and dressed a bit like this but I have been into someone's house where I thought perhaps I should be wearing a suit… [laughs]….if nothing else, but I then I also know that then I wouldn't feel comfortable counselling so there was that issue as well…so I didn't I just made sure I felt that I was dressed, or looked smart.

The DH centre counsellors also discuss how they dress for their clients:

Pat; And it's like for us working, we could come with a nice smart pair of trousers and all the rest of it, but it's not going to do anything for the parents we work with. Put on a pair of jeans and a T-shirt and you're in there because you know you're on their level.
Jan; Definitely. So we just mingle in with the crowd now [laughter]
Pat; The only thing is, they can't tell whether you're a parent or…
Jan; It's helped give them a more comfortable feeling and that we're on their level.
Pat;… to look like them.
Jan; You'd be surprised how many parents have said that.
Pat; Yes, and that's what we endeavour to do, you know. We turn up looking bedraggled [laughter] pair of old jeans with a rip at the knee or something like that.

Jan; But I bet if you ask some parents, not all parents obviously, some parents we work with, they still think we dress smarter than they do even though we try not to be too…

In each instance the counsellors are dressing appropriate to their clients. Liu (2011) argues that class distinctions, including those made on the basis of dress, are made both hierarchically, as seen here, and laterally within classes, between individuals in constructing subjective identities. More obvious in the manner in which children exclude and include on the basis of dress, the subjective judgments that are made here are rarely spoken about, but were evidently used by these counsellors to create empathy, as Kay states, when meeting, '… someone for the first time it's like I've got one shot of getting to know them and making it work and it's as simple as that'. In each interview apart from Pat and Jan's, the counsellors had not thought about what they were doing. Indeed, they all said it was not something that they thought about but knew that they needed to do something to make their clients comfortable or to dissolve the power relationship.

**Sub-theme**
**Language and humour**

Language appeared important to the counsellors but differently. Dora owned to using the odd swear word and colloquialisms to diffuse the power differential '…to get on their wavelength…to let them know I am with you,' as noted in sub-theme Power and Class. And also, as previously noted, Lou was careful in her use of language with 'less well educated clients' (her words). She distinguished this group from her working class clients in general by saying how she explained things more clearly and carefully. However, she stated she did not change her accent. Pat and Jan naturally

spoke with a local accent and their only reference to language took the form of a change in accent when talking about 'upper crust' counsellors. Kay claimed using her 'accent a lot' and 'tone of voice' as a means of 'meeting' her clients.

> Kay; But I am a south east London girl. I don't think I've lost it at all but I have been up here for a long time…I can get right back into speaking from where I originated from or, speaking really, really well. One of the things my mum used to say to me when I was very little was that you know, you can mix with anyone, if you can change your voice accordingly.

The construction of accent and speech as a tool for creating empathy speaks to a recognition of difference in terms of embodied dispositions and how class is associated with the use of language and accents. None of the counsellors appeared patronising in their accounts, but saw being adaptable as a means of building an empathic relationship more quickly. As they all stated in one way or another, there is a very short period of time to demonstrate to your new client that you are someone he/she can relate to. For instance, Dora, talking about the client who does not return after one session, suggests '… that first experience of counselling is just so crucial. It's so important.' However, at a different level, the way language and accents were discussed reinforced the impression that class difference is recognised through deeply embedded dispositions operating at a subconscious level (Sayer 2005) but rarely articulated.

The use of humour was considered important to Kay in diffusing the power differential, especially with the children she works with.

> Kay; I use an awful lot of humour in what I do which I think cuts across everything to be honest with you. Um, and, and I do use that, I feel, it is quite successful to kind of put people at their ease and get them to relax and… work with a lot of kids, as well, and younger people, and I find for them particularly, humour's good for kind of putting them at their ease, and the parents seem to like it as well.

It is not clear from what she said how she used humour, whether its use was confined to creating an initial relaxed atmosphere or to diffuse tension as the counselling progressed. Since it was only noted by this one counsellor, it does not fully constitute a sub-theme across the counsellors, it is nevertheless important when considered alongside the focus group participant accounts. Within the latter, the use of humour 'someone you can have a laugh with' was cited as a constructive element of what counselling could be like.

**Sun-theme**
**Acceptance and resistance to cultural capital**

This sub theme constitutes three sub theme categories: experience versus education, 'resistance', and time and claim to social space.

*Experience versus education*

The focus group participants positioned themselves as experienced and knowledgeable, and experience and strength were constructed as their own cultural capital, as opposed to the education or 'book learning' of the counsellor. Some of the resistance to the cultural capital of the therapist was constituted in these terms but, paradoxically, there was an underlying subtheme of acceptance and recognition of how counselling could be for

them. In the counsellor's interviews, not unexpectedly, there is a complete

acceptance of their own cultural capital, but little recognition, if any, of the

possibility of a valued working-class cultural capital. As a structuring

absence, this suggests an acceptance of the dominant cultural capital over

that of the subordinate group. Working-class cultural capital is seen in terms

of 'lack of,' in these particular circumstances, the lack of ability to parent.

This is not to argue that parenting difficulties are not a very real issue for

some of the service users at Sure Start children's centres, nor that the

counsellors here do not have the best interests of their clients in mind, or

indeed through counselling, provide a way forward for their clients. But the

suggestion is that the aim appears to be to use the dominant group's cultural

capital to replace that of the working classes, without recognition that the

latter may also have their own. Sensitive to their client's structural position

and consequent difficulties, conversely, none of the counsellors saw their

clients in terms other than an individualised problem. For instance social

structural problems are cited in the first quote below, but conflated with

individual difficulties.

> Dora; Families who come to children's centres, are often families
> who've got multiple difficulties. They are balancing a lot of difficulties
> within their own lives, and it's often what we find within our service.
> It's often a case of other things, like debt, like home housing, financial
> difficulties, those kinds of things are often the things that need to be
> sorted before they can even think about tending to themselves if that
> makes sense.

> Pat;…so all we've endorsed is you're a bad parent, because the
> relationship is ended because of this issue. So you're still that bad
> parent, and the likelihood is he'll go on to meet someone that has got
> a child again.... So you'll have this gentleman who's had a rough time
> as a child and became a not very good parent. The child then has

this bad experience with him as a parent, so it's building. Generation after generation.

Pat;…so much time was put in, you know, and that would have been a client whose life ended for her at 4-years old.  So she had a lot of issues.  So it took that long period of time and she's now parenting really well.

The second and third counsellor extracts demonstrate a mirroring of the dominant discourse on parenting.

Two extracts suggest that the counsellors' clients may try to find out whether they share similar experiences.  This is in accord with the focus group participants' expressed preference for someone who is more 'like me' and their valuation of experience over book learning.  There is some surprise expressed by Lou that clients might be assessing her too.

Kay; …you get the occasional throwaway comment about oh I don't suppose anything like this has ever happened to you or, you know, that kind…

Lou; … because I think, I mean when they've said I don't know whether this has happened to you or that's happened to you, and she was going through a list and I was just listening and she said whatever it is you've really been intuitive with the way we've worked…. and also interesting that they have been trying to assess your background haven't they? I find that quite interesting.

Elsewhere, the counsellors indicate that they are acutely aware that the first meeting is important in laying the foundations for a working relationship and that, if they cannot demonstrate that they are empathic within that initial meeting, they are likely to lose the client.  However, there is no sense here, or throughout the interviews, that there is recognition that the embodied

disposition of the client might mean that clients would prioritise experience

over education as demonstrated by the focus group analyses.

*Resistance to referral*

As stated above the majority of clients the counsellors worked with, came

through referrals sometimes at their own request to a GP, as in Kay's

comment:

> Kay; Whilst they can take themselves off and kind of pursue things privately, and many do, the reality is if they're wanting some kind of official stamp on things, official label, official diagnosis, they need the NHS.'

More often than not, the clients in the children's centres came to counselling

as 'part of a package' of interventions (Pat, Jan, and Dora).  Working with

resistance appeared to be part and parcel of counselling in the centres and

a reason why the promotion of initial empathy was so crucial to the

counsellor's view of the relationship. Nevertheless, resistance was evident,

but constructed as an individualised psychological response.  Indeed, this

may be the case for some clients.

> Jan; …she thought she didn't need the counselling.  Sometimes people think 'I don't need counselling I'm alright, there's nothing wrong with me, I'm fine' so it's actually a denial aspect of it as well.

> Pat; …that was her attitude, I don't need counselling.  I don't need it I'm absolutely fine there's nothing wrong with me.  I've dealt with what happened to me, I'm absolutely fine and when it came down to it, she hadn't dealt with it at all, of course.

Constructions of resistance from the counsellor's perspective contrast with

those of the focus group participants, who resist counselling in part, because

they see it as a challenge to their working class identities as strong and

resilient.  There is more resonance with the focus group participants when

the two HD counsellors discuss shame associated with counselling.

Incidentally they implicitly acknowledged the role of strength, as an

embodied disposition of their clients.

> Jan; She could be thinking maybe they'll be thinking I'm a bit mad or stupid.  Your self worth goes out the window sometimes, doesn't it? People think you're admitting a weakness if you need counselling rather than actually saying I'm being positive and doing something about it.  They say something's wrong with me, I've got to have counselling and they do see it as a negative thing.

Shame appeared in other commentaries on resistance, for instance, Dora

discussing why parents resist offers of counselling: 'I think it's the stigma…

it's almost as though they think - is there something wrong with me?'

In addition, in continuing the discussion they note how counselling is used

as a weapon by the partners of the clients.

> Jan; Sometimes they're worried about partners' opinions of counselling.  If they know about it - they don't always know about it, do they? You know, if you're looking for that support or whatever and your partner doesn't approve or thinks it's a load of rubbish or whatever, it does make it difficult.
> Pat; And with people that we work with, they would see that as a niche to actually work upon and belittle them and lower their self esteem by saying 'yeah, you need counselling you do, don't you?' *[said in a demeaning way]*
> Jan; Yes, if the relationship is already a bit rocky.
> Pat; And it's a good leverage within an argument to use against somebody.

Counsellors at Centre DH were the only ones to mention this as an issue.  It

resonates with the concern of focus group participants, one of whom (at a

different centre) discussed at some length the reaction of her partner, signalling its importance to her. In two of the other focus groups, humour was used when relating how partners react. The counsellors' accounts illuminate what might be an additional reason for resistance to counselling.

Accounts of clients 'walking', as resistance to counselling, were peppered through the data-sets, but as observed in others rather than an observation about their own clients. For instance:

> Pat; She just didn't like it in general. She didn't like the place …I don't think she was gelling with the person that was counselling her…. but she spoke with her feet and never came back.

'Walking' is constructed as the only option open to their clients and underpins the urgency they feel in presenting themselves empathically in the first sessions.

### Time and claim to social space

The power to define the parameters of the counselling received little consideration by the counsellors. It was accepted as a given, as part of their cultural capital. However, as the interviews progressed, a slightly different picture emerged of an unspoken acknowledgement of a need to be both flexible whilst also maintaining the boundaried relationship. Smith (2010) argues that poor working class clients need a different initial approach largely due to a lack of trust of dominant class authority symbolically seen in the counsellor's tendency to set boundaries in their own terms rather than those suited to the client. Generally there is a lack of thought about how the

cultural capital of the counsellor is visible through their claim to time and social space.

