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AIMS AND SCOPE

Psychotherapy and Politics International explores the psychological implications and consequences of the political, and the political implications of the psyche, both in theory and in practice. The premise of this journal is that psychotherapy is a social and political activity that asks us to examine the processes of self-deception that perpetuate individual unhappiness, as well as social structures that are inequitable and oppressive. Historically, political concepts and values, and their effects, have not been central to the therapeutic process, although that has changed. The journal welcomes articles from all modalities or schools of psychotherapy internationally and from across the political spectrum.

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EDITORIAL

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INTRODUCTION

We are pleased to kick off *Psychotherapy and Politics International's* (*PPI*) third decade of existence with this new issue, the first we'll be editing on our own, but with the support of Angie Strachan as editorial assistant and the accompaniment of the editorial team. This issue is a double issue that comprises, firstly, six peer-reviewed articles and one interview, and then six commentaries honouring Keith Tudor as author and past *PPI* editor. While this tribute highlights various facets of Keith's work, the generic first part addresses topics as current and diverse as collective trauma, ethnic identity, ethics in psychology, anti-racism in the clinic, and the use of psychotherapy for resistance and revolt.

PEER-REVIEWED ARTICLES

Between 2020 and 2022, the consequences of the COVID-19 pandemic were among the main concerns of psychologists and psychotherapists around the world. *PPI* dedicated a special issue in 2021 to the psychopolitics of the global pandemic crisis and to the specific topic of online therapy (Vol. 19, issue 1). One of the participants in that special issue, Bert Olivier, has continued his reflection in *PPI* through two articles in which he reflects on the political effects of the pandemic on subjectivity, particularly the reduction of existence in its complexity to 'bare life', that is, the sheer biological fact of life.

In the second of his articles, the one included in this issue, Olivier not only denounces various destructive strategies that he imputes to governmental and economic powers, but he also draws on ideas from the ancient Greek philosopher Plato and the psychoanalyst Julia Kristeva to propose a form of psychotherapy aimed at resistance and revolt. This

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psychotherapeutic proposal implies a psychological theory of desire, passion, courage, anger, and nonconformity.

In addition to rejecting any psychotherapeutic purpose of adaptation or adjustment, Olivier promotes the politicisation of psychotherapy in a confrontational sense. This sense also appears in the anti-racism strategy for clinical psychology that Romana Farooq and her colleagues developed in the Clinical Psychology Doctorate Programme at Newcastle University in the United Kingdom. Their anti-racism strategy, as exposed and analysed in their article, attended to power and systemic oppression while tackling racism in teaching, in selection, and on placements.

Farooq and her colleagues' work brought them into contact with the emotions of individuals from a racially minoritised background experience in the United Kingdom. These emotions are at the centre of another article, by Romena Toki and colleagues, who investigate the sense of wellbeing in connection with the ethnic identity of British Bangladeshis. Their research reveals that a strong relationship with collective identity, understood in this case as a combination of Islamic and Bangladeshi heritage, could provide greater wellbeing by protecting the person against racism and discrimination.

The theme of collective identity continues with Pádraig Cotter and Paul Callery's article in relation to historical trauma. Cotter and Callery chart the different social, political, and military and paramilitary events in Irish history and how this has given rise to collective trauma. The article posits that national and differential group psychological states are transmitted to subsequent generations and considers an integrative approach to working with collective trauma. Combining process oriented psychology (POP) with the spirit of ancient Irish storytelling is suggested as a way of reclaiming identity. The emerging themes are discussed alongside the potential benefits of continuing this group model of psychotherapy.

Following this, Rita Edah develops the ideas of community counselling in relation to disasters. In particular, she reviews the overnight counselling service for survivors of the Grenfell fire, in London. This was a terrible and controversial fire in 2017 that destroyed a high-rise block of flats, killing 72 people. The study focuses on the change in boundaries in response to social neglect, giving rise to traumas such as this one. It comprises a small study of nine counsellors, offering reflections on boundaries and consideration of what was helpful in the face of devastating loss.

Given that Edah's article focuses on boundaries, it has been relevant to follow that with Kirill Kryuchkov's study on the perception of ethics and codes. Kryuchkov is interested in mental health practitioners and their subjective understanding and meaning that they hold around ethics. This is a piece of research with an initial pilot study of 89 practitioners, with a particular focus on whether attention was biased towards the profession or the clients.

Finally, part one of this double issue offers an interview between two men familiar with working on the front line. David Weaver has a history of working in social work and was the president of the BACP (British Association for Counselling and Psychotherapy). He talks with Eugene Ellis about his prior hopes, aspirations, and experiences of holding this role as a Black man. The interview offers reflections on the challenges of leadership and aspirations for progressive change—a theme that is always relevant in this journal.

TRIBUTE TO KEITH TUDOR

This double issue of *PPI* includes a tribute to Keith Tudor, who edited the journal for eleven years, from 2011 to 2022. This tribute consisted of inviting Keith's colleagues and friends to write about his work and some of the articles he published in *PPI*, some of which he co-authored with them. The authors highlight the importance of Keith's ideas and praise his work as editor of the journal.

Keith Tudor's predecessor at the head of *PPI*, Nick Totton, stresses the importance of shifting the journal's editorship from the North and Atlantic to the South and Pacific. Nick also refers to Keith's relationship with the Māori nation. Building on this relationship, Nick introduces and discusses a 2012 article by Keith on Indigenous Southern psychotherapies, emphasising how it shows their challenge to the universalism and individualism of Western Northern psychologies, but also wondering if it might not be better to drop the term 'psychotherapy' and speak of 'approaches to emotional distress' to designate certain practices of Indigenous peoples.

Jeffrey Cornelius-White reviews Tudor's critique of 'independence day' in his article, 'In(ter)dependence day'. He reflects on Tudor's capacity to speak out from a pluralistic stance and honour the life experiences of those who have been consciously marginalised by dominant groups. Cornelius-White honours Tudor's commitment to collaboration and humility, illustrating what an important part he has played in role-modelling this to the professional community.

