Psychology's Feminist Voices Oral History Project

Interview with Karen Wyche

Interviewed By Tera Beaulieu San Francisco, CA August 18, 2007

When citing this interview, please use the following citation:

Wyche, K. (2007, August 18). Interview by T. Beaulieu [Video Recording]. Psychology's

Feminist Voices Oral History and Online Archive Project. San Francisco, CA.

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## Psychology's Feminist Voices Oral History Project Interview with Karen Wyche Interviewed by Tera Beaulieu San Francisco, CA August 18th, 2007

TB: Tera Beaulieu, Interviewer KW: Karen Wyche, Interview Participant

TB – So I'm going to start by asking you to tell me about the development and emergence of your feminist identity.

KW – It was early in my career, when, I think – it wasn't during graduate school because in graduate school there were no feminist psychologists. And it was after I had graduated and gotten my, actually my second academic job, and Bernice Lott was the president of Division 35. And I don't know if you've interviewed Bernice.

TB – We have.

KW – And I had joined before and had gone to, I think, maybe one or two meetings, but when she became the president - I was at Brown University at the time - and she recruited women to work in different task forces and committees, because in those days the president's mid-winter meeting was always at the place where the president lived.

TB – Okay.

KW – We went to a retreat in Rhode Island. So she asked me to do something which I cannot remember, and if you know Bernice, if she asks you to do it, you do it! And that's when I started to get active, and that's when I started to, I think, forge what it was, in terms of a feminist identity; label it as an integrated part of who I am.

TB – Right. So while you were in graduate school it wasn't so much using that word until you were introduced to Bernice?

{1:40}

KW – Well it was until I was introduced to going to – I joined Division 35, which was not called the Society for the Psychology of Women then as you well know, but I wasn't active, and it wasn't until Bernice became president that I became active. But I think that the word feminist, what it means in terms of your goals and objective and values, I always had, I just didn't have the label.

TB – Right. And so during graduate school were you involved, or at any point, involved with the feminist movement or any sorts of feminist activities?

KW – Well I was a returning student. I had had a career as you can see from my vita as a social worker, and I also had three children. And I came from a family of women who always worked and who had equal partnerships, so I had models for what a feminist identity was, but as a African American woman you didn't label it that at those times.

TB – Right.

KW – So no, I mean there were seven in my program and two of us were women and one was much younger than I, and single, so I wouldn't say that there was any movement that I joined in graduate school. But I just knew that the women who were my friends who were going on to school or professional training shared these kinds of values.

TB – Right. Can you talk about your experiences going through your social work program and working with the other seven that you were in your program with? Joices

KW – In the clinical program?

TB – Yeah.

KW – Well when you come into a clinical psychology doctoral program and you have a degree in something else, it's devalued, so you need to know that. And I had done many different types of jobs, so it was a readjustment in terms of being a student again because I had been a professional. {3:43} But there were seven in my doctoral program and one was a woman, and we all got along. I mean that was not a problem. What was harder was that I had had a lived experience and they were all right out of college.

TB – Yeah, wow.

KW – And the faculty also, many of them were not with children, were single.

TB - And so how did you get into psychology? From social work and then going back to school?

KW – My husband is also an academic and he is a molecular biologist, and so early on in our marriage I made the decision actively that he would be the one that we would follow in the career, because he has a lab and  $\{4:35\}$  so he is a very expensive move. So when we moved to Columbia, we had been in California actually, he had been a post-doc at UC Berkeley and I had worked as a social worker in San Leandro, which is down the peninsula, you wouldn't know, it's down the peninsula there. I worked in a locked facility for juveniles. And then we moved to San Diego and I was the administrator in a social service agency and ran a program there. And when we moved to Columbia, Missouri, which is a small college town halfway between St. Louis and Kansas city, a hundred and twenty five miles on each side, the job that I had there was a OBGYN social worker in neonatology and it was similar to the first job I had had out of graduate school, in my masters in social worker program.

TB – Okay.

KW – So I should have been the director of the department, but he was not going to retire, so one is faced with, "What do you do?"

TB – Yeah.

KW – And I already had three children so I didn't want to reproduce anymore, and I wasn't good in chemistry or biology, so I didn't want to go to medical school. I didn't want to be a lawyer, I already had a degree in a professional school right, so I thought, let me see if I can get into the clinical psychology program, because I wanted to learn research skills.

{5:58}

TB – Right.

KW – And so it was a choice that probably I would not have made if I hadn't been stuck in this little college town and been bored.