Two preliminary meetings with centre managers and counsellors which, unfortunately, did not lead to participation in the study, revealed that in those centres, the counsellors worked differently with boundaries. One of these counsellors would make herself known to the parent groups by 'just being around and visibly chatting to the parents generally' with the aim of establishing a rapport, so that they would be more likely to self-refer. The other counsellor ran self-help group sessions which she cited as enabling her to establish a relaxed relationship with potential clients, outside the context of the counselling room. Both these strategies are cited by Smith (2010) as part of what she and her team do to encourage self-referral and to disestablish the primacy of the cultural capital of the counsellor to *totally* define the parameters of the relationship. The counsellors interviewed for this study were more traditional in their approach but in discussion revealed some flexibility to boundaries whilst maintaining the contract as expressed by Dora.

> Dora; Well, I explain the contract, how long I'm going to work with them, what the focus of the work will be for them, and then if that's OK, because it's a two way process. The confidentiality, the limits, the child protection, the harm to anybody else, that kind of thing. And also, whether or not they would be happy for me at any time, but I would be directed by them, to talk to anybody outside of the room, because bearing in mind that a lot of the families that do come in come in as part of a package.

All the counsellors took for granted their claim to define the parameters of the relationship as per their training and ethical codes, and their symbolic and cultural capital. However, with some differences, they pushed the boundaries in response to their client groups' needs. For instance, Dora always gave at least 1.5 hours for the first session.

> …and just allowing them to, certainly in that first meeting, to just get it all out and often they do…Only on the first, because boundaries are a part of the problem.'

Once she establishes a rapport in the first session, she makes herself available to the client by phone should any problems arise prior to their next meeting. '…and I say we're all approachable, just pick up the phone if you need anything.' This counsellor was also careful that, when mingling and talking to parents and workers outside the room, she ensured that she was not seen talking to the workers on their own.

> Dora; I'm quite mindful that they don't see me out there interacting as one of the workers and I'm just conscious of that myself. … because I wonder how secure they feel about trust. A lot of the people we get coming into children's centres do have an issue with trust. So I just think how it would be for me if I saw my counsellor… I wonder if she's talked about what we said in the room, although she's reassured me that, you know. If they have got an issue with trust and they see you mingling out there with everybody, all and sundry, then they may, you know. I do talk to them all, don't get me wrong.

The two DH centre counsellors consistently complained that the number of sessions stipulated by their service, was to be no more than ten. This was a problem and insisted that ensuring their clients received the time they

needed was essential. Dora felt the same stating, '…and what I say to my supervisor is ethically it wouldn't be right for me to discontinue working with this person right now, and it's usually OK.'

> Pat; Yes, and it's such a scary part for the people we work with…trust is a big issue you know.  In our line, building up that trust and I feel sometimes that they'll say right you've got maybe ten sessions of counselling.  It may take you ten sessions to build up that rapport and trust with your client and then it's ended… a particular lady that I worked with needed a lot of counselling.  We knew she'd tried lots of different counsellors and it didn't work.  I think it took 18 months to actually get her to be able to become a parent because she was failing…the time span was good, and it did what it was meant to do.
>
> Jan; There was no pressure for it to finish.  It was allowed to go as it needed   to go. There was no 'your sessions are going to end, your money is going to stop'.  It worked really well.

The HD centre counsellors also talked about 'opening Pandora's box ' and then not being able to close it properly within a limited time frame, or for that matter at the end of any one session.  Here, they indicated that they worked differently ensuring that the client received some consideration after the session.

> Pat; …and how do they maintain then being a parent, a wife, a mother, you know, a sister, whatever.  How do you maintain doing that if this box is left open? ….
>
> Jan; There was another route out *[of the centre counselling room]* so they could collect themselves together, go out and have a smoke, have a cup of tea, whatever, before they came back in and picked up their life again, because so much must be whirling around in that head to be able to just come back and be 'hi, how are you?' you know, and be that type of person again.
>
> Jan; …a great British tradition, can we make you a cup of tea [laughter] if in doubt make a cup of tea.

The cup of tea that was so desired by the focus group participants has been picked up here by the DH counsellors who also construct it as a sign of looking after clients.  Lou also refers to the ubiquitous beverage.

> Lou; …going into people's homes because the first thing people do is say 'do you want a cup of tea?' ' and it's almost like they want to get out their family album or…, and it's actually bringing it back to counselling and there is that instant perception and that's often, that's more so with people from say general working class than lower class that they want you to be their friend, want you to be a friend of the family.  And, at times that can be quite difficult.

Lou is also sensitive to the notion of friendship teased out by the focus group participants and constructed as 'friendly professionalism.' Interestingly she notes a division between the 'general working class' as opposed to the 'lower class' with the former rather than the latter wanting to be your friend.  Given her personal identification with being working class, there is a hint here of what Skeggs (2011) notes as a separation of the more aspirational working class (Lou is educated to post graduate level) from the other working classes.

**Sub-theme**
**The room as symbolic and cultural capital**

All the counsellors felt the room was important.  Comfort, warmth and welcome in a dedicated space were sought but not always achieved.  Their accounts reflect the suggestions of the focus group participants that the room makes a difference to the success of the relationship.  However, it did not come across as of such importance to the counsellors, more a functional necessity and an ideal perhaps. In contrast the focus group participants saw it both in terms of comfort and relaxation, but also wanted it to be as

different as possible to rooms associated with other professional encounters, such as police and social work interviews. The extracts below illustrate the importance of the room to the relationship, but also a lack of an awareness of the need for differentiation from other professional encounters, on behalf of their client group. Given the sensitivity of the counsellors to their clients' needs, as demonstrated elsewhere in the interviews, had they been aware of this element then they would almost certainly have posited it as an issue.

> Jan; But that's so important isn't it? because they say the place you go to has to be very neutral, but it also has to be a comforting place and a safe place. You know, you have to get it just right, and it's not always easy. Because sometimes using a children's centre is not the right place to have counselling because there's too many connections for them as well. So I imagine finding the right place is quite difficult.

> Kay; …that's got what I call a dedicated counselling room so you go in and you've still got the computer on the desk and the chair up the one end but at the other end you've got two really lovely settees facing each other with a little table in the middle, box of tissues, we all fight over going there because it's just lovely,

> Pat; …my [relative] needed counselling for bereavement - and I took her to a counselling place …it was dowdy, horrible and I really didn't want to be there. All I had to look at was a map of *[city]* on the wall. … I couldn't for the love of money get her back there, but there was nothing else about at that particular time.

Dora favourably compared the comfort of the counselling room we were sitting in for the interview with the rooms of her counselling service and where counselling took place '…(it) had got to be one of the oldest built buildings in N….I think.' She acknowledged that the counselling room needed to be a 'safe space.' However she also indicated, as did other centres' counsellors, that dedicated counselling rooms in children's centres

compromised confidentiality, as usually, the entrance was visible to all. Centre DH counsellors noted theirs as an exception, since it had a separate entrance out of view of the main rooms.

In the focus group analysis, the perceptions and accounts of the counselling room suggested that use of offices and clinical rooms were experienced by clients as disrespectful to them, as though they did not matter, reflecting their class experiences as a dominated group.  As evidence of both cultural and symbolic capital, the room is very important to the client.  For clients it is not as counsellor Kay says, naively '…a room's a room wherever you go, and you can't do anything with that.'

## Summarising difference in cultural and symbolic capital

The content of the sub-themes for the theme above demonstrate similarities and differences with the focus group accounts.  In some instances the coincidence is strong.  Dress and appearance were singled out by both groups as a very important first signifier of the potential of the relationship. To the counsellors, looking like their clients was important to the power differential between counsellor and client, and to establishing empathy at the outset.  To the focus group parents, some-one 'like me' or 'almost like me' was a stated preference, with a common dislike of the 'suited and booted.'   The constructed reasons why both the counsellors and the focus groups liked casual dress differed, but both located 'suited and booted' as a formal representation of power even though they named that power differently.

Similar to dress, language and its use were constructed by both groups as needing to be like that of clients or accessible to the clients. The other major signifier of the cultural capital of the profession, resisted strongly by the focus groups, was the room.  The room for the latter was highly problematic if it created a resonance with other regulatory type interview rooms, such as used in social work or police interviews.  Their preferred option was a comfortable room with settees and windows.  The counsellors also felt the room important but were more likely to accept what they were given.  There is a dissonance here between the importance of the room for the counsellor and the client group.

More significant differences are visible in attitudes towards the prioritisation of experience over education, with no recognition of this apparent in the counsellor data corpus despite its significance to the parent focus groups. Resistance to referrals was also viewed differently, with the counsellors accepting resistance as part and parcel of a referral, and the focus group participants resisting for a number of reasons, including counselling's challenge to their construction of their own identity as strong and resilient.

Time, and claim to social space, differed significantly between the two groups.  In the counsellor interviews there was little evidence of awareness of how counsellors' cultural capital was visible to clients in their setting of time boundaries, place, contract and so on, and how their claim to define affects working class clients.  However, as their theoretical orientations

prioritise the empathic relationship, some of the counsellors interviewed, if not all, had, by following their clients, pushed some of the boundaries.

Two counsellors referred to their experience of working class counsellors in a therapeutic relationship with upper class clients.  In these interviews, what was noticeable was the hesitancy and apologetic approach they took to talking thus.  Neither counsellor seemed to have either the permission, or the language, to articulate their experience, a hint perhaps of an absent discourse. This was in direct contrast with all the discussions focusing on the centres' client group.  The discourse on parenting, associated interventions, and social work is conducted with mainly working class groups in mind and therefore, for middle class professionals, the manner in which they discuss this is a permissible and theoretically established articulation.

## The counselling process

The concomitant theme in the focus group analysis included three sub-themes which occurred across the data corpus:  mystification and disempowerment, counsellor neutrality, and judgement, blame and shame. However, these themes do not have the same relevance to counsellors theoretically and practically oriented to person centred counselling, as the counsellor interviews revealed.   Empathy and the relationship are central to the person-centred approach and was prioritised by the counsellor interviewees. Hence this constitutes one of the following sub-themes.  In addition, boundaries and working differently are important in the context of Sure Start children's centres and, like empathy, were regularly referred to by the counsellors.  Therefore, these constitute the second sub-theme to The Counselling Process, reflecting the emphases of these five counsellors.

Empathy and
the relationship

Theme 3
The counselling
process

Boundaries and
working
differently
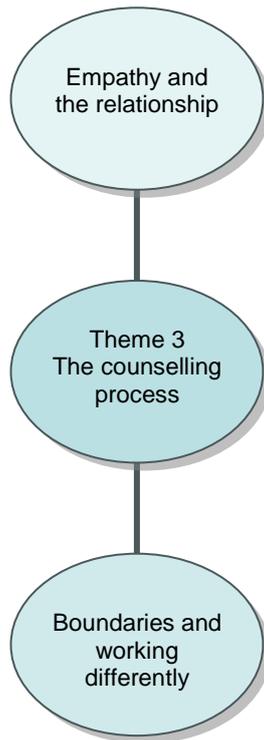
**Figure 8.4 sub-themes to the key theme The Counselling Process in the analysis of the counsellors' transcripts**

**Sub-theme**
**Empathy and the relationship**

Many of the empathy related aspects of the narratives overlap with other themes.  Overall, they construct the counsellors as concerned with establishing empathy within the first encounter and being seen as someone who can appreciate the perspective of the client.  The first session was all important to all five counsellors.  Dora, Pat and Jan exemplify expressions demonstrating the attention given to the initial session.  This construction was shared by all the counsellors.

>    Dora; That first connection… if it doesn't happen then the likelihood is
>    it's not going to, and whilst counselling is more in my opinion all about

the relationship, how can it possible work if… and how can they know what counselling is if they haven't got that relationship?