Following this, Julia Ioane and Catherine Knibbs reflect back on their collaboration with Keith to write about the new movement to online platforms following the pandemic. They describe the significance and impact of the working alliance, as well as the importance of inviting practitioners to really think about their contribution to society via online working. There was much to consider professionally, ethically, and politically, and so the content and the process of arriving with it are shown to be so meaningful.

Helena Hargaden reflects back on her personal and working relationship with Keith, triggered by remembering the article they wrote to commemorate the 100-year anniversary of the revolt in 1916 to begin the process of claiming Ireland as a republican state. The theme of emancipation is relevant for both these authors in similar and different ways, and Hargaden

describes the experience of bonding with another who understood, was informed, and who cared. She describes the longevity of their fond bond charted by experiences of friendship and debates, and even disagreements and love.

In the following commentary and article, Karen Minikin highlights the legacy that Keith Tudor has contributed to by keeping the political alive in transactional analysis. She summarises some key points in the article, naming their wider relevance with personal and professional meanings. As Keith reflects on the back-story of Eric Berne and his encounter with the McCarthy regime—an experience that may have silenced him politically, Minikin illustrates how Tudor is a man of principle—someone who has been, and encouraged others to also embody, the ‘conscientious objector’.


Finally, Gottfried Heuer looks back and honours his experience of collaborating with Keith and expressing his appreciation for what Keith Tudor has done for this journal. His capacity to collaborate and power share, even when he is in disagreement, is something that Heuer remembers and recounts affectionately. It is evident by all those who speak of him, that our encounters have been enjoyable, growthful, and valuable, both personally and professionally.

LOOKING FORWARD

The next issue will be published in August and will be a special issue on gender. The deadline for receipt of contributions is 31 May 2023, but please feel free to submit articles for the next generic issue.

PEER-REVIEWED ARTICLE

Beyond Agamben's '*Homo sacer*'—The 'pandemic' as final reduction of humanity to 'bare life' (Part 2)

Bert Olivier,  Department of Philosophy, University of the Free State, South Africa

ABSTRACT

In the first part of this paper, the current 'pandemic' was approached through the lens of (mainly) the concept of *Homo sacer*, elaborated on by Giorgio Agamben (1998). Taking the work of Michel Foucault on the 'disciplinary society' and 'bio-politics' further, and drawing on the role played by the principle of *Homo sacer* in antiquity, Agamben uncovers the disconcerting extent to which this principle has become generalised in contemporary societies. In antiquity, the principle of 'sacred man/human' was invoked in cases where someone was exempted from ritual sacrifice, but simultaneously seen as 'bare life', and therefore as being fit for execution. Agamben argues that the sphere of 'sacred life' has grown immensely since ancient times in so far as the modern state arrogates to itself the right to wield biopolitical power over 'bare life' in a manner analogous to ancient practices, and finds in the concentration camp the contemporary paradigm of this phenomenon. Arguing that today we witness a further downward step in the treatment of humans as 'bare life', these concepts are employed as heuristic for bringing into focus current practices under the aegis of the COVID-19 'pandemic'. In particular, the spotlight falls on those areas where burgeoning 'bare life' practices can be detected, namely 'origin of the virus' and 'lethal vaccines' in Part 1, while 'engineered economic collapse', 'chemtrails', and 'what (to expect) next' are scrutinised in Part 2. In the light of emerging evidence, it is argued that these practices take the notion of *Homo sacer*, 'bare life', and its concomitant biopolitical and pharma-political practices to unprecedented, virtually incomprehensible levels of depravity. Before turning to these, however, at the outset of Part 2 attention is given to a 'Platonic' psychotherapy, complemented by its Kristevan counterpart, to demonstrate that one is not defenceless against the depredations of the cabal.

KEYWORDS: Agamben; bare life; chemtrails; *Homo sacer*; Kristeva; economic collapse; Platonic psychotherapy

To exercise sovereignty is to exercise control over mortality and to deny life as the deployment and manifestation of power. One could summarize in the above terms what Michel Foucault meant by *biopower*: that domain of life over which power has taken control. But under what practical conditions is the right to kill, to allow to live, or to expose to death exercised? Who is the subject of this right? What does the implementation of such a right tell us about the person who is thus put to death and about the relation of enmity that sets that person against his or her murderer? Is the notion of biopower sufficient to account for the contemporary ways in which the political, under the guise of war, of resistance, or of the fight against terror, makes the murder of the enemy its primary and absolute objective? War, after all, is as much a means of achieving sovereignty as a way of exercising the right to kill. Imagining politics as a form of war, we must ask: What place is given to life, death, and the human body (in particular the wounded or slain body)? How are they inscribed in the order of power? (Achille Mbembe, 2003, p. 12)

INTRODUCTION

In the first part of this article (Olivier, 2022c), the current 'pandemic' is approached from the perspective of (mainly) the concept of *Homo sacer*, elaborated on by Giorgio Agamben (1998). Drawing on the role played by the principle of *Homo sacer* in antiquity, Agamben demonstrates the alarming extent to which this principle has become generalised in contemporary societies. In antiquity, the principle of 'sacred man/human' functioned where someone was exempted from ritual sacrifice, but simultaneously reduced to 'bare life' and therefore seen as fit for execution. Agamben argues that the sphere of 'sacred life' has grown enormously since ancient times, as perceptible in modern state practices, which claim biopolitical power over 'bare life' in a manner analogous to ancient customs. He sees the concentration camp as the contemporary paradigm of this phenomenon. I further argue that today we witness a further exacerbation of the treatment of humans as 'bare life', and employ Agamben's conceptual apparatus as a heuristic for uncovering some current practices—namely the 'origin of the virus' and 'lethal vaccines'—in the context of the COVID-19 'pandemic' as exemplifying 'bare life' practices. Here, I pursue this path further by focusing on other current manifestations of constituting contemporary humans as *Homo sacer*, fit to be executed or 'culled'.