TB – Wow. That's so interesting.

KW – So that's how I got in.

TB – Very neat. And so how have you fused, so you've spoken about your upbringing and how you had models for feminism and strength, so how have you fused your feminist beliefs and feminist values with the work that you've done, like your academic work or your research. How do those two come together?

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KW – First of all I think it's a value set that you have. So I believe in participatory action research and I believe in the fact that whoever your research participant is, that they can inform your thinking as much you can. So it's a two way street. I do mixed method designs, I do qualitative and quantitative work, my work has been primarily with women, and that women tell their stories and that we listen to their stories, and that's how we inform who we are and what we can learn. I also come at it, which is really the social work training, from a strengths perspective. So I'm much more interested in coping, in resilience, and the strengths that people bring to whatever situation they're in, rather than their deficits.

TB – Right.

KW – So I don't like the deficit model. But as you know, psychology is a deficit model of practice, and I've tried to reframe that. So I think that that's kind of the way in which I try to do responsible feminist research.

TB – Right. And I'm going to go back a little bit because I don't know this, but why did you choose social work? How did you get involved in that?

KW – Well it was another one of those – there's a Robert Frost poem that's called "The Path." Walking through the woods on a snowy evening and there's a path, do you know that poem?

{8:05}

TB – I think I do.

KW – And there's the path taken and it makes all the difference. Well it was one of those paths. So again it's a story about, I was living in Baltimore and my husband was a graduate student at Johns Hopkins, and I was working for a medical psychologist – which is interesting that I became a psychologist – at Phipps Psychiatric Clinic, which is a very old famous psychiatric clinic at Hopkins. And the psychologist that I was working for, his grant ran out and I was on the grant money, on soft money, and I had to find another job because I had a child and my husband was a full time doctoral student. And so one day, this is the truth, I was walking by – Baltimore has Johns Hopkins and then it also has the University of Maryland Medical School and related professional schools – and after I left the job at Hopkins, I got a job at the University of Maryland Medical School writing a newsletter for a cardiology study.

### TB – Okay.

KW – And one day I was walking by the school of social work, this is true, and they had a sign that said "Graduate stipends available." And I thought, maybe I'll see, maybe I can qualify for one of those. I had wanted to go back because my first job out of college had been at the YWCA in New York city, and I had done groups for little girls after school, and I had some young girls who had real emotional problems and I really did not know – I had been a political science major, that was my undergraduate degree – and I didn't know how to help them. So how does that segue into seeing the sign. I thought, you know, it would be nice to find out what skills I could bring to working with people, rather than writing a newsletter. And so I went in and I applied and they accepted me and I got a free ride, and that's how I became a social worker.

TB – Wow, that's neat.

KW - I was just very lucky. So I think the thing for women is that many times there's a path and you make the decision if that's the path you're going to take. It would have been safer to keep writing the newsletter.

TB – Yeah, but now look! And you've spoken about how you've gone through this, how you'd gone through graduate training and school, having children. So I'm curious about this, as you were going through this process and even now, how do you balance these demands, these professional demands, these career demands, and your family demands.

### {11:03}

KW – Not well. They're adults now. It was very, very hard and I think you have to find the right partner. I think you have to have a shared vision and I think that you have to negotiate how one parents one's family. And that is not to say that this is a heterosexual thing; this is if you're in a

gay and lesbian relationship, whoever your partner is, you negotiate that. I'm pretty clear that if I had not been married to another academic, I probably wouldn't still be married.

TB – Wow.

KW – Because there was no negotiation that: 'I have to write this paper, I have to write this grant, I need to stay in the library, I need to...' That was understood.

TB – Right.

KW – And so that was how we did it, but it was very hard and I won't say that it wasn't. I showed up at school sometimes with peanut butter on me.

TB – Peanut butter all over the place.

KW – Yeah.

TB – And so have you experienced, or what kinds of barriers or obstacles have you experienced, or discrimination, being a woman, being a feminist, or being a woman of colour, in psychology?

KW – Well I think you, it's sort of a Gestalt thing; it's figure-ground. So sometimes being African American is the barrier, and other times being a woman is the barrier, and so I think it's situationally specific as to what it is and what time. I think that, as you can see, I've had many different kinds of jobs.

TB – Right.

KW – And so I think when you're a woman of colour in academia, you wonder if they have chosen you because you fill two slots in their affirmative action plan; so you're the gender slot and the race/ethnicity slot. Or have they chosen you because you are competent. And I think that I have been in situations where I fulfilled their affirmative action slot, and the barrier you then face is that you have to prove yourself.