Pat;…counselling needs to be somebody that you gel with.  Someone that you find easy to talk to, that you feel you're respected and listened to.  If you haven't got those it's not going to work.
Jan; I think you have to feel safe with that person, too.

The orientation of these counsellors impacts on the way they approach the counselling relationship.  Their approach resonates with the focus group participants who stated what that essentially they wished to see in their counsellor empathy and warmth.  The neutrality associated with other perspectives, which created confusion and anger in the focus group participants, is not prioritised here.  Indeed, by its absence and the sense of commitment and urgency expressed over the need to establish a rapport with clients, there is a hint that the counsellors may be oppostionally constructing neutrality as counterproductive.

Other issues about the relationship illuminate, and are discussed within, the other themes. However, also relevant to the process of counselling and the relationship was the counsellors' strength of feeling about, and commitment to, maintaining the relationship for as long as the client needed it when they were dealing with 'quite horrific things going on in their life.' Concern was present in accounts about - as Pat expresses it - opening

Pat; …Pandora's box and without the right type of help it's left open, whereas I feel it needs to be opened, worked through, and closed safely so you feel that it's gone away.  It's away safe and it doesn't need to be reopened… so for me that's really important.

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Similar concerns about access to, and time-limited counselling were expressed by the centre managers who were facing imminent cuts to their budgets.

Notable to one counsellor was the opportunity to provide a client with the means of saying 'no' to further sessions, should the empathy elude them. Lou felt this was preferable…

> Lou; …but often people resist, you know, you can break through that really quickly and it is nice when people actually say at the end, 'I'd really like to see you again' because I'm always very clear at the end and ask would you like to see me again.

For some clients, who are referred to counselling as part of a social work package, non-attendance is not an option, but at least one of the focus group participants mentioned as presumptuous the counsellor's assumption that she would continue the counselling without asking her if she would like to do this.

## Sub-theme
## Boundaries and working differently

Two sub-theme categories constitute this sub- theme: confidentiality, and working differently.

### *Confidentiality*

The boundary constructed as causing most concern was that of confidentiality. Three aspects were noted: the visibility of counselling in a centre; the boundary of confidentiality with the counsellor and the other

centre workers; and the bounds of confidentiality with other referring services. These concerns echo those of the participants of the focus groups. The counselling room in Centre LE is in a central position in the main corridor. Dora felt uncomfortable with this.

> Dora; I just think for people coming into counselling within the children's centre, it's quite difficult because everybody knows. And I think it's... for me…I do wonder what that's like for them, and I have to say I've not really asked them…

In contrast, Centre DH had a counselling room tucked away with its own entrance alongside other quiet rooms, used for meeting social workers, or accompanied parent-child meetings. The confidentiality this afforded was valued by the counsellors working there but was questionable in terms of its alliance with social work meetings.

For the focus group participants, the visibility of the counselling room was signalled as a major reason for not seeking counselling within the centre. My observations suggest that, apart from Centre DH, all the other centres involved in the study, including those that were unable to facilitate the final interviews, though purpose built had counselling rooms fully visible to centre attendees. There is a suggestion here that the centre users' confidentiality is not important to the centre providers, who may be defining it in similar terms to social work shared service confidentiality, thus overlooking the importance of confidentiality from other service users. Confidentiality in these terms was of concern to both the counsellors and the clients. Dora expressed this most succinctly and in conjunction with visibility:

> Dora; I think another difficulty for parents coming into the children's centre is that everybody knows they're coming in for counselling… when I first came here didn't sit comfortably with me and still doesn't. It feels a little bit unboundaried working in the children's centre, and that can be a positive but it can also be a negative.  And I might come across as…not rude but you know, I might say *[to centre workers]* I can't talk to you about that or I'm not willing to talk to you about that. But I do explain you know that that's part of the counselling process and I'm not able to talk about that.

At the outset, through contracting, she ensures that the parents realise that what passes between them in the room is not discussed with centre workers and only discussed elsewhere, with their permission, when child protection or self harm issues arise.

> Dora;  But I think the first meeting with the parents, you know, they've never been given an opportunity to just talk in a safe and confidential way, and once they know that actually what you tell me in here stays in here.  They've never been given that before.

> Dora; …and they have so many people in and out of their lives constantly, and I do say to them I'm not one of these people that is coming into your life and is going to go and sit round a table and share all of that information.  I reassure them of that.

What Dora was doing here, as part of empathy and building trust, was to distinguish between herself and other professionals that the client is likely to have come into contact with.  This separation is especially important for the client referred to counselling as part of a number of social work interventions. Elsewhere, she discusses how she and her team rarely attend clients' case conferences, refusing on the basis of client confidentiality.  The latter issue did not arise in the other interviews. That aspect apart, the consistency of concerns about visibility and confidentiality within the centre was marked across the counsellor interviews and the focus group participant

accounts.  There was also another consistency marked by an absence of reference.  The focus group participants and the counsellors accept the regulatory 'gaze' of social work.  However, both resist.  Dora, along with her colleagues, refused to attend social work case conferences, citing client confidentiality.  The client, when she can, resists by refusal to attend.

### *Working differently*

The analysis of the parent focus groups indicates that counselling appropriate to (poor) working class clients could be different by avoidance of repetition of the class-based dynamics operating in society.  The counsellors similarly recognise a need to work differently with these client groups but do not articulate this in terms of a class dynamic. Nevertheless, in following the client, one of the core principles of person-centred counselling, these counsellor's responses strike a cord with the unrecognised, embodied, constructions of counselling 'for me.'  The focus group participants wanted warmth and empathy and to be listened to and heard. The counsellors in this study constructed this as their priority, but it is their boundary-pushing that signals a responsive difference.  Dora, as stated earlier, provides 1.5 hours for the first session to 'allow them to talk about whatever it is they want.'  In the interview Dora indicated that through the interview and articulating her thoughts, she has recognised that she is working differently. The other counsellors indicated aspects of working differently but Dora begins to discuss it as a principle.

> Dora; Boundaries are slightly different now you've enabled me to think about it, yes. I hadn't consciously thought that I was working that way, but I suppose unconsciously….Well, you saw [names

person] and [names person] out there.  Yes, that shifts.  She would often walk in and give me a hug...A real hug and I'm thinking 'how can I?'  Yes, whereas back in D….. it's all very into the room, sit down and the work is done and you are very boundaried and touch, yes, I do use if it's needed.  The odd 'you're doing a good job and keep doing what you're doing [laughter] and that kind of thing, but yes, I suppose I'm following the client rather than the client following me….It does feel different in children centres.  It does feel different.  It doesn't feel like counselling, although it is.  It doesn't feel like it because…because the parents want that relationship to be more than counselling.  Does that make sense? Yes, and it's incredibly difficult.  It's not demanding if you know… if you can work in that way. If you can let your, not barriers down, but if you can free yourself up and work in that way. And then when you go back into D….you know you're going to work in a different way, but then there is a bit of a conflict with the…I keep doing this, don't I… the boundaries, yes, there is a little bit of give and take…

If you work with a person, which I do in a person-centred way, then I'm guided by what that person needs.  And really that's it.

Talking about it…it's sort of made me more aware of… That I am working in a different way in children's centres.  I was aware I was because it feels different … but not as much as I am, but that's OK. Because it's what's needed and if that's what parents want and are crying out for then we need to be [with them], you know.

In responding to her clients' need, Dora recognises that she is working differently and is beginning to construct the relationship with clients at Centre LE as different to her counselling elsewhere.  As quoted in the earlier section on dress, she dresses differently, in jeans, when she is at the centre, and her boundaries are different, for instance the big hug, and the difficulty she has in providing the 'right' relationship.  Dora's unconscious re-construction of counselling begins to mirror Smith's (2010) exhortations to do counselling differently with working class clients.

## Summarising the counselling process

A major difference between the focus group participants and the counsellors was the difference between therapeutic interventions experienced by the

former with the counselling purported to be offered by the latter.  The parent focus group participants had received mental health, counselling, and other therapeutic interventions based on the neutrality and disengagement of the therapist and, it appears, theoretically oriented to a psychoanalytic/dynamic practice. As working-class clients they had found these experiences very difficult indeed.  The counsellors interviewed worked within the framework of an empathic relationship which coincided with what the focus group participants constructed as counselling for them.

The counsellors recognised the need to establish empathy in the first meeting.  To enable this they pushed the boundaries, such as making themselves visible outside the room, establishing a friendly rapport prior to counselling by socially circulating in the centre, making themselves available outside the counselling times, and following their client's needs rather than meeting institutional requirements.  Confidentiality was recognised by the counsellors as very important to this client group both because of trust issues, and the position of the room, but also because most were subject to the parameters of confidentiality circumscribed by service requirements, that is, information shared amongst professional case workers.  Ensuring that clients understood that they did not share information, (subject to the usual caveats associated with harm to others and self) was signalled as important to the counsellors.

## Chapter summary

Overall, the five counsellor interviews demonstrate that the counsellors involved did not consciously use class structures to construct or think about their clients. Indeed, they initially dismissed the idea. However, as the interviews demonstrate, the counsellors made many references to generalised and subject-specific discourses containing notions of class and social structural differentiation. Furthermore, it was evident that when they were assessing clients they categorised on a class basis. Class was a structuring absence.

Two of the counsellors discussed difficulties in counselling 'upper-class' clients. When discussing this they felt the need to apologise and were hesitant as if it was something not talked about or without words. No such hesitation was present in the discussion by any of the counsellors about the centres' client group suggesting that it was 'normal' to talk about people sometimes subject to the social work gaze, but not those from the 'higher' classes. This corresponds with literature about parents and working class 'others.'

The counsellors and the parent focus group participants agreed, that there was a need to work differently in children's centres. Indeed the evidence suggests that, needing to establish the potential for an empathic relationship within the first session, the counsellors interviewed went of their way to enact this and to meet their clients in the most appropriate ways possible.

There were distinct echoes here of how Smith (2010) and Liu (2011)

suggest 'doing it differently.'

# Chapter 9

# DISCUSSION

The theory chapters (Chapters 2-4) argued that class can, and needs to be, conceptualised in three distinct ways: class as structured social and economic inequality; class as a relational concept; and class as a subjective entity after the 'cultural turn' in social theorising. Furthermore, the diverse nature of class, affects the theory, practice and provision of therapy, with each conceptualisation having different import for the therapeutic relationship. In addition, to obtain a grasp on the totality of social inequality, it is necessary to utilise a class concept applicable to the research need. Sometimes this means using one approach, at others maintaining a duality by 'working across and with conflicting approaches and methods' (Crompton 2008:12). Following Crompton, the latter exemplifies the approach taken here.

Chapter 2 focused on class as structured social and economic inequality, citing research that measures the effects of class position on the allocation of resources, differentiated income, health outcomes, morbidity and longevity. Comparisons were made across groups and nations. The accounts demonstrated that class exists 'out there' and can be seen in institutionalised structural inequalities, that highlight that the income gap, or share of GDP between the highest earners and the lowest, and how this gap is increasing. The link was made to neo-liberal political agendas and associated dominant discourses which, it was noted, find expression in

methodological individualism circumscribing psychological theories and practice.

For psychotherapy, utilisation of the structural concept of class can inform allocation of resources and ensure access for marginalised groups. Furthermore, this concept highlights how the structural position of the working-class client can be the cause of distress and ill-health.  Statistical analyses also offer challenges to popular misconceptions about the working classes, employed or unemployed, and the poor.  It was argued that the poor working classes and poverty are part of the structure of inequality and, as such, those living on the margins of society should not be separated out into a class in itself as 'underclass' theories argue. Underclass theories pathologise the poor, rendering problems as a consequence of their structural position, rather than their structural position creating their problems (Botterro 2009; Crompton 2008; Liu 2011; Sayer 2005; Smith 2010).  The research demonstrates that many working class individuals experience poverty at key points associated with life transitions, and few remain in poverty all their lives.