It takes no genius, in the light of what has been adduced and discussed in Part 1 of this article, to conclude that we live in a time when Agamben's notion of *Homo sacer*, symptomatic of the reduction of humanity to 'bare life', has been (and continues to be) taken to a new nadir—one that leaves one speechless, given its audacity and complete unscrupulousness. Is there any hope that humanity can overcome this onslaught against its moral and physical sovereignty? I believe that there is; apart from the fact that millions of people worldwide have refused the 'vaccines', and protested in large numbers against 'vaccine' mandates and the autocratic manner in which lockdowns have been enforced, there

are instances of refusal that are paradigmatic as far as possible emancipatory actions are concerned. This raises the question of psychotherapy, which I turn to here, to demonstrate at the outset of this part of the article that one is not utterly helpless in the face of the continuing, relentless onslaught against humanity, before focusing on the other indicators that this is irrefutably the case.

The question of psychotherapy

Is there any form of psychotherapy available to people who are suffering under the unconscionable actions of the group of people driving the events discussed in the first part of this article? Perhaps surprisingly, reading ancient Greek philosopher Plato's myth of the charioteer and two horses—as a symbol representing the structure of the human psyche (from ancient Greek, *psuche*) or soul—in the *Phaedrus* (1961) together with passages from his *Republic* (1974), one finds the conceptual means which could play an important role in arming oneself psychically against the debilitating effects of these reprehensible actions on every human being, whether one is aware of the (carefully hidden) plot to disrupt and harm people worldwide or not. The *Phaedrus* myth is well-known, and depicts a charioteer whose chariot is pulled by two winged horses, one very powerful, headstrong, black with grey eyes, and the other graceful, obedient, and white with black eyes. Reading this together with what Plato writes about the soul in *Republic* (1974, 439e–440a, 580c–581c), it appears that the charioteer represents *reason*; the strong, wilful horse *passion* or appetite; and the white, temperate horse *thumos* or *spirit*, which is the basis of the capacity for *anger*. In the first part referred to here (439e–440a), Plato writes that 'anger sometimes wars against the appetites', and in the second excerpt (580c–581c), 'One part, we say, is that by which a man learns; the second (*thumos*) is that with which he gets angry; as for the third part... we... have called it the appetitive part... We have also called it the money-loving part'. The significant point here concerns the fact that spirit—the part of the soul 'with which... [a person] gets angry'—is also that part enabling one to 'war[s] against the appetites', and seen in conjunction with the tripartite structure of the soul, it means that *anger* as a function of spirit (the white horse) serves the *rational* part of the soul (the charioteer) in its struggle against *appetite* (the black horse).

Plato's depiction of the soul (which anticipates that of the later Freud; see Olivier, 2012a) in these evocative terms emphasises the fact that the human soul is a complex combination of countervailing forces, where the charioteer, or reason (corresponding with Freud's 'ego') sometimes has a hard time reining in the powerful black horse or passion (resonating with Freud's 'id'), and has to enlist the aid of the white horse, or spirit (which does not really correspond with the superego in Freud's theory, probably because Plato lacked a conception of the unconscious—although, ironically, Sophocles was aware of it, as shown in *Oedipus Rex*). So where does the therapeutic value of Plato's myth lie? In his insight that, when the

passionate black horse pulls in a direction the charioteer knows they should not go, or when it has spent all its prodigious energy, the spirited white horse will support the charioteer encouraging him to carry on in the 'rational' direction. Sometimes, Plato's examples (1974, 439e–440a) show, the force of passion or desire (the black horse) is such that the charioteer and the white horse are unable to rein it in, but then—importantly—the anger of the spirited part (the white horse) functions as an indication that allowing appetite to triumph was wrong. Not that one could do without the sheer energy derived from passion; making the right choices and pursuing action based on it, energy is indispensable for *doing* what is necessary.

Armed with this insight, it is therapeutic to know that, when something provokes one's *anger*, and *reason* (not *instrumental* reason, but *ethical*, community-oriented reason) guides one regarding appropriate action in the face of the source of anger, *passion* can be enlisted to act against it—that is, *if* spirit plays its animating role at all, because it is the source of *courage*, but not everyone is equally endowed with spirit (as Plato knew, a different part of the soul dominates in different people; see 1974, 580c–581c). Hence, one might state hypothetically that, *provided* spirit plays a significant role in one's psyche or soul, one would not fail to get angry in the face of the unconscionable actions against the rest of humanity by the members of the Davos cabal and their iatrocronic accomplices, and reason would enable (or at least guide) one to find the best way to resist, oppose, and fight them with the courage generated by spirit; passion or desire has to be enlisted in the process, too, because one would need all the energy one can muster, albeit with *no guarantee of success*.

Given the place of anger and spirit—in conjunction with ethical reason and passion—in these Platonic considerations of the type of psychotherapy called for under present, fraught conditions, a complexifying contemporary counterpart to Plato suggests itself as being necessary: Julia Kristeva on 'revolt'. Why complexifying? First, because of Kristeva's complex understanding of 'revolt', and secondly because of her introduction of a historically culture-specific element which (at least partly) explains the ostensible difficulties or obstacles people face at present when it comes to experiencing justifiable Platonic anger, or in Kristevan terms, the 'will to revolt'. *After all, the preceding Platonic reflection on anger, spirit, and related concepts has not answered the question: What will move people to anger under current circumstances* (particularly in light of the fact that such large numbers have simply done as they are told)? The brief answer is: *When they realise in concrete terms—that is, experientially in terms of health and economic issues—that they have been lied to*. So far these lies have been covered up very successfully, but there are increasing signs of what is colloquially referred to as 'the great awakening'.