TB – Right.  $\{13:30\}$ 

KW – And it's a subtle kind of racism and what you get – there's a very nice article in the *American Psychologist* that Stanley Sue wrote about micro-aggressions, I think it's in the most recent one, where people do these micro-aggressions; like 'Oh you are different than other', whatever, people. And so you hear those things and you're always surprised when it happens even after long periods of time. So that's what happens, and it's subtle, it's not as overt, but it still exists.

TB – Okay. Can you tell me about your involvement with Division 35? So you spoke a little about it at the beginning, or specifically your involvement with the task force on socioeconomic status. So what was the mandate of the task force, what was your role in it?

KW – Well those are two things.

TB – Yes, so both.

KW – Because the taskforce on socioeconomic status was a Board of Directors task force from APA, and it wasn't a 35 task force.

TB – Okay.

KW – So let me talk about Division 35. My first involvement was - I became a secretarytreasurer for the Section on Black Women. And I didn't know who put my name forward at all. I just got elected and someone said oh you've been elected.

TB – Yeah.

KW – So I went to my first meeting and I remember Lenore Walker, I don't know if you know Lenore Walker.

TB – I don't know her, but I know of her.

KW – Right, and she was the president at that time. And I showed up at this meeting and I didn't even know how my name was on the ballot. So that was my first time, being involved with the section. And then as I said I became more involved when Bernice became president.

TB – Right.

KW – So I've held many positions, been on many task forces within the Division. And as I've said to other women psychologists who aren't active in it, it's a wonderful home, it's a nurturing home, and I think it has to do, and I'm giving you now what's the benefit of it, it has to do with – because it's cross-disciplinary, you can learn a lot from people in many different areas {15:48} and it's always a support. So I'm happy to do whatever I'm asked to do for the Division basically.

TB – Yeah, that's wonderful. And so can you speak then a little bit about the task force?

KW – Sure. The task force was, and there is a report now that you can pick up.

TB – Okay.

KW – The task force on socioeconomic status [SES] came together because there was – on council they passed a resolution to develop a task force to look at SES and social class within psychology. Psychologists have not been good at looking at how this is a variable that

influences human behaviour. Sociologists have looked at it, but in a different way, the way they study it. So I was very fortunate to be appointed to that task force with some really stellar, actually I felt quite humbled because the other people, like Nancy Adler, were very stellar in that task force. And we came together and we produced this report on SES within psychology. My colleague, William Liu, at the University of Iowa, and I, wrote the section on social class in applied psychology. And the other sections dealt with SES in health and experimental psychology, and the other one was in social policy. I am no longer [*on the task force*], it's now a committee, and so there's only one person from the task force who is on the committee, who is Heather Bullock, but that was a wonderful opportunity to kind of talk about social class and SES because it has influenced my work. People perceive of themselves as having a social class; they don't have an SES.

TB – Yeah.

KW – And so if you think of yourself as middle class, working class, or whatever it is, that's how you interact with the world. And so it's always influenced my work. I mean for example, I am very much aware that I look like a very upper middle class lady, but that's not my background. So what one perceives of oneself, and how one is perceived, is an interaction. And our hope is that the APA uses this material to go forward and for example, gets journals to require that they put in how they measured social class in their articles.

TB – And you've just spoken about how many psychologists don't pay attention to these factors and they don't pay attention to these roles. So how do we start to get psychologists to pay attention, or pay more attention, and include these various variables in all of their research? How do we move towards that?

{18:52}

KW – Well that's the question. I don't know. One of our recommendations was to get the council of editors to require that in the APA journals. A lot of people will not want to do that because they think it's a messy variable, why would you measure that.

### TB – Right.

KW – It messes up their design. I think it's going to take a long time. It took a long time for journals, and I'm now speaking about publications, because in psychology the publications are sort of the public knowledge of what we have to show to the world, as opposed to clinical practice where it's a confidential situation. So I think it's going to take a long time, just as it took a long time to say how many men and women you had in a study. I mean if you go back twenty years, journal articles won't even tell you. You had 60 participants, no, they were called subjects then. You had 60 subjects.

TB – Yes, okay. And can you speak about, you're a member of the Committee on Women in Psychology, so what has that work been like, or being a part of that committee, and basically what is the committee all about?

KW – The committee is again a standing committee within the APA structure and it has an advocacy and a monitoring focus. It's part of the Public Interest Directorate, and for that reason the advocacy piece is large. So we monitor how psychology is dealing with issues of equity for women in psychology. And so the current task force on the sexualization and victimization of girls was out of the committee. Again people are appointed to those task forces that have the expertise in that area.