Chapters 3 and 4, respectively, presented an analysis of class predicated on first, Marx's relational concept of historical materialism and selective aspects of object relations theory, and second, cultural theory and the subjective experience of class and class identities.  It is these two theoretical concepts that structure the qualitative research analysis.  Therefore, with the purpose

of highlighting how the theories apply to practice, the following discussion

will be similarly structured to Chapters 3 and 4.


## A relational concept of class

The relational approach to class proposed here is predicated on Marx's

historical materialism. That is, it is proposed that class relationships are

interdependent and have developed discursively, practically and

symbolically out of a fundamental economic dynamic.  This dynamic, the

driver of capitalism, comprises two primary class groups – those who sell

their labour and those who buy labour.  Because it is an economic

relationship these two classes are in an antagonistic dynamic, one to the

other. Marx's relational class propositions provide a conceptual link between

the inner and outer world. The threads of the social in object relations

theory, coupled with the social individual, in historical materialism, offers a

challenge to the traditional separation of individual and society.  In terms of

therapy, a relational class analysis binds the client and the therapist into an

interdependent class-based relationship.


Symbolically, the therapist becomes the 'other' to the working class client,

by representing the dominant discourses, practices and capital of the elite

groups and therefore becomes the repository for emotions associated with

an unequal power relationship.  As Frosh argues (1999:272) 'power

relations are the means by which society enters into the consciousness of

each person.'  Moreover, the power relationship, the superior/subordinate

distinction, is historically constructed by one group at the expense of the

other. On the basis of the existence of the 'others' structural position each defines themselves (Fanon1967). Emotions such as hatred, anxiety, envy, shame, self derogation and exclusion are experienced by both client and therapist, but are rarely named as anything other than individually-constituted emotions surfacing in the transference and counter-transferences of the client *and* the therapist (Liu 2011; Sayer 2005; Smith 2010; Fanon 1967; Frosh 1999; Prilletensky 2010). In practical terms, the symbolic or actual class of the therapist and client will become visible in the transference and power relationship.

The focus group parents, a total of 31 participants, were all from the working classes. The homogeneity of their accounts in constructing therapists, or how their therapist saw them, and what they liked or did not like about therapy, is significant. Responses citing the attitude of the therapist as 'off-putting' included: being not 'equal', being 'high' or 'stuck up', 'thinking they are better than you', being 'patronising', the therapists use of different language, same and different backgrounds, and dress, making their clients feel small or inadequate, and judged, and being condescending. This was consistent across the data corpus, that is, in all the focus groups and agreed by all present. In a number of verbal extracts the anxiety, anger and shame associated with being in a subordinate position, not heard and seen only as subject to a regulatory gaze (Foucault 1987), was also present.

There is a distinct separation in the accounts between the therapist and the working-class parents' 'me', but at the same time, the parents' 'me' is aware

of being devalued, 'wrong' and apart.  The focus group participants constituted themselves as a class and spoke as a class.  Using Bourdieu's terminology, their shared class position, their habitus and dispositions disposed them to oppositionally construct the class of the dominant 'other' and in so doing, they constructed themselves in a class.  The middle class were constructed as a group of people who have an easy life, an idealised life, who are sometimes therapists for their own purposes rather than for the client. The negative constructions of therapists and the construction and interpretation of the working class experience of actual counselling and therapy, presented the counsellor as living apart from and different to them and their experiences.

The transcripts indicate that not one of the parent participants saw themselves as anything other than working-class and they were clearly aware of their hierarchical subordinate position.  This was evident in the manner in which they constructed therapists as different to them, as a group, and class, as indicated by the terminology and the repetition of the associated subordinate class feelings cited above.  Skeggs's (2011) study found that aspirational working class women misidentified and disidentified themselves.  In this study, the focus group participants were not educationally aspirational. Nor were they asked directly about their class, given the noted difficulties in doing so.  Nevertheless, they signalled their sense of their class position through discursive representations of counsellors, and also through the use of language such as 'I'm common' or 'normal like me, 'not for the likes of us' and differentiating their material

circumstances through references to clothes, transport and not being able to afford private therapy.

The five counsellor interviews, however, present a different picture. None of the five counsellors saw class as important to counselling.  The only aspect of class mentioned in relation to the centre client group was marginally related to secondary processing if 'things were not going well with the client.' Yet, paradoxically, it was clear in their accounts that all used class-based socio-structural analyses in making judgments about their clients and their clients' backgrounds both in the initial assessment and in the counselling process.  It was striking how the phrases and terminology used mirrored the dominant discourses and was considered entirely acceptable and 'right'. Discussed assuredly and with confidence, their consideration of their clients spoke to their own cultural capital, and their professional claim on social space (Bourdieu 1984), and revealed their symbolic power to define as 'legitimate' what is valuable, acceptable and good. According to Sayer (2005:101), this is an act of symbolic violence through a simultaneous claim to social space, which by definition excludes all that is not so defined.  In other words there is a 'dis-identification of inferior groups.'  Though the counsellor accounts did not demonstrate the same homogeneity as the focus group participants in constructing the 'other' (possibly due to the small number of participants), their unconscious claim to social space, and their lack of awareness of class, their use of socio structural categories to assess clients and to make sense of their clients' difficulties, was clearly evident.

Also notable in the counsellors' accounts was that they recognised their powerful position as therapist and that they worked hard to address the power differential in the therapeutic relationship. However, how they constructed their power indicated a conflation of their recognised professional power, and their unrecognised class power, symbolised in the dynamic of the counselling relationship (Fanon 1967; Frosh 1999). There was a definite hint here of a misreading of their structurally-designated power, or at least their not seeing that their power stems both from their structural position as symbolically and culturally middle-class, and their power as a professional authority. The accounts of the focus group participants, by contrast, were diffused with a sense of structural powerlessness, for instance, in their lack of choice, lengthy waiting times, being disregarded and unable to challenge it, being subject to social work regulation, being 'referred' to counselling, and having to abide by the times, timings, and where the counselling takes place, and the setting of boundaries, including the extent of cross-service shared confidentiality. The counsellors accepted all this as a given, a part of *their* cultural capital. However, in their clients' best interests, the counsellors' consistently and successfully challenged the inadequacy of the number of contracted sessions. A class reading suggests it is also part of their cultural capital to do so.

The focus group participants paradoxically both accepted the authority of the counsellors, and challenged it. They recognised that counselling had something to offer as a last resort, but prioritised their own strength and

experience over 'book learning' (see below).  What was most marked here, though, was the dissonance between how the participants discussed authority as social and structural authority rather than familial authority. By comparison, the latter received scant regard yet within psychodynamic/psychoanalytic paradigms it is significant to the transference.  This suggests, tentatively, that therapists working within these theoretical orientations are misrecognising or misinterpreting at least some of the transference as parental authority, whereas a class reading would suggest it is a counsellor's symbolic socio-structural authority that impacts transferentially, either in addition to familial transference, or instead of it. The five counsellors interviewed, who were theoretically oriented to humanistic/person centred perspectives did not use transference. Authority for them was either an accepted given or considered only in terms of the power relationship.

Importantly, the two counsellors working in contexts other than children's centres, but nevertheless with families, discussed difficulties in counselling 'upper class' clients. Using the same language and frames of reference that the parent focus group participants used when discussing counsellors, they distinctly constructed themselves as in a different class to their 'upper class' clients who they constructed as (almost) a homogenous group with particularised class-related dispositions.  However, what was significant was that in articulating their negative experiences with 'upper-class' clients, they felt the need to apologise and were hesitant as if it was something not usually spoken about, without words.  This is in marked contrast to the

discussion by all the counsellors about their generally working class-client groups. There was no hesitation and plenty of references to common parlance and discourses about the poor working-classes, suggesting that it was 'normal' to talk about those sometimes, subject to the social work gaze, but not to talk about those from the 'higher' classes. Furthermore, there is a significant difference between the focus group participants and the counsellors, in that the former constructed themselves as being at the bottom of a bipartite hierarchy and the latter constructed themselves as in the middle of a tripartite hierarchy, looking 'upwards,' and looking 'downwards' (Liu 2011).

There is enough evidence in the participants' accounts to assert that the relational concept of class is an active part of class constructions, motivations and emotions, that the working class-participants, though not all from one section of the working-classes, constructed themselves as a class, and the class of the other, on a binary, oppositional basis. This could be seen in the 31 focus group participants' accounts. For the therapeutic relationship, there are significant indications that power, authority, and class are misidentified and misread by counsellors and therapists in part due to their theoretical paradigms, but also because of a misrecognition of class as a secondary rather than primary processing issue.

The five counsellor accounts also present class as constructed as a relational concept. Definitions of their own class and the class of others are presented oppositionally. However, they are not predicated on a two-class

dynamic.  There is recognition of a hierarchical ordering, 'classes' above and 'below' their structural position, albeit in only two cases.

## Class, capital and social positioning

Chapter 4 conceptualised cultural theory analysis, and the subjective experience of class and class identities, as useful to therapeutic endeavours.  Sustaining a relational approach, subjectivities of the client and the therapist were explored.  The analysis, predicated on Bourdieu's (1984) notions of class, mediated by Skeggs' (2011), Liu (2011) and Smith's (2010) research, Crompton's (2008) critique and Sayers (2005) development of the moral significance of class, demonstrated the need for a re-reading of current theory and a re-structuring of present practice in the field to ensure that class is not just an add-on, but finds a place central to therapeutic procedures.  A few selective examples from the extant literature were used to highlight the usefulness of this approach, both in identifying class differences in cultural capital and dispositions, but also in reflecting on the potential  misidentification of emotions, for instance that of shame and envy.  A class analysis, as defined in this chapter, offered an alternative reading of these emotions which then appear misappropriated by traditional psychological paradigms.

Analyses of capital, dispositions and embodied practices can also highlight resistance, not just reproduction, and carefully deployed, avoids the culture of poverty arguments, which effectively blame the working classes for their low aspirations and stunted (sic) lives (Sayer 2005; Crompton 2008).

The focus group thematic analysis associated with this concept, was divided into nine sub themes: experience versus book learning; claim to social space; dress and appearance as cultural capital; the room as symbolic and cultural capital; confidentiality as cultural capital; resistance to the cultural capital of the therapist; accepting the cultural capital of the professional; strength and self reliance as cultural capital of the working class client; and constructing counselling 'for me.' As sub-themes, these were present across the focus group data corpus. Some of these themes were present also in the accounts of the counsellors, but in the majority, represented a different perspective.

The prioritisation of experience over book learning was part of the cultural capital of the focus group participants. Conversely, their accounts acknowledged that counselling may have something to offer to 'make me better.' What initially seems a paradoxical position signals a tension between need, and how that need may impact on subjective constructions of the lived working-classed self. Experience appears as part of the cultural capital of the working-class participants. This means that, rather than dismissing the counsellor as inexperienced, as a surface reading might suggest, the participants unconsciously perceive their need as counterproductive to the construction of self as experienced, strong and resilient.

Not unexpectedly, the (self-declared) working-class counsellors did not share this position with their clients. Neither did the one counsellor who could not identify her class position. As educated professionals, their class dispositions mean that their cultural capital includes an acceptance of 'book learning' and qualifications as part of their symbolic capital (Bourdieu 1984; Sayer 2005). Indeed, on the counsellors' behalf, there was little recognition that clients might consider experience more important than education or that this education might be a challenge to the client's self-concept.