What does Kristeva mean by 'revolt'? In an interview with Philippe Petit, she gives the following answer:

I work from its etymology, meaning return, returning, discovering, uncovering, and renovating. There is a necessary repetition when you cover all that ground, but beyond that, I emphasize its

potential for making gaps, rupturing, renewing. Rebellion is a condition necessary for the life of the mind and society... (Kristeva, 2002, p. 85)

And in *The Sense and Non-Sense of Revolt* (Kristeva, 2000, p. 7) she remarks:

None of us has pleasure without confronting an obstacle, prohibition, authority, or law that allows us to realize ourselves as autonomous and free... on the social level, the normalizing order is far from perfect and fails to support the excluded: jobless youth, the poor in the projects, the homeless, the unemployed, and foreigners, among many others... Heidegger thought only religion could save us; faced with the religious and political impasses of our time, an experience of revolt may be the only thing that can save us from the automation of humanity that is threatening us.

These two excerpts must be read together; the first hints at the complex nature and dynamics of revolt—its ceaseless retracing and reintegration of past and present experience; its reworking of terrain covered multiple times, to be able to find there the glint of a promise of rediscovery, revitalisation, and resolve. This encompasses the Platonic dynamic of the soul's components, but also much more. The second excerpt (which partly featured in Part 1 of this article too) introduces something essential to the 'health' of the soul, both individual and collective: unless one faces an obstacle of some kind—from the unfair preferential treatment of a sibling by parents, to political oppression such as that under apartheid—one could never be privy to the 'pleasure' or satisfaction of activating one's (relative) autonomy. Always buckling under breeds spineless, self-despising creatures, even if this is buried under reams of anaesthetising entertainments on our ubiquitous screens. But the second citation also touches on something peculiar to our unenviable global situation, which affects us personally and collectively: personally, because 'the automation of humanity that is threatening us' does so by infiltrating our psyche at the intimate level of personal memory (including pre-digested understanding) and retention of ubiquitous, standardised media images, and at mondial-collective level functions to debilitate and neutralise any potential revolt through the mediated inculcation of automated responses geared towards stifling singularising, personal critique and rebellion (which is ineluctably the source of collective revolt). The latter manifests itself, among other things, in the amazingly effective, portmanteau shape of the 'conspiracy theory'.

Earlier I alluded to the obstacles people currently face as far as experiencing justifiable Platonic anger, or in Kristevan terms, the 'will to revolt', is concerned. This bears on the political aspect of the psychotherapeutic value of such anger or revolt. The point is that what Kristeva calls 'the automation of humanity that is threatening us' indexes a phenomenon that effectively prevents the experience of anger or the 'will to revolt', and which I elsewhere (Olivier, 2020) theorise as a generalised kind of *nihilism* (the felt absence of any intrinsic value) that stands in the way of a receptivity for the endlessly engaging and qualitatively variegated character of the world, by reducing the latter to the homogeneity of capital and marketability.

At present we face a specific incarnation of such nihilism, which works insidiously to cover up latent possibilities of meaningful lives, substituting for these the (supposedly alluring!) spectre of an iatocratic and technocratic future. Needless to say, when the future is ostensibly decided in advance—in a manner reminiscent of the second *Terminator* film, where the protagonists struggle to free humanity from such a 'closed' future (Olivier, 2002)—all meaning is lost, and only nihilism remains.

Given this debilitating state of affairs, the growing awareness that people have been deceived by their 'health authorities' and their governments, and that—far from protecting them against a dangerous virus—everything they have been advised and (in fact) prescribed, specifically the much-vaunted 'vaccines', in fact exposes them to something far more dangerous than the virus itself, *inexorably preparing the way for such a mortifying realisation to dawn on them*. What other conceivable effect could it have on people to discover that 'the UK Gov quietly published data confirming the fully vaccinated accounted for 92% of all COVID-19 deaths in March' (in Britain), to quote from the title of an article in *The Exposé* (2022)? Being so starkly confronted with the exact antithesis of what was promised regarding the efficacy and safety of the COVID-19 'vaccines', may take some time to register, but sooner or later it must. *And that moment marks the possibility of Platonic anger and Kristevan 'revolt', with predictable political implications* (which the cabal has no doubt anticipated; see GRAND JURY, 2022a, 2022b, 2022c, and 2022d).

In a different idiom, that of Lacanian psychoanalysis, this means that a point is reached where the prevailing dominant discourse—the iatocratic, technocratic one—comes up against the brute facticity of the Lacanian 'real', where no routine symbolic meaning-confirmation occurs any longer. And as Lacan pointed out, the effect of this is traumatic—that of a 'missed encounter' (see Olivier, 2005) accompanied by the 'repetition compulsion', where words fail. Paradoxically, this failure of discourse potentially opens the way for personal and collective political *action* ('revolt') that is predicated on something different from anaesthetising, 'normal' discourse: a breach of sorts that calls, precisely, for action (see Olivier, 2012b). As stated before, however, *with no guarantee of success*. Regarding the latter, one should remind oneself that, even if one loses one's life, it is still worthwhile resisting the perpetrators of global democide, reassured by Lacan's 'revolutionary's choice': 'Freedom or death', which is a win/win situation, because either way you are free; instead of the mugger's choice, which many, if not most people have made, namely 'Your money or your life'; a lose/lose situation (Copjec, 2002, p. 17–19; Olivier, 2022b). There are (political) ways of resisting the cabal without engaging in violence, however, one of which I shall return to with reference to Tanzania. First, however, attention must be given to further evidence of the attempt at a *mondial coup d'état* that is systematically being executed as I write. Such evidence concerns, firstly, global, controlled economic ruin.