TB – Right.

KW – And yesterday I heard that they said they had more hits on the website for that report more than any other report they've ever published.

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TB – I think it was something like 350,000 hits.

KW – Yeah, absolutely amazing.

TB – Yeah, it's wonderful.

{21:16}

KW – And now it will be the task force on reproductive rights and abortion, which they had before and they've come up *[with]* again because of the controversy as to whether a woman should have the right to abortion, what will happen in the Supreme Court cases in the fall, etcetera.

TB – Right.

KW – So that's the advocacy role of that committee. The committee also monitors how women are, for example, what happens to women in APA. And one way to look at that is from the structure of the Divisions versus membership. So one of the concerns that we have is that women will join APA, but not join Divisions. And I don't know if that's related to no one having said joining divisions is a good thing for your career, or if it's a money issue, and how the mentoring can be a part of that. We're interested in supporting mentoring initiatives. So today we were at a symposium on negotiation of skills and how do you negotiate a job, and how do you negotiate different things. So it's a broad sweep in terms of women-focused issues. From graduate school, you know, psychology is becoming more female in terms of numbers, so how does that relate to, for example, internships; women who can't move, or women who need halftime because of child care needs.

TB – Right.

KW – So that is our charge.

TB – Okay. So you've just spoken a little bit about mentoring, so have you had any mentors and who have they been, and what has the role of mentoring been, or how do you mentor your students?

KW – Well I don't think I had mentors when I was in graduate school. I think I've had friends who have become mentors for me. So I think we need to think of mentoring - there's the mentoring where there's a senior person and a junior person, and then there's the mentoring that is peer-related, and I think that that's actually what I got out of Division 35.

TB – Right.

KW – I think that I have tried to be a mentor to people. I think I'm pushy. I just told someone that they had their name badge down too low, and I didn't know her very well. I don't know how she felt about that, I was worried after (I'm pushy; you have to do this, you have to do that...)

So I have tried to help people not make the mistakes that I made or move forward in things that maybe I didn't move forward to when I was a junior psychologist, when I was a newly graduated psychologist. I've had lots of young – I've been involved with formal mentoring programs. 101085

{24:26}

TB – Right, the early career mentoring.

KW – Right, the early career mentoring, yes. And mentoring is what it's all about. And I think that as women we have not done that as successfully. And it doesn't mean that you don't have male mentors. So after we have our conversation today, my doctoral advisor is going to meet and take me to lunch, and I haven't seen him in many years.

TB – Oh wow.

KW – And I was older than he, so I didn't think of him as a mentor. He was very helpful in helping me through the program, but he functions much more like a peer because I think it was the age there; he didn't treat me like I was just a student.

TB – Right. So I'm going to move into more of the specific career questions. So as you look back on your program of research, what have been some of the major themes?

KW – Well as you can see from my vita, I've moved many different places. And so one has to keep in mind what are the organizing themes that you move with you, because the opportunities for research have been different as I've moved along. And the organizing themes have always been looking at women and their families who are in chronic life situations, that basically are unchangeable in many ways, and looking at that in terms of what I said before, the strengths perspective, that is, how is it that they do so well? So it has been HIV, it could be disasters. I'm hoping to do things with my colleague, Dr. Johnson, on gynaecology; women who have chronic illness or are in recovery, but who have had a trauma, in terms of a health related trauma. So I think one of the things that I learned is that your skill set and the lens in which you look at your work continues and hopefully gets better. The populations can differ, but it's the sort of organizing way in which you think about your work that keeps going.

TB – Great. Which of your accomplishments, so that could be anything, publications or research projects or something personal, are you most proud of and why?

 $\{27:00\}$ 

KW – You know I've never thought of that. Well I don't think I've had one yet that I could say that about.

TB – Really?!

KW – Yeah, I don't.

TB – I was blown away by your work. I was reading and thinking, this stuff is amazing.

KW - Well I feel like – thank you! Thank you very much. I don't think I've had one. I think I can say that I have survived, I mean that's how I view it. I think I've just been able to just keep going along, and that's how I view it, because I haven't stayed in one space.

TB – Yeah.

KW – I think recently I had – I think I've been able to give back to younger people and I will just give you an example. I gave a, and maybe this is an accomplishment because it was very flattering. I gave a talk at the Women of Color Institute, I was the speaker at the Women of Color Institute for the Association of Women in Psychology, and in the audience was a young woman who came up to me and said, 'You don't remember me but you were my TA when I was an undergraduate.'