The focus group participants' sub-theme, claim to social space, was a sub-theme in itself, but it also overlapped considerably with both the other main themes - class as a relational concept, and the counselling process. This is because claims to social space, the power to define, exclude and so on and so forth, resides totally with the professional and the profession. The speaker both identifies his own class and the class of the 'other' 'by speaking to him in a 'certain way' and this is 'never more clearly expressed than in the space and time one feels entitled to take from others' (Bourdieu 1984: 471-73). The focus group participants' accounts presented a picture of total disempowerment faced with the cultural and symbolic capital of the therapists and their power to define. There was a notable exception in the experience of one of the 31 participants, who had received a different therapeutic experience to the others.

In the working-class counsellor and the upper class-client sub-theme, in the counsellors accounts, dissonance was experienced by the counsellors faced

with the embodied dispositions of the 'upper-class' clients.  The counsellors'

cultural capital did not include an available analytic framework or

explanatory categories to analyse their experience *vis à vis* 'upper-class.'

This was in marked contrast to the confident expression of their own cultural

capital held in relation to the helping professions' regulatory gaze (Foucault

1987) on the working classes.

Dress and appearance as cultural capital was the most closely aligned

construction, resonating similarly in both the focus groups and the

counsellors' interviews.  When the available symbols of material capital such

as house, car, etc. are unavailable, or the claim to social space is

unrecognised or devalued, then the only signifier becomes the body and

dress, thus dress becomes an important indicator of capital (Bourdieu 1984;

Skeggs 2011). The focus group participants read the cultural capital of the

therapists in their dress, seeing 'suited and booted' as symbolising

everything that they disliked and were not.  The counsellors knew this.  How

this had been conveyed to them is not known, but they all 'dressed down' to

appear available and empathic to their clients.  There was a hint in the two

counsellor accounts of working with 'upper class' clients that they dressed

'up' to meet these clients; both mentioned wearing suits.  There appears to

be considerable class recognition and signification in dress, which is in line

with the extant literature (for instance Skeggs 2011).

In the use of language, there was also a shared recognition of differentiated

cultural capital.  Both the counsellors and the focus group participants cited

'upper crust' accents or exclusive speech as a problem.  Once again, in order to create empathy, the counsellors purported to use familiar, relaxed forms of language and speech, to ensure their clients felt comfortable. Some of the focus group participants had cited professional explanations and language as inaccessible to them.  The counsellors were aware of this, with some accounts including a detailed explanation of how they explain the process, and the contracting for counselling, to their clients.  The use of humour was cited by the focus group participants as a route to feeling relaxed with someone.  One of the counsellors similarly noted this as part of a strategy to disable the power relationship.

The room, for the focus group participants, was very important.  Offices, desks and clinical looking environments were received as another signifier of the capital of the counsellor.  Importantly though, another issue became visible here.  A number of the focus group participants were used to police and social work interview rooms.  A powerful construction of locked doors, nothing to look at, no windows or views, and interrogation across a desk emerged.  When they constructed a room suitable for themselves the parent focus groups talked about a 'home from home', comfortable seating, a 'cup of tea', signifying being looked after rather than interrogated.  Some of the rooms that had housed the therapeutic interventions they had received were anything but safe, to them.  The counsellors also recognised a comfortable room as important, the need for comfy seating, quiet and a relatively neutral space were noted.  However, there was no inkling in these five accounts that, for the client groups they work for, the room assumes special

significance in representing the sometimes heavy-handed power of the dominant groups, and was therefore not a space for them. Some of the comments of the counsellors were a bit dismissive, for instance Kay's 'it is as it is.'

Resistance to the counsellors' cultural capital was evident in the focus group accounts, but so too was acceptance. Bourdieu's (1984) conceptualisation draws on evidence that emphasises acceptance at the expense of resistance. He argues that there is acceptance and self-exclusion 'from the goods, persons, places…from which one is excluded… a reserve and acceptance of insignificance "that's not for the likes of us" ' (Bourdieu 1984 471-73). Crompton (2008) and Sayer (2005) pose acceptance without its counterpart, resistance, as problematic, both practically and conceptually. Skeggs (2011) exemplifies research that demonstrates that the working classes resist their structural position at least as much as they accept it. The focus group participants in this study accepted the capital of the counsellor when it suited them, but like Skeggs' account, used ridicule and resisted it when they could. For instance, they constructed alternative images of themselves as strong and experienced rather than accepting the dominant discourse on families structurally situated as similar to them. The counsellors, however, did not present recognition of an alternative discourse to the dominant perceptions, in part, perhaps, because of the point at which they would be likely to be seeing their clients, when they were most in need of help. Interestingly, there were a few expressed resistance similarities by the counsellors, such as the resistance of three counsellors to the time

frame for counselling, and resistance to the other professionals' desire for a shared confidentiality.

## The counselling process

The third theme, The Process of Counselling, took the analysis into aspects associated with engagement in therapy.  The evidence from the focus groups suggests that therapeutic distance and disengagement, the lack of explanation about the process and what to expect, is perplexing to the working-class client.  Neutrality is received as a repetition of socio-structurally generated not-mattering, being overlooked and not heard, and is symptomatic of social power relations.  Distance emphasises the power asymmetries present in the therapeutic relationship (Frosh 1999).  Similarly, there is a perception of judgment, blame and shame, mirroring the discourses that blame and shame those who are unable to live up to the essentially middle-class aspirations and mores of a neo-liberal, individualistic society (Liu 2011; Sayer 2005; Smith 2010).  Unsurprisingly, of the twelve focus group participants who declared having had therapeutic interventions, ten prematurely terminated the sessions, and the eleventh as a social work referral, stated she was in the process of trying to refuse the referral.  Only the twelfth, who had received a very clear exposition about the therapeutic process in the first instance, and who found her therapist relaxed, and professional but informal, stayed the course of therapy.

The counsellors' accounts were framed by person-centred theory and practice.  Empathy is key to this practice orientation and these counsellors

prioritised it as previously discussed, in the manner in which they mirrored their client group's dress and language. 'Following the client,' was expressed throughout the accounts, usually in the context of client need. By prioritising client self-direction, the development of the working relationship and promoting empathy, they constructed counselling differently, essentially by pushing the boundaries. Counsellor neutrality and transference is not an issue within this theoretical orientation, but boundaries and the counselling frame are shared cross-orientation concerns. Smith (2010) argues that, given the structural position of the working-class client group and their consequent dispositions, and how the cultural capital of the counsellor impacts on the relationship, bringing these two together without accounting for this, is setting up the relationship for failure. Thus, she argues, counselling should be more flexible both in boundaries and process. As a consequence of their orientation, the counsellors in this study were, somewhat unconsciously, doing things differently, for example, providing extra time in the first session to 'get it all out'; providing contact details for use at any time; using touch and the 'big hug'; meeting prospective clients in the centre prior to forming a counselling relationship through 'milling,' or as in the case of one counsellor, providing parent workshops.

Bourdieu's concept of class and capital clearly indicates the necessity to re-read and re-orientate current mainstream psychological theories and practice of therapy, to incorporate a class-analysis. It is also possibly the most accessible theory to therapists, but with a couple of caveats:  first, as Crompton (2008:112) argues if cultural theories present 'economic inequality

and cultural hierarchy' as 'seamlessly fused' then there is a danger of 'displacement'

> "That is economic inequalities are effectively subsumed within (displaced onto) cultural concerns, and within this model to revalue unjustly devalued identities is simultaneously to attack the deep sources of economic inequality and no explicit politics of redistribution is needed "(Crompton 2008:112).

Recognition of difference becomes the primary concern, and thus redistributive politics and the surrounding issues, lose their importance (Crompton 2008). Given that inequality is increasing, seemingly exponentially (see Chapters 1 and 2), taken on their own, without knowledge of Marx's relational conception of class, then, paradoxically, identity politics and the cultural turn may serve politically conservative forces just as the psychoanalysis did so in the past.

> "Thus, while helping professionals, psychologists and counsellors are interested in the idiosyncratic ways in which individuals perceive their social class contexts, social class is always dependent on multiple and simultaneous macro-level operations" (Smith 2010:19).

It is worth re-iterating the argument that Bottero (2009) Crompton (2008) Sayer (2005) and Smith (2010) propose, perhaps most succinctly expressed by Bottero (2009:7) when he warns of the consequences of utilising a cultural approach as an isolated concept rather than situating it in the bigger picture, that is, how 'systematic inequality generates disadvantage.' Cultural readings of inequality that focus on 'the distinctive cultural values of disadvantaged' or 'unequal groups' promotes the argument that being poor or being situated at the bottom of the hierarchy is the fault of the individual,

and is a consequence of 'supposed cultural deficiencies' such as lack of motivation, and poor education and skills.

## Summary

Like racism, class is structured by classism which is external, contextual and situational (Smith 2010:20-25) and concern with the consequences of inequality should be central to any class-related endeavour (Olin-Wright 2008:26).  It is argued here, that both conceptualisations of class, the relational concept, and class cultural theory, should inform therapeutic theory and practice.  The tangible and intangible elements of social structures need to move centre stage, into the primary relations processing.  If this is ignored class privilege and capital enter the therapeutic relationship, and simultaneously, a devaluing of the dispositions of the working-class client takes place.

# Chapter 10

## CONCLUSIONS

The research question underpinning this study is 'how does class influence the dynamics of the therapeutic relationship?' In recognition of the importance of theory to class, and the centrality of empirical research to answer the query, the question was subdivided into two: how can class be usefully conceptualised to provide the foundations of a class analysis within counselling and therapy, and how does class operate within the dynamics of the therapeutic relationship? The first question was answered in Chapters 2, 3 and 4, conceptualising class differently. The following chapters focused on the empirical inquiry.

## Contribution to advancing theory

This study has argued that, to comprehend the complexity and extent of class, more than one sociological theoretical concept needs to be utilised. These theoretical concepts may not be compatible. Indeed they may be contradictory, but as, for instance Crompton (2008) and Sayer (2005) argue, instead of trying to create a composite theoretical position, a duality is called for in order to address different aspects of class. Following these exhortations, I have argued that three particular paradigms are useful to understanding the class dynamic in the therapeutic relationship.

First, class, defined as structural and social inequality, can inform the therapeutic community about the contextual situation of their clients, how structural inequality impacts on their life chances, outcomes and class-

dependent health issues. Patterns of inequality are highlighted by applying this approach to concomitant research on which appropriate institutional responses can be constructed.

Second, a relational concept of class, predicated on Marx's historical materialism, was applied to the therapeutic relationship. This is a fresh approach to Marx and psychological theory, in this instance, Klein's object relations theory. Here it was demonstrated that the social in the individual and the individual in the social, have a theoretical, conceptual basis. Applying the relational dynamic to make sense of class in the therapeutic relationship highlights how Marx's two classes, the bourgeoisie, those that purchase the labour of others, and the proletariat, those that sell their labour, are in antagonistic relationship to one another. This is reflected in the dynamic of the therapeutic relationship as the dominant and subordinate class. The point was made that, although the therapist is rarely a purchaser of labour, to the working-class client, she is a symbolic representation of the antagonistic, elite class. Conversely, to the therapist, the working-class client is structurally conceived as of the subordinate class. It was argued that from an object-relating perspective, the class dynamic is present in pre-transferences and becomes visible in the transference and is in primary rather than secondary processing. From this perspective, class becomes a central dynamic in the therapeutic relationship.