Engineered economic collapse

The deliberate destruction of the world economy, with the purpose of ushering in a new, digital banking system, which is already underway (see, e.g., Owen, 2021)—the ultimate goal of the people driving the 'pandemic' and everything associated with it—is a difficult topic to research, given the scarcity of direct evidence in a univocal manner. That is, one is faced with a set of conditions that is open to different interpretations. This projected new financial system, where all 'programmable money'—actually, 'vouchers' disguised as money—will be centrally controlled and used to control people, by disallowing the purchase of certain items and allowing the purchase of others (Wallace, 2021), is a more difficult topic to write about compared to the lethal vaccines, given the abundantly available, incontrovertible evidence concerning the latter. Nevertheless, some such evidence, in the form of the assessments of the current situation by authorities in the fields of finance and economics, is available. One of the most revealing is the interview with financial investor Melissa Cuimmi (RylandMedia, 2021), who explains why the whole Great Reset programme is motivated by financial considerations on the part of the cabal. A summary of the findings of other authorities is encountered in the video interview conducted by Maria Zee (2022, 33:22) with Dr Reiner Fuellmich, the lawyer leading wide-ranging investigations into different aspects of the 'pandemic', where he remarks that, 'whatever we're seeing, it is two things: deliberate destruction of our economies; deliberate destruction of our health'. As the rest of the video interview sets out, these things are being engineered by the global elites known variously as the globalist cabal, the Davos clique, or the billionaire elites, and in the process people are treated as 'bare life'.

Starting on 5 February 2022 Dr Fuellmich and his team commenced what they called GRAND JURY—The Court of Public Opinion (2022a), where panels of authorities in relevant fields addressed 'pandemic'-related topics at length, including PCR-tests, injections, eugenics, and financial destruction, on different days. The latter topic was dealt with by, among others, Patrick Wood (editor and producer of Technocracy.News), who—having reconstructed the historical events leading up to and preparing for, the corona virus 'pandemic'—listed the following nine 'ways to destroy capitalism' (GRAND JURY, 2022a, 23:18), that is, the current hegemonic global economic system, to prepare for a fully digital economy: 'Withdraw energy... Withdraw resources... Corrupt the supply chain... Withdraw labour... Withdraw financing, capital... Limit consumption... Limit innovation... Create cataclysmic event—Frightened people don't produce, spend, or consume; Create mal- and dis-investment'. Wood proceeds by demonstrating how every one of these withdrawals or corruptions has been set in motion in various ways, all of them hastening a collapse of the world economy and therefore paving the way for a new (digital) financial system. For example, under 'limit innovation' he relates an instance of people who are trying to finance an innovative way of producing energy, and are fearful for their lives, because it is known that anyone who can demonstrate that energy can be produced cheaply and effectively faces being terminated, undermined, or stonewalled by the energy cartels. The item related to a 'cataclysmic event'

obviously alludes to the COVID-19 'pandemic', but by citing a different example of a natural disaster, Wood reminds one that such an event typically leaves people in a state of 'catatonic shock'—so much so that many of them largely cease economic activity (partly impelled by 'lockdowns' globally, in the case of the 'pandemic'). Hence, it is not difficult to connect Dr Fuellmich's observation—referred to earlier—about the 'two things' one is witnessing, namely 'deliberate destruction of our economies; deliberate destruction of our health'—with this list of ways to destroy the world economy. These two things are intimately connected, as Wood's presentation eloquently demonstrates.

Under 'withdraw resources' evidence abounds. For example, Christian Westbrook, the 'Ice Age Farmer' (2022c), draws attention to the fact that there is a 'food supply shutdown' at present, with 'deer, fish, pigs euthanized; crops not planted'. The video summary states that (2022c):

An observing alien species would ask itself, 'Why is humanity destroying ALL of their food sources?' In this special Ice Age Farmer broadcast, Christian has a candid conversation about the overwhelming number of attacks on our food supply. With crops unplanted and with more food facilities burning down, the media runs stories about 'food fire conspiracy theories.' And it's not just chickens—the state is also killing deer and fish in the name of stopping diseases. Start growing food now.

Does this seem rational? Of course not—it is irrational in the extreme, unless one changes the meaning of 'rational' as indexing 'instrumental rationality', aiming at terminating a humanity that has been reduced to 'bare life'. Further, a perfect example of 'corrupting the supply chain' (of food, again)—listed by Wood, above, as a way to further economic collapse—is afforded today in the context of the increasingly critical shortage of grain globally. Clayton and Natali Morris (2022) point out that, regarding the ongoing conflict in Ukraine, Russia has declared itself willing to facilitate the transportation, by Ukrainian ships, of grain from the harbour of Odessa to countries in need, but their offer is not being accepted. One may wonder why not, until the realisation dawns that this 'cannot be allowed', because it would delay the economic collapse that is being engineered by the global elites intent on 'building back better', to cite one of their favourite justifications for 'The Great Reset', as Klaus Schwab (Schwab & Malleret, 2020)—probably their kingpin—puts it in the book by that title. The Morris duo (2022) summarises the paradoxical grain situation in Ukraine as follows:

Experts warn that the world is nearly out of food and grain but world leaders cannot agree on how to distribute what food there is. Ukrainian officials say that they are going to keep fighting until their country can go back to what it was before. Russia says that it can facilitate food distribution. It seems the solutions available are not being considered for the sake of war and more war. (para. 1)

Despite the evidence that Russia is willing to cooperate in the distribution of grain (RT, 2022a), Western media are demonising it by claiming that Russia is 'blocking Ukraine's grain exports' (Darrah, 2022). Needless to emphasise, the war is itself a major contributor to the

global economic collapse, but while Russia is being roundly blamed for it by mainstream media in the west, indications are that it was goaded into the 'special military operation' in Ukraine by NATO, which did not adhere to previous agreements with Russia, to refrain from adding more members to the alliance after its initial formation (RT, 2022b). Suffice to say, that Ukraine being Russia's neighbour, and next in line for NATO membership, was evidently the last straw for Russia; hence its 'special military operation' in Ukraine. (I shall not here elaborate further on this issue for lack of space, but see Mercola, 2022d regarding the World Economic Forum's (WEF) 'great reset' and war.) It is significant, however, that there is good reason for those people driving the 'great reset' and all it entails to resent Russia's president, Vladimir Putin, who has openly challenged them on more than one occasion, such as where he claims that the 'New World Order' are deliberately crashing the economy as part of the 'Great Reset' (Adl-Tabatabai, 2022).