TB – Oh wow.

KW – And I went [makes face of surprise]. And she's now an assistant professor. And she said, 'I looked at you' – and she's African American – and she said, 'If she can do it I guess I can.' So that was really so wonderful to think that you could touch somebody's life, and you didn't even know. And I said to her, I just felt, like I was a graduate [*student*], I was hanging on by my nails, you know, I had these kids, I was a TA, I had another job on the side, I didn't know what I was doing.

TB – Yeah.

KW – So maybe I could say that if I could touch somebody's life and be a model, that's really, I'm blessed.

TB – Yeah, that's wonderful. This is something that's very interesting to me, and I don't know if you'd be able to answer it or not, as I was reading your work I was very struck, like some of your pieces just hit a chord with me and really impacted and sat with me. And I'm wondering if any of your research projects or interviews with your participants have really stuck with you and have had a very long lasting impact?

{29:30}

KW – Oh absolutely.

TB – And if you could just share...

KW – Yeah, absolutely. Well I think when I interviewed HIV positive women and I had this study of women who actually had gone into AIDS. They were in an intervention that was with their teenagers; it was a twelve week cognitive behavioural intervention for the teens and for the women, and teaching about how to disclose to your kids, how to stay healthy, how to talk, how to have safe sex. But they had all had opportunistic infections, and they had been diagnosed later on.

TB – Right.

KW – And I had a subsample of women that I did these long qualitative interviews on stress and coping and how do you deal with chronic illness. And there's one woman that I'll always remember. There's a chapter, maybe you saw it, that says "Let me suffer so my kids won't"...

TB – Yeah. [audiotape ends and is turned over]

KW –...and it was the women's stories. So I remember her story and it was never prayers for her healing, but it was prayers for her children and grandchildren. And then there was another woman that I write about in that chapter who really had gotten, was into dementia, and she kept forgetting when the appointment was. And we would meet on Saturdays, this was in New York city, and she came in one Saturday, finally she got there, her older daughter brought her in, and it had been raining and she was soaked, and I remember we got her dry clothes and gave her tea, and she was totally demented by that time. And we just let her talk. And I remember that I had watched, because I also supervised the interventionists in this group, so I had seen her over a year on film, and I remember just wanting to cry at how she had deteriorated.

TB – Yeah.

KW – So yeah, you remember those things. So you're touched by that. And I think recently I was very touched by, I had done some focus groups with the Katrina survivors who went to Denton, Texas. You don't know Texas because you're from Canada.

TB – Yeah.

{32:35}

KW - So Denton, Texas is north of Dallas. And to hear the stories.

TB –I was going to ask you about the work that you're doing.

KW – And to hear the stories that they were so grateful to get great medical care in Texas, which is not the bastion of, you know it's not the Mayo Clinic in Denton, Texas. People who were thankful for the little things in life, those are the stories that I remember. So I think again, as a researcher and a clinician, you listen to people's stories, and stories are transformative.

TB – Can you talk about some of the work that you're doing at the University of Oklahoma, the Terrorism and Disaster Center.

KW – Well we've been looking at, part of the work that I do there is to look at two things: One is that I've done a study with first responders who responded to the Katrina survivors who came on buses and what happened was that many survivors, once they were picked up, went to National Guard Facilities. And in the United States, and I'm saying in the United States because there are people in other countries who will see this, National Guard facilities are not active bases; they're used for training at different times of the year. In Oklahoma there's one called Camp Gruber, which was at one time a prisoner of war camp after WWII, in a town of five hundred people, called Braggs, Oklahoma. So I was interested in how the first responders, health department workers, mental health workers, EMS workers, faith-based communities, the schools teachers, how people came together to provide a community for five weeks for people who were not members of their community and who were displaced to this camp.

So the area of work is called Community Resilience now, it's how communities can respond in face of disasters. And again, the story there is that the first responders had really not been asked about how it was, how were they helpful, how did they do this. And these were people who didn't come in for four weeks, for four days, and then leave, as the Red Cross sends people back and forth. These were people from the adjacent community who came and stayed for the entire five weeks. So if you were a health department employee, your team stayed for the entire five weeks and you did continuity of care. And my experience was that people would start to cry when they would talk about the people that they worked with, and how it was when they came off the bus. They had been on the bus for over twenty hours and not allowed to get off.

TB – Wow.