The third conception of class utilised Bourdieu's habitus, capital and dispositions to consider the subjectivities of both the therapist and the client

in relation to one another. Mediated by Crompton (2008) and Bottero's (2009) exhortations to ensure that such conceptualising did not collapse into the culture of poverty thesis, plus Sayer's (2005) Skeggs' (2011) and Smith's (2010) claim that class resistance is at least as prevalent as class acceptance, the analysis demonstrated how class dispositions, habitus and capital, as subjectively experienced in class relations and institutions, affect the continuance and reproduction of class inequalities in both the dominant and subordinate class groups. Specifics related to therapeutic interventions were highlighted.

These three concepts cannot be conflated into one class paradigm. Each theory highlights a different aspect of class. Theoretically the three should be held in parallel to one another. Empirically each can inform the other in preference to prioritising one over another. This is the specific contribution to the development of theory that this study makes.

The theory section also considered the role of neo-liberalism in exacerbating inequality. Furthermore, and critically for therapy, as the dominant ideology operating within the UK and the US, neo-liberalism creates a further complexity, that of the individualised discourse. For the helping professions, therapy and psychological theories, individualism is mirrored in the centrality of the individual, both in practice and theory. An atomisation has occurred whereby the individual is extracted from his or her social context and is theorised and considered only as an individual. The one-to-one therapeutic

encounter emphasises the primacy of the individual at the expense of the social.

## Contribution to empirical method

The two theoretical concepts of a relational class dynamic, embracing both the client and the therapist, and class as habitus, dispositions and capital, framed the thematic analyses.   The analyses followed a constructionist, thematic account (Braun and Clarke 2006) applied to the data from Sure Start focus groups.  The Sure Starts were situated in five low super-output areas, meaning that the participants were living in areas designated on the basis of government-identified factors, as constituting the top percentile of social and economic deprivation.  The centre managers confirmed the status of the participants in this respect.

The same methodological approach was taken in the analysis of the counsellor interviews, but the analysis was comparatively oriented across the two data corpora.  The counsellor participants were, either working in the same Sure Start centres as the focus group participants, or working with families in the same lower super output areas. This is the first time that a thematic and comparative analysis has taken place with these particular participant groups, thirty one white poor working class women, and one male in the focus groups, and five counsellors working with the same client groups.

The combination of focus group and individual interviews incidentally highlighted the focus group as a method of data rich collection.

## Substantive findings

The first key finding supports the notion that class is relational and that working class clients see their therapists as symbolically and practically middle-class. This theory is substantiated on two counts:

1. By calling on latent socio-cultural structured accounts of class, the focus group participants constructed themselves as a class, and thereby constructed the class of 'others' including that of the therapist. A definite 'us' and 'them' appeared across all the focus group accounts. Oppositional categories structure the focus group participants' understanding of themselves, their social position and their class. Across this data corpus the class dynamic appeared based on two classes.

2. The narratives presented accounts of symbolic and real power differentials and relations between Marx's two classes from the perspective of the focus group participants' disempowered, working-class position.

The second key finding also supports the notion of class as an embedded relational concept, in that the counsellors also constructed themselves and their clients through binary mechanisms and unconsciously called on latent socio economic structural categories in thinking about their clients. However, two of these participants did not construct class on a two-class basis, but added a third 'upper class' presenting themselves by definition as

a class in the middle – not like their working-class clients, nor like their upper-class clients.

The third key finding is that, an analysis of difference in symbolic and cultural capital between the focus group participants and their therapists, demonstrated how they all discursively constructed their perceptions, and reflected on their experiences by using embodied dispositions related to structural positioning.  The cultural capital of the therapist is strongly challenged and resisted by prioritising experience over education and the re-claiming of social space, whilst, paradoxically, the labels that professionals give them are appropriated to make sense of their lived experience.

The fifth key finding is that the focus group participants constructed therapy in their own terms.  A genuinely safe room, not clinical, nor like a social work or police interview room, offering relaxed comfort, a lack of formality on the behalf of the therapist in both dress and manner, providing a professional friendliness, clear explanation about what to expect, and a cup of tea, are constructed as making therapy suitable 'for me.'  This has implications for the practice of therapy in the context of class.  It also has ramifications for theoretical orientations and warrants further investigation.

The sixth key finding is that the dispositions of clients, similarly structurally positioned as those in the focus groups, is likely to affect their attitude to therapy.  The dispositions of the latter resulted in resistance to counselling, as defined by the cultural capital of the professional, including the theoretical

orientation of the therapy. For instance a lack of interaction is perceived as class based non-interest and is found to be both confusing and disempowering. When the working class clients' experience of counselling mirrors the exclusion, isolation and not-mattering, the 'relational incompetence' they feel in respect to the dominant and elite groups in society, then the stance of neutrality by the therapist can result in clients sensing 'that their feelings and thoughts do not matter' (Smith 2010:106). The class located feelings of not mattering are compounded by perceptions of judgment, blame and shame, as Fanon (1964) and Sayer (2005) have argued, feelings associated with being the dominated 'other'. For practice orientations espousing neutrality, this is important. Some participants, who had received therapeutic interventions circumscribed by the neutrality and distance of the therapist, found this too painful and these all prematurely terminated, a consequence suggested by the extant literature (for instance Fannon 1967; Frosh 1999; Liu 2011;Smith 2010;).

The seventh key finding relates to psychoanalytic/dynamic therapies in which familial authority and the family as a structuring entity are important to the transference. Yet, in this analysis, it was evident that themes on social authority occurred with far greater frequency than that of the family. However, the counsellors located power entirely within the one-to-one counselling relationship. There was no sense of a social understanding of power, suggesting that at least some of the power transference is being misread by therapists. Indeed, such a reading is presently counter to the therapeutic literature.

## Research limitations

The limitations of the empirical research are that the focus group participants were all white, all female bar one male, and all poor working class. There are other working classes, such as the counsellors, who were educated and therefore aspirational working-class, those with different ethnicity, gender etc. The research is therefore specific to these groups. Addressing these limitations is suggested in the following section.

## Proposals for future research

There are four suggestions for further research. The first is theoretical development. Whilst social theory has a great deal to offer, it is rarely acknowledged in the therapeutic literature and is usually confined to sociological research rather than theory. As proposed here, the exposition of two particular theoretical concepts highlights the possibilities of further development. Klein's object-relations theory and the relational dynamic in Marx, coupled with Bourdieu's relational dispositions, demonstrate a way forward.

The second area for theoretical and empirical development is Marx's relational class theory. Whilst accepting this as a major contribution in appreciating the power relationship, between the dominant and subordinate groups, supported by the empirical research with the focus group participants, there is a strong hint in the counsellor accounts that something more is going on. The poor working-class participants in the focus groups at the bottom of the hierarchy, to all intents and purposes not educationally

aspirational, perceived themselves as one class and all those above them as a homogenous 'high' class. However, this was not the case with two of the self-declared working-class counsellors, who, although they still used binary definitions, articulated a further dynamic in relation to the 'upper-class' clients. Although this does not undermine the concept of a relational class dynamic it does warrant further investigation.

The third area for future research is connected with the singularity of the working-class participants. Although the research here is focused on the therapeutic relationship, there are findings that may resonate with the working-classes as a whole. Therefore, given that the focus group participants bar one, were female, all were white and all were parents, to generalise from the specific raises questions about the validity of the research. Difficult as it may be to find such participants, future research could focus on male working-class participants and those of a different ethnicity, in addition to broadening out the female participation to embrace a wider range of the working-classes.

A fourth and perhaps the potentially largest area of future research would be to focus on the therapeutic community. Five counsellors participated in this research. Therefore, findings based on this low count can only be provisional. There is a great deal of work to be completed here. Addressing the class of counsellors, the class of their clients, how counsellors manage the dynamic, whether they recognise the dynamic, whether they 'do it

differently', how the therapeutic community can embrace class difference, and so on and so forth.

## Suggestions for practice

The counsellor interviews provided a reference point to the focus group analysis; there were some useful pointers to further exploration and inquiry, as discussed above.  Combined with the focus group participant accounts there are some important findings related to therapeutic practice.

The first finding relates to theoretical orientation, that as person-centred practitioners, the counsellors located difference as a difference in the power associated with the role of counsellor. There was no sense that they constituted power in any other way and certainly not their middle-class power as a professional. Furthermore, although they claimed class was not an issue for them, they called on latent socio-structural accounts of class when thinking about their clients and their clients' problems.  Class was the structuring absence in their accounts about working-class clients, but not when two counsellors recounted and interpreted their experiences of working with upper-class clients.  Hesitancy and apology signalled a lack of permission to discuss, and the absence of a relevant discourse.

Conversely, the centrality of empathy to the person-centred orientation coincided with what the focus group participants constructed as 'counselling for them'. The counsellors recognised the need to establish the empathy in the first meeting. To enable this, they pushed the boundaries, such as

making themselves visible outside the room, establishing a friendly rapport prior to counselling by socially circulating in the centre, making themselves available outside the counselling times, and following their clients' needs rather than meeting institutional requirements.  This suggests that the person-centred orientation's use of empathy accords with the needs of the working class client and incidentally goes some way to disestablish the primacy of power situated within the counsellor.

Psychodynamic/psychoanalytic therapy is very different in terms of the relationship.  There is some indication here, that, for psychodynamic oriented therapy to be appropriate for working class-clients, then some reconsideration of neutrality should take place.  As many commentators in the literature point out, and the evidence from this research, the seeming lack of engagement of the therapist is, from a class reading, problematic to those whose experience is of not-mattering, being ignored and not being heard.  It begs the question: why does negative transference have seeming priority over positive transference (Murdin 2010)?

The second finding is that dress and appearance were singled out by counsellors, as much as the focus group participants, as an important first signifier of the potential of the relationship.  To the counsellors, looking like their clients undermined the power differential between counsellor and client, and established empathy at the outset.  To the focus group parents, some-one 'like me' or 'almost like me' was a stated preference, with a common dislike of the 'suited and booted.'   The constructed reasons why

both the counsellors and the focus groups liked casual dress differed, but both located 'suited and booted' as a formal representation of power even though they named that power differently.

The third finding relates to the other major signifier of the cultural capital of the profession, the room.  Similarly to the focus group participants, the counsellors also felt the room important, but they were more likely to accept what they were given.  There is a dissonance here between the importance of the room for the counsellor and the importance for the focus groups' participants.

Time and claim to social space constitutes the fourth finding.  This differed significantly between the two groups.  In the counsellor interviews there was little or no awareness of how their cultural capital, and thus their class, was visible to clients through setting the time boundaries, the place, the contract and so on. However, as their theoretical orientations prioritise the empathic relationship, some of the counsellors, if not all, had, by following their clients, pushed some of the boundaries.

There is a great deal of evidence here that suggests a need to consider the appropriateness of present models to embrace the class dynamic as a central component of therapeutic endeavour.  As a useful starting point, the following are suggested as potential areas for revision:

1. A re-reading of the power transference for psychodynamic therapists, and the power in the empathic relationship for person centred practitioners.

2. The role of neutrality and empathy in the therapeutic dynamic.

3. The dress and appearance of the therapist as a signifier of cultural capital.

4. Full consideration of the room and what it signals to the working class client.

5. Time and claim to social space as cultural capital of the therapist.

Finally, to reiterate, the counsellor interviews are limited in number and can only provide an indication of possible further directions, rather than constituting final research findings.  The thirty one focus group participants' key findings, however, were so consistent across the groups that it is with some certainty that the statement can be made - that class matters, is present in primary rather than secondary processing and constitutes a significant dynamic in the therapeutic relationship.  Furthermore, that theory can provide a way in which class can be understood, analysed and worked with.