Chemtrails

'Chemtrails' may seem like a baffling sub-heading, and it certainly marks a controversial topic, but evidence has been mounting that, for some time now, aircraft have been releasing 'trails' of debilitating, if not deadly, chemicals above cities and towns globally. These chemicals include strontium, barium, and aluminium, all of which have an extremely deleterious effect on people who inadvertently, but unavoidably, breathe these in. Commenting on her informative video concerning chemtrails, Kimberly Gamble (2022) elaborates:

Have you noticed more planes flying overhead in your community that leave trails behind them in the sky? Apparently these patterns are the result of 'weather modification' programs—also referred to as 'solar radiation management' or 'chemtrails'. The international program involves spraying aluminum, barium, strontium and other toxic chemicals from airplanes at high altitudes that then fall to the ground, ending up in our bodies, our water, our soil and the air we breathe.

In confirmation of Gamble's revelation, above, a whistleblower whose video testimony is available on Gamble's website, Kristen Meghan (2013), a former US Air Force employee, testified about chemtrails nine years ago already. The video testimony is accompanied by the following synopsis:

At the 2013 Atlanta.MusicLibertyFest.com, Kristen Meghan, former Air Force Industrial Hygienist/Environmental Specialist gave a ground breaking presentation of what she had discovered about chemicals known to be in Chemtrails while serving her Country. Furthermore, she explains why she left the military after an attempt to silence her from speaking out on employee exposures from industrial sanding operations. This BRAVE young lady has put her livelihood/life on the line for U.S. Please take a minute to thank her and help U.S. by redistributing this Video and any other VALID information about Chemtrails to as many people

as you can! This is a GLOBAL issue, other countries must get this information as well. “they” [sic] are spraying the majority of the population... Why?

Why, indeed? Considering the toxicity of the metals involved (strontium is the chief health hazard in radioactive atomic fallout), it is certain that the decision makers behind this programme of supposed ‘weather modification’—which has probably not been negotiated with citizens of the countries affected by this international programme—did not have the health of ordinary people in mind. This is what happens when people are not considered from the perspective of *bios*, but only from that of *zoē* or (dispensable) ‘bare life’, which—enjoying no political or human rights—can be slaughtered at will.

What next?

As if the disclosures about unconscionable actions regarding the development and administering of deadly ‘vaccines’ were not already beyond the pale, recently (18 May 2022) Dr Joseph Mercola published an article on the prospects of a ‘weaponized bird flu’ becoming the ‘next pandemic’. It is difficult to comprehend the depths of depravity that human beings have to sink to, to be able to contemplate the creation of a pathogen as deadly as the purported bird flu virus, but the documentary evidence presented by Mercola is impossible to ignore. It is equally difficult to understand that large numbers of people (if not the world population in its entirety) have *not* descended on the small number of unelected billionaires and their cronies who have been identified as being the engineers of human misery at present (Mercola, 2022d). From what was written above it is already clear that Dr Fauci and Bill Gates are foremost among these people, and that Klaus Schwab (founder of the WEF) can be included among them.

Add to this the supposed ‘monkeypox’ outbreak that was announced a few days ago in late May (2022), and the picture gets worse. A video presentation by ‘Amazing Polly’ (2022, 24:00)—an activist-investigator extraordinaire—has exposed the people behind the planned monkeypox virus, in the context of the event where such planning occurred, albeit in thinly disguised format. The event in question was the NTI (Nuclear Threat Initiative) and Munich Security Conference ‘Tabletop Exercise’, in March 2021, on ‘Strengthening Global Systems to Prevent and Respond to High-Consequence Biological Threats’. A report on the proceedings of this event was published in November 2021, and this is what Amazing Polly discusses in the video concerned. On the NTI website (NTI News, 2021) one can find the full report.

Under ‘Exercise Scenario’ in the report, Polly (2022, 24:30) draws one’s attention to its portrayal of ‘a deadly, global pandemic involving an unusual strain of monkeypox virus that first emerges in the fictional country of Brinia and eventually spreads globally... The exercise scenario concludes with more than three billion cases and 270 million fatalities globally’ (NTI

News, 2021, Exercise summary). On p. 10 of the final NTI paper (NTI: bio, 2021) one finds the following schematic summary of the exercise discussion (which Polly comments on at length):

The discussion was organized into three sequential 'moves' corresponding with scenario developments, followed by a roundtable discussion of broader biosecurity and pandemic preparedness issues. The step-by-step approach to revealing scenario developments reflected the limitations of information available to real-world decision makers, as well as the resulting uncertainty associated with a pandemic of unknown origin...