{36:10}

KW – So when they got off the bus they were soiled, they had open gashes, they had puss coming out of their legs, they had children who were on the buses without any adults because people were herded onto buses like cattle. And so you might think your child is behind you and they close the door, and they say oh no he'll be on the next bus, and he goes to Colorado.

TB – Yeah, wow.

KW - And it was quite touching.

TB – Yeah, I have shivers. You talked about in one of your articles, "Interpreting the Life Narrative" about the intricacies and complexities of conducting qualitative research, and particularly when you're interpreting and trying to communicate participant narratives. So I'm

wondering how you, as a researcher who participates in participatory and qualitative frameworks, how you work with your interviewees or participants through the research process to ensure that your methodology adheres to feminist values and principles, and also, how you negotiate any sort of tensions that develop as a result of (mis)interpretation between yourself and your participant?

KW – That's a good question. Did you read that article?

TB – I did. I experienced something very similar in my work when I was working on my undergraduate thesis.

KW – Okay, so I can assume that you read it.

TB – Oh yes, I did.

KW – Alright. That was very hard for me to write that.

TB – Yeah, I bet.

KW – It was very hard. So I guess I need to tell the context for the camera?

TB – Sure, that would be great because not everybody – everybody should read that article by the way!

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KW – Yes, it was very, I consulted with a lot of people on that. I was asked to write a commentary on an article that had been a qualitative interview that was done with an elderly African American lady from Washington D.C., who was born in, you probably remember the date better, in the 1900s?

{38:33}

TB – Yeah, very early.

KW – Yeah, very early on. And her mother had died and she was raised by her father, and her father was a professional man, he was a dentist, is that right?

TB – Yeah...

KW – And he kept the children after the mother died. And there was in the narrative of the author of the article who interviewed her for several qualitative sessions, was the narrative of trauma and despair, and that the father was not very – neglect. Her clothes weren't always clean and she went to school, and these different things, and she went on to get a degree from Smith College. It's been a long time, you have to help me if I've got the details right.

TB – Yes, okay.

KW – And he was a lawyer

TB – Yes, I was going to say that I didn't think he was a dentist.

KW – Yes, he was a lawyer, and then finally an aunt came from the South, and he would send the children to the South. The young woman, and I say young, because the woman who did the interview felt that, she was not African American but she was a woman of colour, and she resonated to the narrative of the lady who was talking about her early childhood.

TB – Right.

KW – And her resonance was we are the same, I grew up in a poor family; she was Latina. And when she gave the interview back to be read by her interviewee, there was a disagreement and a tension, and she didn't listen to the respondent's disagreement; she said, 'I don't see myself like this at all.'

TB – Right.

KW – So I felt very awkward being asked to write a commentary on this. And it was very, actually it was quite difficult. I don't think I would have had the problem today because I'm older, but in that time it was difficult. It was difficult on two levels. One was that she didn't understand the historical context of African American society in Washington D. C. at that time.

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TB – Right.

{40:56}

KW – So there was a generational problem. She just didn't get the social context. Secondly, she didn't listen to the participant's analysis of self, so she devalued the participant. I mean she kept on insisting they were similar. And then thirdly, I saw her as a young scholar trying to be sympathetic, but not quite understanding. It's sort of like she brought the wrong gift. And I didn't want to be seen as another woman of colour – you see, if she hadn't been a woman of colour it would have been much easier to do this, which is racist to say this, because I could have said, see, you're a white woman you don't get it. But the fact that she was another woman of colour, I wanted her to get it, but she didn't get it.

TB – Right.

KW – So it took me a very long time to write something that I felt could be helpful to her and not harmful, because I wouldn't have wanted to be harmed, I would have wanted to be helped. And I talked to many many people about how to do that. And the most interesting person I talked to, I haven't thought about this in a long time, is a wonderful scholar named Carolyn Heilbraun, and I don't know if you know who she is.

TB – I don't.

KW – She was the first woman to get tenure at the English department at Columbia, and when I was at NYU, she and I would have dinner once a month together because we had both been fellows at the Bunting Institute at Radcliffe. She in a generation where you could go for two years, and me in a generation where you could go for one year. And she was a very wise lady, she's deceased now, and she was out of my field right, so she could give me a different perspective. And she really helped me craft that, how I should approach it. So that was really one of the most difficult pieces that I've ever had to write.

TB – Wow.

KW – And you see how well I've repressed it. So when we say this for the tape, because this is very important, you need to understand the issues of race and class historically. And in segregated Washington D.C., and Jim Crow Laws during the time that this lady was growing up, the fact that her father kept the children and didn't give them away to the other women in the family was remarkable. Joices

TB – Right.