# Appendix 1

## Letter to Sure Start Parents

Dear Parents,

I am a tutor at the University of Worcester and am conducting a piece of research about people's impressions of counselling. You do not have to have had counselling – I am interested to know what you think about it and what your impressions are. This research is part of my studies towards achieving a doctorate at the University of Leicester.  The purpose of this letter is to invite you to participate in the research through a focus group discussion (approximately 6 people) led by me.  It will be tape recorded and last about one hour.  The group will meet at……………on…………..and activities for under fives will be available for your child. Your Children's Centre organisation will not be named in the research and neither will you so what you say remains a shared confidentiality within the group.

So far I have met with three different children centres parent/carer groups and their feedback has been that they really enjoyed the opportunity for a discussion.

As a small thank you I will be giving a £5 Boots token to each person who participates.

If you would like to share your thoughts with me and would enjoy a discussion of this sort please fill in the consent form attached.

I look forward to meeting you and thank you very much indeed in anticipation of your involvement.
Kind regards
Miriam

# Letter/email to Counsellors

Dear …….

I am a tutor at the University of Worcester and am conducting a piece of research in Sure Start Children's Centres about counselling. This research is part of my studies towards achieving a doctorate at the University of Leicester.

I am interviewing a number of Sure Start parents, using focus groups, to find out what impressions they hold about counselling.  I would also like conduct individual interviews with counsellors working in Children's Centres and wondered if you would be willing to participate. Your Children's Centre will not be named in the research and neither will you, so what you say will be anonymised.

As a small thank you I will be giving a £5 Boots token to each person who participates.

If you would like to share your thoughts with me and would enjoy a discussion of this sort please fill in the consent form attached.  Please contact me directly if you would like further information. Contact details below.

I look forward to meeting you and thank you very much indeed in anticipation of your involvement.
Kind regards
Miriam

# Consent form for focus group participants

Thank you very much indeed for agreeing to join this focus group taking place at:

………………………………..on………………….time………………..

The focus group meeting will be tape recorded and I need your consent for this, and to use the information gathered, in my study.  As stated in my letter, your Children's Centre will not be identified and neither will you as an individual so although I will use your statements, thoughts and ideas, within my study these will not be able to be traced back to you.  If you agree to participate on this basis please sign below.  I will need your agreement before we have the focus group meeting.

………………………………………………………………………………….

*I understand the basis on which this research is to be conducted and have read or heard the information above.  I agree to participate and contribute to the focus group.*

*Signed…………………………………………………………………………..*

# Appendix 2

## Focus group data set for theme 1. Power relations, class and structural positioning

KTA18.11 Some, feeling like somebody's judging you and being a bit patronising about you.  Again the surroundings I wouldn't want it to be too clinical – nice and relaxed and… open really.  As if you were talking to a friend so there was no barriers like desks and things like that so that you feel an equal as opposed to they're above you because they're trained or professional.  You're there as… an equal to both of you try and discover why you're feeling the way you are really, so yeah, being treated an equal.


RBA5.15  If they dressed like us maybe, not in suits. They look a bit high don't they?... I am quite common and when you see someone like that you think they're stuck up their own arse aren't they.
RBB5.28 And when they say things like "and one does do this and one does do that".
RBA6.10  Especially if you get that feeling that they think they are better than you then that does put you off.  Like when I go shopping if I get followed by the security guards then I put the shopping down and I won't bother shopping in that shop again.  Because they think you are up to no good – that's what really puts me off. So if they think they are better than you then I wouldn't go again.
RBA6.16 If you talk about all your problems they think they are better than you because they've got perfect little families and they've got no problems or they just think they are better than you anyway.
RBA6.22 Well you wouldn't want them to be from exactly the same background because they would be visiting a counsellor themselves but kind of the same background. Not so posh but not common.
RBB6.26  Mine weren't posh she was just dressed as if she was, not posh, but…..
RBA6.27 Very high.
RBB6.28Yeah. As if she was better than you and I hate people like that.
RBA6.30  Suit
RBB 6.31 Not like our kind of clothes but more casual, jeans and a t-shirt maybe something like that.
RBB7.13 As we both know we find it hard to talk to people anyway but it's even harder if you think the person sitting in front of you is better than you.
RBA7.15 And then you go in there and they sit there as if they haven't got a problem in the world  and you are  trying to explain yours to them and it's like do they really want to hear it?  And they don't encourage you really to talk they just ask you questions you can't answer.
RBC7.19 Do they really know what's going on with you, do they really connect with what you're saying.  Because you get people saying yeah, yeah I know what you are going through, I've been through it, and people saying  I understand but really they don't because they are not opening their minds and thinking if I was like that how would I be

RBA2.34 I don't know, it just made me feel awkward.  When I talk to people I like to see if they're on the same level as me and we can get bits in common then I find it easier to talk to people, and if they're like me, bubbly, then I find it easier to talk to them.  If they're like a proper professional sit down, back up straight, straight face and don't answer you back and don't get into a conversation with you I just can't get along. *(All participants in this group had received therapeutic interventions)*

DH1C 6.11: If you've got enough money you've got your own shrink and that's…
DH1A10.42  Well if you've got enough money in America you've got one haven't you, you've got one…
B: yeah, yeah.  That you go and see every week.
C: If you're rich, yeah, and you haven't got a shrink…
B: Exactly.
C: … you're nothing, you know, but.

KTA15.19 Think it would put me off if I thought the person would be patronising…
B That's the word I was looking for.
C Well, the last thing you wanna hear if you're going for counselling or you've plucked up the guts to go to counselling is that, you know, your problems are insignificant or, um, you know, they're, they're putting you down or making you feel small…
A Inadequate.
C… Or inadequate or…
D It does happen in all walks of life doesn't it?

KTD15.36 Or you might tell him something and he go tut, sigh.  And that little sigh…
F Just that sigh…
E  Can totally set you off.
D And you're thinking "oh goodness me" you know.
E What?  What was that about?  What did he think of me then?
B He might tut.
A It might be insignificant for him but it could be a big deal for the person that's sat there.
C It's just the eyes rolling around and not focussing on you, or just fidgeting, or…
E Clockwatching.
D Or just looking at his watch all the time.
B Or looking at the watch.
E Silly things.
D Yes, and that's difficult when you've got just an hour isn't it?

RWC25.10 Yeah, cos it was just the sort of aura, is that the right word?... that he gave out about himself, like it was almost like oh well I'm just doing this job because I get paid for it.  Not because I like want to help. I'm just condescending towards you for an hour because I get paid…

RWA29.20 …and I was really like quite scared about seeing this psychotherapist and everything and I was thinking oh my God what's she gonna be like and everything and I just imagined her to be like this really sort of like stuck up and you know…Just really stuck up and quite like judging, judging me and that, and also like wearing really formal clothes …so I was thinking oh my God this is gonna be awful like she's just gonna sit there and judge me and everything, but she wasn't, she was really nice and she was like really laid back and she was dressed in like, she was like dressed down in jeans and everything and she was like "oh hi, you know, I'm such and such and um I work for like, is it the British Board of Psychotherapists or something like that and she was actually really nice

**Awareness of class and class based perceptions:**

*On counselling*
RWD12.23 … and be prepared to kind of pay for it.
B It just makes it more of a, more of a rich person's therapy really doesn't it?
C Yeah, status thing isn't it?
D It's a status, yeah.
A So it's not necessarily, it might be a taboo for people like us to say "Oh I'm going to go and see a counsellor, but you know, if you're earning fifty thousand pound a year and you've got a high status in society and you're off to see a counsellor, it's just a…
D It's just the same as us going to M….s.(a *local nightclub*)
… it's just a normal thing.
A Exactly, it's just like oh… It gives you something to talk about at the tennis club!
E "I've got too much money, what can I do? I think I'll see a counsellor!"
B… but not so normal, for want of a better word, for…
C I think it's hard…
B… people who have got less money.
C I think it is harder, for people who have got less money to access. I think it is.
B Even though it is more widely available you've still got, you've got waiting lists and it is harder to access.

KT7.1Costs can keep people away.
If they have to pay for it themselves and can't afford it then that would be… prevent them…

RWA20.25 I was, you know, I was sort of raised in the same way, you just get on with it really don't you? You know, I couldn't sort of, you know on a personal level, couldn't you know, couldn't go to my mam, you know and sit down and have, you know have…… chats that you see on the movies, you know…… "mum I've got a problem" and blah-de-blah. "Oh yes, darling, yes" (*said with upper class accent*). And whatever. You know, she had four kids, she was always on the go, she had to keep a job and you just get on with it, you suffer you hurt you get on with it. … You know, everyone around you

hurts and, and that's it… you know, you've gotta be a very strong person to keep it so much under control and not let it affect you

RWE23.16 Money would I think money is quite a big…… factor.(*in preventing access to counselling*)
B Yeah, it has to be doesn't it?

RWB32.24…not somebody who's like stuck up, you want somebody in between who's gonna just sit there and listen and not be over the top.

RWA37.26 Yeah, I was about to say the glasses like that. (*Moves glasses to end of nose and peers over the top)*
E And the clipboards.
A Because then they're like looking down their nose at you.
C And the tapping, sit there (drums fingers) and you just think…

RWA38.7 They need to be on the same level. More or less.
It's like you don't have to relate to me, you don't have to, to have lived the same things as I have lived or, you know suffer what I have suffered…But just don't think you're better than us.…
D But you're not better than us?
B… judge me, yeah, in your, you know…
A Look down your nose while you're in your…
B Seventy thousand pound…
A…fifty quid shoes or whatever.
C Seventy thousand pound a year job
D Yeah, thinking "oh look at her she's wearing fake…"
A Kind of normal… person
E Yeah like on your level, just somebody you're going to get on with.
B Normal person.
C Someone normal.
A You don't want anybody up...
B Not too clinical or uptight…

RWC39.29 Yeah, same sort of thing they need to be on the same sort of level, they need…… to know where you're coming from.
A Well, you get somebody that's sort of you know, middle class, that's doing the job because they're paid well and you know, they don't actually need to be there but they feel they probably should work to give something back to the community when they've earnt so much money they can't think of anything else to do and then they just sit there with a really bored look on their face like "oh for goodness sake, thank God that money's going in the bank, wonder what time the golf course opens later" and you can just see it.
C But if you've got somebody just, you know, on a normal…
A … Is doing it because they're there because they want to be there.
C Working class, really.
A Yeah, working class, yeah you know, somebody that's worked themselves up to where they…and that's where they ultimately, that's where they want to be, then you know…it's gives off a whole different perspective.

RWB40.15… obviously to them it's a job and they're working to pay their bills and stuff so therefore they're in that job because they want to be in that job and not because you know it's just something…
A The love of the profession, really, isn't it?
B… it's just like an afterthought.  Yeah they've got to really like…
A …Not just because it looks good on their social CV if they're a counsellor.
E Yeah, they've got to really care about their job, so.

DH1A4.3 Yeah, the way they talk you will see if they are professional or not. Some people they just don't know how to talk.