Scenario Design Summary: ATTACK MOVE 1 May 15, 2022 June 5, 2022 Scenario • Monkeypox outbreak in Brinia 1,421 cases/4 deaths • No international warnings or advisories Key Issues • International alert & warning systems • Benefits of & need for early risk assessment

MOVE 2 January 10, 2023 Scenario • 83 countries affected 70M cases/1.3M deaths • Monkeypox engineered to be vaccine-resistant • National responses: effects of early action • International supply chain challenges Key Issues • Benefits of pre-determined triggers for national response • International supply chain challenges

MOVE 3 May 10, 2023 Scenario • 480M cases/27M deaths • Revelation of terror group origins— infiltration of civilian bio lab • Key Issues • Biosecurity and governance of dual-use bioscience research

ROUNDTABLE December 1, 2023 Scenario • 3.2B cases/271M deaths • Global differences in national responses contribute to significantly variable outcomes • Key Issues • International financing for pandemic preparedness • Measures to strengthen national pandemic preparedness capacity

As Polly remarks, taken at face value, the dire 'fictional' scenario depicted here is likely to give rise to extreme alarm (among the few people who may possibly see it in the NTI report) from the perspective of the recent announcement of two monkeypox cases in Britain on 12 and 13 May (World Health Organization [WHO], 2022), which have since increased to 'at least 131' outside Africa (Independent, 2022). The fact that these cases have been linked largely to probable sexual transmission in the male gay community is not likely to assuage alarm on the public's part, given that this mode of transmission is described as being 'not normal', and the possibility of a mutation is hinted at (Independent, 2022); in other words, the message is coming through that something has changed about the virus's normal transmission pattern. Polly (2022, 39:00) sees this as deliberate 'terrorising' of the public on the part of the health authorities (whom she labels the 'health mafia') by their projection of much larger numbers of fatalities than seem likely in such an event, and reminds her listeners of the parallel between the 'fictional monkeypox scenario' enacted by the NTI and the earlier 'Event 201' coronavirus planning exercise of October 18, 2019 (Polly, 2022, 33:34), where the possibility of a coronavirus pandemic was 'wargamed'—as she puts it—before, a few months later, it actually came to pass. A coincidence in both cases? No doubt the participants in these two events would strenuously argue that this is the case. Dr Mercola (2022a) comments as follows on 'Event 201':

The event, which took place October 18, 2019, in New York, was called Event 201, and it included a detailed simulation of a coronavirus outbreak with a predicted global death toll of 65 million people within a span of 18 months.

Add to this what Joshua Philipp (2022) writes on the issue, and a coincidence seems even more unlikely:

The World Health Organization (WHO) is responding to a string of monkeypox outbreaks, and will be convening an emergency meeting on the virus and its global spread. In terms of government power, the timing of this outbreak couldn't be better for the WHO—which may soon be granted the powers to manage laws on global health outbreaks, and which is oddly well-positioned for a monkeypox outbreak following a recent 'germ-games' call...

And in the tenacious investigative newspaper, *The Exposé* (a thorn in the flesh of the mainstream discourse), Mike Whitney (2022) observes pointedly: 'I'm going to go out on a limb here and say there is zero chance that this new monkeypox occurred naturally'. Needless to say, he is referring to the remarkable fact that, recently, this 'rare' disease suddenly and spontaneously cropped up in ten different places where it had never been detected before. He also reminds one of the ('coincidental') remark by Bill Gates, about six months before the monkeypox eruption, that the world 'would face an unexpected smallpox outbreak'. And the fact that the WHO has just announced (RT, 2022c) its distinctive response to the monkeypox outbreak (which already includes more than 550 cases in 30 countries)—a response which differs from its earlier response to COVID-19, insofar as it eschews lockdowns, and will instead focus on isolation of the infected and contact tracing—is nothing to rejoice. On the contrary: from a psychological perspective, such a highly focused strategy will have a more debilitating effect on those affected than lockdowns—which affect everyone at large—and is comparable to prison practice involving solitary confinement.

Perhaps none of this should surprise anyone; Dr Mercola's (2022a) article titled 'The 10-year pandemic plan' draws on WHO virologist Marion Koopmans's whistleblower account of the organisation's official agenda of ongoing 'pandemics' from 2020 to 2030 (Rumble, 2022, THE PLAN), and has the effect of dissolving any lingering doubts about the 'coincidence' of both the coronavirus 'pandemic' and the recent outbreak of monkeypox infections. Mercola (2022a) also reveals that, in 2017 and 2018, millions of COVID-19 test kits were sold to different countries, and that Moderna pharmaceutical company already had a COVID-19 vaccine ready in December 2019. Furthermore, he reminds one that, in 2010, The Rockefeller Foundation released a report in which they outlined a scenario of a future pandemic with an uncanny resemblance to COVID-19. All of these 'signs of anticipation' (for which Mercola has damning documentary evidence) signify that the advent of the coronavirus pandemic was not exactly unexpected; on the contrary.

One more instance has to be added to those, above, that point forward to possible new attacks on human rights and sovereignty over one's body, which is commonly taken for granted in 'democratic' countries, and is sometimes enshrined in their constitutions. In the

Universal Declaration of Human Rights of the United Nations (1948), it is arguably entailed in Article 3, which reads: 'Everyone has the right to life, liberty and security of person'—after all, 'life', as well as 'person' in this context presupposes having a body. In the 19th century, John Stuart Mill stated this right succinctly in reciprocal terms concerning the self and others in *On Liberty* (2009, p. 19)

The only part of the conduct of any one, for which he is amenable to society, is that which concerns others. In the part which merely concerns himself, his independence is, of right, absolute. Over himself, over his own body and mind, the individual is sovereign.

I refer to these rights because of the conspicuous attacks on them by those who are responsible for planning pandemics which have resulted in, and are bound (in the future) to exact an additional, unconscionable toll of human life and suffering. The final indication of such a possible—if not probable—future 'pandemic' is contained in a short video/podcast by Ice Age Farmer (2022b), where he shows, and comments on, another video from 30 March 2022, in which former Centers for Disease Control and Prevention (CDC) director, Dr Robert Redfield, states that (in Ice Age Farmer's words): 'Bird Flu will jump to humans and be highly fatal in the coming 'Great Pandemic,' for which C19 was a mere warm-up'. Even more alarmingly, in another video (Ice Age Farmer, 2022b, 7:28), he discusses the gain-of-(lethal)-function research of a scientist, Dr Yoshihiro Kawaoka—funded by the Bill and Melinda Gates Foundation—who has stated that a 'hybrid swine-bird flu virus [is] possible', and would be 'extremely lethal'. This was echoed by Redfield in the piggyback video featured in the previous Ice Age Farmer (2022b) video referred to, where Redfield mentions a 'significant' mortality rate of between 10% and 50%—an understatement, if ever there was one: this means he is predicting the death, from the anticipated bird flu 'pandemic', of up to almost four billion people! In the video on Kawaoka's research, it is further revealed—with documentary evidence from a press release by the University of Wisconsin-Madison (Ice Age Farmer, 2022a, 7:43)—that it has resulted in something extremely pathogenic. In the press release it is stated that (Ice Age Farmer, 2022a, 7:50):

What is so interesting about Dr Kawaoka's recent experiments is that he targeted PB2, the segment which few know enough about to be decisive. Dr Kawaoka and his research team have taken a human PB2 gene segment and spliced it to H5N1 bird flu. The result is a more lethal and even more virulent virus than the parent H5N1 strain.