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KW – Absolutely remarkable. The fact that he was a physician meant that he had high social status. So within their social status group, he violated that norm. And she didn't understand that nuance at all. So the message to researchers is talk to someone who can help inform the cultural validity of the time period that you're looking at.

TB – Right. And can you also speak to how you yourself, I don't know how common it is, but if there are issues between yourself and your participant in terms of interpretation of what's happening, how do you negotiate those situations?

KW – I really haven't had that, and that sounds arrogant, but I haven't had that happen because I think I've worked very hard at the interview such that the self-disclosure is to elucidate those kinds of contextual factors. So people really talk about them and you probe for that understanding.

TB – Right.

KW – I have had a situation though, well first of all, the other group of women that I interviewed for HIV studies were in Harlem Hospital in New York City in Harlem. Harlem Hospital is a deteriorating part of the health and hospital system in New York City. It's the neighbourhood that I grew up in; so it's a low income, African American neighbourhood. It has working class people, it has the lower middle class folks, and it has very poor folks.

TB – Right.

KW – The hospital is a feeder system for that. New York City is, you're taken to hospitals based on where you fall down on the street.

TB – Okay.

KW – It's zoned, by that. Interviewing the women in that clinic was hard because I had relatives die at that hospital, I knew the hospital, and I knew where they lived. I mean they would say this is my address and I knew where that was. And I knew that I didn't look like I had come from that neighbourhood, because I had moved away. I was living in Rhode Island at the time and coming into New York to interview them. And when I walked into the clinic the staff thought I was a drug salesman, because I looked middle class right?

TB – Yeah, yeah.

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KW – So that was hard because it was like, how do you connect when you're both African American but you look real different. And I would say, "You know, I grew up around here." And they would say where, and I would say "137<sup>th</sup> Street, between Seventh and Eighth." And "Oh really? Okay." So most researchers wouldn't do that, but it was very important for me to let them know that hey, I might look this way, but I know. I know that story, I used to be there. I played hopscotch on that street, I know that stuff. So those have, and you always worry whether or not you're disclosing too much, is it in the best interest of the participant? If you're a clinician, you worry.

TB – Right.

KW – But those have been the challenges. It's much easier to go to a place where those variables are not part of the interaction.

TB – Right, right. I was going to ask you a question about how you've undertaken such a diverse number of projects and held such a diverse number of positions in social work, in clinical work, and how all these diverse interests culminate together, how they all merge together for you. I think you've spoken a little about that, about the organizing themes, but I don't know if you want to add anything else?

KW – It took a long time to realize it was an organizing theme. I felt that I was always reinventing myself each time. I have a joke with another colleague who has had a similar life. We've taught so many different classes, we can talk for ten minutes on any topic, and then don't ask for any more. You know, there's no depth after that. And it took awhile to understand that there was an organizing theme.

TB – Okay. And so the role of intersecting identities, and the importance of acknowledging the socio-cultural aspects of development and the historical context is obviously central to your research and writing. And so I'm just wondering if you can speak, and you have done this a little bit throughout the interview, but about the intersections of gender and ethnicity and social class or socioeconomic status in your own identity and life and career.

KW – Well it's clear; I'm an African American woman. I'm not a woman who is African American. Okay, so that's very clear.

TB – Yes.

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KW – And so I proceed on life in that. I'm always shocked when someone says to me what kind of name is Wyche? You know, so is that a micro-aggression, is that racist? And because to me, what difference does that make? I know who I am, are you trying to figure out who I am? And so I'll just tell you a funny thing; depending on whether or not I think I like you or not, I'll say it's a slave owner's name, and that shuts people up real fast. So being an African American woman, I mean I know who I am, that's clear. I was raised in a neighbourhood that was, everyone knew who you were. I think the class thing is fluid in African American families. There are people in my family who are poor, who are high school dropouts. My mother did not graduate from high school and insisted on writing notes, Dr. Karen Wyche, to me; "Well you have the...!" So she was more comfortable with this title thing than I was. And in terms of the way the race comes in is that the class is fluid, because in each job that you move to, you're recreating who you are. And you're identity stays the same but your class structure, often you're getting promotions as you go, so you're making more money and you're showing maybe more affluence in terms of where you live or whatever, but your identity of where you came from, I think, still stays core. So I think of myself as a middle class woman. The reality for African Americans in this country is – I have a PhD, my husband has a PhD, if you look at our salaries, if you look within the in-group in African Americans, we're upper class. Not if you compare us to whites.