LEA4.30 My partner went to college to a course in bricklaying and my father was a brick layer and he went to everything and by twelve he was caked in cement and lime. And it's not kind of how you go into the job but it's the same with counselling
LEA5 I know this sounds really, really strange, this is personally speaking, but I find posh people a put-off because as much as I know there's people around there are some people that you walk into an interview and they talk the way they do, but then there's people like Joe Bloggs walking down the street who's from working class who's actually been there who's actually had the family
Where although posh people exist - they're lovely but there are some people that let the money go to their head and that's all that comes across. That's not what most people want. What  most people want is somebody who's had a bit of life experience,  who they can turn to and feel comfortable with, not somebody who's coming to them with the posh voice and them kind of going to them "well how the hell would you know?"  It's not what most working people want most people that come to counselling, I presume, are working class unless they're very, very highly paid and they can afford the best.  And then obviously they get the best and that's in a different class but most people I've met around here are either very, very, very rich or they're working class. And most people round here I presume want the same as everybody else.

LEA5.26 We all go through different experiences and we are all different people and I'm not saying that the person you meet in counselling is going to have gone through the same kind of thing, but if the counsellor is the same type of class or has worked say from school or college and everything else and got to where they want I think class does have something to do with it because I think if you put someone who's working class in the same league as with someone who's say an MP who is on a ridiculous amount of money a year as someone who's working 24/7 for their family just to put food in their mouths and rent on the table or housing money and stuff, or whatever I think a lot of people, I think,  the classes, I think if you mix the classes you can kind of get a gist of it.  I don't know if that makes any sense?
If you put a counsellor who has an awful lot of money, a serious amount of money …They can't understand what it's like for somebody from a working class.

Unless they've been there themselves. That might be biased I don't know and there's a lot of people out there who are working class who have gone from nothing all the way up but there's some people who've been given it by silver spoons in their mouths but don't appreciate what we've got.

LEA7.3 I would rather see someone in jeans and a T shirt, a bit casual you know, nobody in a suit, you know. Somebody who is down class, you know, not somebody dressed in a suit or serious, you know.

KTC14.46 Well, yeah, I mean you could walk into a room and take one look at the counsellor and go "I don't like you."
KTB15.14 The way they talk as well.

**Authority:**

**Social authority:**

RBB2.1 I had it in school and when I left school and it was the same lady both times and we just didn't get on and she just didn't do nothing really. I just didn't get on with her.  When I was at school she just seemed a bit stuck up and a bit funny and she said why do you need counselling and what do you need counselling for? And when I was at the school and the teachers used to go oh well As got problems here and As got problems there and she used to say, oh well that's not counselling problems.  Then when I left school and I saw her again I just thought of the way she treated me before and we just didn't get on.
RBA3.2 Really like strict. Like meeting the headmaster when you've done something naughty.  Real tension like.
A I said look I just don't want to do it anymore and she was like why, why, why,
And I said it's not helping and I think I'm ok now.   I just didn't want to see her no more, it was like really intense and I just felt awkward….
RBB3.12 She had power over me like I was a little kid….
RBC9.3The way they speak to you.  You don't need this, you don't do that…
RBA10.6 …its like maths teachers gave us a load of work but she knew we couldn't do it but she left us to deal with it on your own.  It's like the counsellor. But that's what I've come here for, I've come here for help not to deal with it on my own…

RBB5.11You wouldn't want them to be young would you, because you'd think they haven't got much experience? You wouldn't want and you wouldn't want them to be too old in case they had too many opinions.

RBA7.29 They don't know how you're feeling do they?
RBB7.30 You tell them and they say, yeah, yeah I understand but do they really?  If they could just take a step back and think if that was me how would I feel and how would I like my counsellor to speak to me, like.
RBA10.21 We know our depression. If they kept coming and listening to us then perhaps we would go back to them.  It's just getting to know who we are.

DH2A 8.6: But social services think I need counselling at the moment. Cos my little girl's in foster care at the moment, it's all going a bit… Well, it's going well now, she is coming home so that's a good thing, but I'm on the waiting list to see one now.
A: They just want me to sit and talk about my background, my life and stuff, but it's something I don't really like talking about.
A: But I would, just to like, you know, just deal with it really. You gotta deal with it though, ain't you?

DH1C 10.19 I think with, certainly with close bereavements I just, just feel that you should just be given a session, even if it's just one session, if you're not happy to do it to stay on a long term counselling session, I do think one session, you know…I really think my sister should be pushed into a little bit of counselling, you know, just to assess her, and I mean in that assessment they may well have picked up the whole bipolar thing then… you know and it could've been assessed sooner and stuff.
C: Um, but I, I do think with certain ones it should be… [Sighs] like I say, not, not, you don't know what to say, I don't want to put it as compulsory, you don't want to back people into a corner…
B: No.
C: … but I think for certain things you should have an appointment just to check that you are dealing, cos it's very easy to walk, to turn your back and just go into your hole, your cave, and say no, no, I'm fine, I'm fine and actually you're not…
B: You're not…
C: … dealing with anything.

KTB 2.1…somebody to say "Oh well, you know, you need to do this, or reassurance or, or, try something like this,"
KTA2.5 If somebody says "Oh, you *need* counselling" then how do you determine which sort of counselling you send that person to?
E With all the different types of counsellors.
A And you have to be referred don't you?

KTF10.10 No when I was… we was told to go and see Relate and it was in R – well it's no good if you haven't got a car and live here…
B… and you have to go to R.
F And it was probably like about eight o'clock at night. But I wouldn't go, no.

KTB12.20 People go to counsellors looking for answers don't they really? I know if I did, I'd probably be looking for answers.
C What do you mean by answers? Do you mean like an answer to the problem: do this, do that and the other. Or…
A Kind of…
B Just try this, try that…
F Advice…
C I've tried this, tried that…
B Or how to… building up better coping strategies…

B Not what to do.
C Suggest.
A Give us advice…
B You know alternatives.
D Different ideas.
E Different routes.
B Different to what you have been doing or how you have been coping or…
Not you know, oh do this – cos you don't want anybody you know ruling your
life but just to suggest… ooh maybe try something slightly different.


LEA6.1 I appreciate everything that's been given to us, all the help that's
been given, because without it we wouldn't be here. I certainly wouldn't be
here
LEA6.7 My Mum kicked me out when I was sixteen so without the help of
counsellors I wouldn't be here. I appreciate what I have but it's helped me
get stronger as a person, I've had to because I've had to learn how to deal
with not having any family at all apart from my other half now.

LEA2.1… But, they're sending it, me to it again, same person, and I did ask
is there anybody else because I don't feel like, you've got to feel connected
with them, even though they're a stranger, you've got to feel…

LEB4.43, I wouldn't have liked to say oh, no, because it's their job at the end
of the day, you know, I'm no expert but like this was sort of digging
back…years ago, over thirty years ago and I thought well if it's took me like
thirty years to just suddenly be like this and be told it's because of that…

LEA1.18 Yes I know, because I've been advised to have counselling
anyhow


KTE19.33 If you've been bullied into it by your Doctor.

KTA I had a similar experience with, um, negative counselling as well, I had,
um, a problem with one of the doctors that was treating me years ago when
I was a teenager and the way he handled me was, he probably should've
been struck off, but the counselling that I received afterwards was a case of
oh well, never mind, you chose to go to the doctor in the first place and
tough luck basically, if what happened happened you should've just done as
you were told and the counselling, the counsellor probably should've been
struck off as well but I didn't go for years and years and years and years
afterwards and the counselling and the doctor probably scarred me more for
life than what I went for originally.
But then again it's, it's like you say, it's it's your own experience that sort of
puts you off as it was in your two situations but it could be word of mouth as
well can't it really?

KTC You know, if she'd come to me and confided in me and said look I've
been to counselling and they've said this to me, and they've done that to me

and they've been horrible .  I wouldn't go, why would I go into a room with someone that's gonna, you know, crack the whip on me and telling me nyeh, nyeh, nyeh.  I don't need that, I've got that in real life, that's why I come to the counsellor, thank you.


**Age and familial authority:**

KTA16.18 It's not an issue for me but I think as well, a lot of people in the older generation…
C Got their own views…
A …would have, you know, I know some of them are like oh a little whippersnapper telling me or advising me sort of thing, it's like like I'm gonna to listen to them.
C Age is definitely…
A I don't think a lot of the older generation would go. It's not me, don't get me wrong but I know that that's an issue. For a lot of people.  It's like well, what does he know…
D Yeah, you feel they're younger…
… what does she know?  That, you know, being younger that they could possibly A Cos a lot of the older generation *do* think like that.  .
F Yeah, yeah, our parents…
C My Dad's like that – thinks he knows best.  My Dad is like, he'll tell me what do like even now with my kids and I'm thinking mmmmm.
E Oh yeah, my mum's like that.
C "Shut up!"  I have to bite my tongue half the time!
D Yeah
F I think age is a…


**Authority and Lack of Choice:**

RBA4.15 I was sent there by Connections because I was quite young at the time and they thought it would help with the depression but it didn't help and I've spoken to the doctors since and they keep trying to get me to go back but I don't want to because I think it took me 100 steps back to what I am now.

DH1A2.17: Cos I'm on the waiting list to see one of them.
DH2A19: Yeah.  Because I've been on the waiting list with my doctor for over a year.  But nothing.

KTC3.10 Doctor, not doing what he should be doing, but perhaps palming you off…Delegating.
C Yes, and palming you off.

KTE3.17 But you have to wait months to get to see one (*a counsellor*).

KTA4.1 I think also with a doctor there, like the person I was on about before being sent to the wrong type of counsellor, as well.  Which I find quite

worrying – I think it's quite a good thing, that people can get their problems solved, but only if they're going to see the right people in the first place.
B If they're being sent to the wrong section
E… different sorts of counselling
A Or the wrong type of counsellor
B Then you could have, end up with people coming back and saying well that was rubbish – what did I waste my time doing that for?
A Or you could go in with the attitude, well I already knew that anyway so what a waste of time…… on both parts.

KTF5.40 My daughter was waiting for counselling and she never heard anything.  …when one of her friends committed suicide she needed some… somebody to talk to.  She was referred, but we never heard.  And, I mean, she's past it now, like it's, something that was done and dusted so.

KTA7.7 If somebody's on a waiting list and they don't hear back that can be even more damaging for that person because they feel rejected then.  They've asked for the help, they've plucked up the courage and then they've been left hanging high and dry really.  And that's not gonna help them if they…… can't, haven't got the support around them to get them through it.

KT E7.26 I've seen a shrink does that count?

KTF10.10 No when I was… we was told to go and see Relate and it was in R… – well it's no good if you haven't got a car and live here…and you have to go to R. And it was probably like about eight o'clock at night.  But I wouldn't go, no.

KTE19.33 If you've been bullied into it by your Doctor.

RWC12.11 One thing I was thinking about though, was that there doesn't seem, because my sister lost her boyfriend last year, when we tried to find her a bereavement counsellor, they were all like, there doesn't seem to be many sort of like NHS counsellors, …we found that to get her on to see the one in the doctor there was like a six-month waiting list or something ridiculous like that. They said you'll be better off going and paying private, but then people can't always afford to go private like, I couldn't afford to go and be privately counselled, you know counselled and stuff.  I mean it's good that there are counsellors in children's centres now so that's really good, but as for more specialised counsellors, like bereavement counsellors or something like that, then you do kind of have to look further afield and be prepared to kind of pay for it.
B It just makes it more of a, more of a rich person's therapy really doesn't it?
A Yeah, status thing isn't it?

LEA2.1… But, they're sending it, me to it again, same person, and I did ask is there anybody else because I don't feel like, you've got to feel connected with them, even though they're a stranger, you've got to feel…

LEA2.29 And like with them sending me for it again, I'm like…But they want me to go again, but I'm not feeling as if, you know, as if that's going to be any better because of the way, you know I just, I didn't click, like with him. LEA6.18 I am (*going to go*), because I've asked if there's anybody else and they said no because I think well what else do I do if I don't go there?

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