TB – Right.

KW – But that's a very uncomfortable label because in our families, we have the most education. So you negotiate those boundaries, and a lot of women do. People have written about working class women going into academia, etcetera.

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TB – Right, okay. So we'll just start to wrap up here. So what inroads have feminists made in psychology, what roadblocks remain, and what do you think is the future of feminist psychology?

KW – Well I think feminists have made huge inroads into psychology. I think the fact that psychology is now becoming a mainly female field, which is also pro and con because the salaries go lower, right

TB – Right.

KW – Is that the women's movement, that feminist psychology, have really pushed the envelope, pushed the agenda. However if you still look within the professoriate, for example, which is what I understand, there are not that many full professor women in research intensive institutions. So there continues to be a hierarchy. But I think the change has been the push for gender equality, even though we still make less money. What was the second question, the challenges?

TB – The roadblocks, the challenges.

KW – Well the roadblocks still exist and one of the roadblocks I see is within the women that have entered college and graduate school now, who had a much easier time than the women in my generation, and so they hit the glass ceiling later; they see it later. And I have seen that some of them really don't believe you when you say you need to be aware of this, you need to be careful about this, because it has been a more open system for them. So I think that those are still the areas that still need to be attended to. And I don't know what the answer is for that.

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TB – And so the future of feminism, and I'm curious about this, and I know Dr. Rutherford is also curious about this, the feminization of psychology. What are your thoughts on?

KW – Well it doesn't bother me. I mean I'm happy to have it, you know, we're 50% of the population of the world. I think if you look at it from a labor analysis point of view, any field that becomes more dominantly female, the salaries go down, and actually then they become very good fields for men because then they are sure to get the top jobs, right. So if you look at nursing, if you look at social work, if you look at those kinds of more female

TB – Teaching

KW – Teaching. If you look at the superintendents of public school systems, who are more male. I think that the feminization of psychology is sort of like the soccer mom, I mean there are those kinds of code words and what does it really mean and how do people understand it. I think people use it as a deficit model and it's not. So what's the future for psychology? I think the future could be good if the women entering the field, in my book, want to give back and train other women. Many of the women entering the field go into clinical work, clinical practice, and so then I think we don't have the power base, because the power base is still who you train and how you train people.

# TB – Right.

KW – Which is one of the reasons why I wanted to become an academic. As a clinician, I can do great one on one work with people, but as a teacher, if I can get three other women who want to go on and get PhDs, and then they train three other people, it's faster. And especially for a woman of colour, if you can train ethnic minority women who feel that this could be a vision for them.

TB – Yeah, okay. And so what advice would you give to young feminist women working in psychology?

KW – Working meaning student, or working in what area?

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TB – In any area. Entering graduate school, already in graduate school, working towards tenure. Just young psychologists or young women entering the field of psychology.

KW – Well I think it depends on what entry level you're talking about. So if you're talking about undergraduate students, of which I've had many, if you want to go into psychology, then try and do research and work with a faculty member who is nurturing. And it doesn't have to be a woman, it can be a feminist man. If you're talking about going into graduate school, many women don't have choices for where they want to go to graduate school if they're partnered or if they have families.

TB – Right.

KW – For those women who have choices, check out where you would like to go and make sure that you go to a department that nurtures students rather than treats them like slaves, because I've been in some of those departments as well; you know, the students are the worker bees. I think as professional women looking for their jobs, and there are many talks in the conference about how to get a job, your first job doesn't need to be your last job, but you want to go to a job, be it a clinical or academic job, where there is some growth potential for you to do your work. And to have good collaborators, and that's the most important thing, people who are collegial and who will collaborate, because you can't do it all yourself. So my whole life has been collaborating with like-minded people, because I can't do it all myself. And that's what I would suggest.

TB – Wonderful. And so is there anything else that I haven't mentioned or asked you or that we haven't covered, about absolutely anything, your career, your life, that you feel is important to document and get on tape?

KW – I think the only thing for this project, because it's a women's oral history and I'll be gone and you'll still see my face and hear my voice, is that I think of my life in developmental trajectories, developmental time periods. And I think that there's always something new to learn and always another opportunity that comes along, but maybe you think there isn't. And so you just have to sort of open your eyes to that, that there's another tomorrow, and that you just keep moving along. So that's been a good metaphor for me; that life is a developmental trajectory and you just keep developing on with it. So those are my closing words.