Dr Kawaoka and his staff have now, and pretty conclusively, named PB2 as the gene segment responsible for lethality in humans.

As the Ice Age Farmer (2022a, 8:30) observes, unsurprisingly, Dr Kawaoka's research has caused controversy in the community of scientists, who have 'expressed horror for the creation of this virus that would render the human immune system defenceless'. One is tempted to say: 'I rest my case'. No matter how much scientists like Kawaoka, and gain-of-function entrepreneurs like Bill Gates, may try to justify such research by claiming that it enables humans to prepare for possible pandemics—caused by these *laboratory-created*

viruses—it is patently disingenuous, and a case of conspicuous gaslighting into the bargain. What are the chances that a natural insertion of the PB2 gene segment into the H5N1 bird flu virus would occur? Pretty insignificant, I would say. The mere fact that such research (which also includes the laboratory construction of the SARS-CoV-2 virus in Wuhan) is taking place, is already a manifestation of rampant 'bare life' treatment of humanity at present.

Probably the worst-case scenario concerning what may come next is sketched in a video interview with whistleblower Celeste Solum, a former FEMA (Federal Emergency Management Agency) employee in America, conducted by Mike Adams (Brighteon, 2021). In the interview (which should be viewed in its entirety) Solum confirms that the 'pandemic' was planned, that the aim was (and still is) depopulation, that the COVID-19 'vaccines' were aimed at killing people, that FEMA intends confiscating people's firearms, that there are ships containing food (including the increasingly scarce 'baby formula') that is not offloaded in American harbours, that another virus called the 'plant destroyer' will be distributed to kill healthy plants (and undermine food availability), that when food shortages become acute, people would have to go to 'food distribution' locations and be taken to FEMA camps from there. The most horrifying part of Solum's information (Brighteon, 2021, 25:00) consists in her revelation that—as one may gather from the prescient film, *Sophie Scholl* (available on YouTube)—because the globalist cabal believes the world to be overpopulated, people who lack usefulness would be 'humanely' terminated, either in gas chambers or by being guillotined in the camps. (She claims that the cabal worked on producing a 'better guillotine' between 2000 and 2005.)

This chilling account of what will happen in these FEMA camps leaves no doubt that—as she says explicitly—these camps will differ from the concentration camps of World War II (which represented the modern nadir of 'bare life' treatment for Agamben, as indicated earlier). As described by Solum (who left FEMA because of her horrifying discoveries), these camps give a new meaning to 'nadir'; in fact, it is doubtful whether a more extreme manifestation of viewing human beings as 'bare life', minus any rights, is conceivable. As it is, it embodies what may be called the 'terrible sublime' (Olivier, 1998), given its ineffability or unrepresentability in the form of a unified image. It is understandable that many people would reject Solum's testimony as an unfounded 'conspiracy theory', given the virtually incomprehensible horror it conjures up. A visit to Daniel Libeskind's Jewish holocaust museum in Berlin (Olivier, 2021b), with its effective use of emptiness and silence to suggest the inexpressible horror of the Holocaust to visitors, would afford an approximation of what Solum has described in this interview. Recently a Holocaust survivor, Vera Sharsv, delivered an address at a ceremony commemorating the formulation of the Nuremberg Code (which, among other things, forbids any medical experimentation on human beings), delineating the striking similarities between the tactics of the Nazis that culminated in the genocide of six million Jews, and the tactics of the global elites, starting with the COVID-19 lockdowns and progressing through 'vaccinations' to controlled economic collapse. She warns that, unless

humanity awakens from its stupor and launches a concerted struggle against the globalist elites, people will fall victim to the planned genocide (Loving Life, 2022). On a more affirmative note, it will be recalled that earlier I referred to political ways of resisting the cabal without engaging in violence, and that one such example concerns Tanzania.

Conclusion: Reason for hope?

Tanzania is a beacon of hope that humanity can, and may, prevail in the face of the psychotic onslaught against the world's people by the globalist Davos cabal (the WEF clique, in other words)—unelected, technocratic billionaires who are, by all accounts, behind the attempt to exterminate populations. In his 'Report from Tanzania', Bushiri (2022) writes:

It is almost one year now since the assassination of the world's one and only sovereign leader who waged open warfare against the COVID-19 Cabal...

Within a few weeks of President Magufuli's murder, his replacement, Samia Suluhu Hassan, a female World Economic Forum attendee, set about installing the Cabal's COVID agenda. It was a thoroughly depressing experience. I know. I was there to see it.

Gone forever were Magufuli's maskless smile and palpable warmth, replaced now by daily images of a cold, insentient president and her entire entourage all muzzled, as per the Cabal's orders.

In rapid succession, in came the following:

- a campaign of fear launched by the media
- images of 'COVID patients' in hospitals
- tight COVID controls at the country's airports and borders
- directives to force the public to wear face masks
- face masks in all government buildings
- a masked police force
- masks in hospitals
- antisocial distancing
- masks in schools
- masks in the streets
- no handshakes
- public transport forced to operate at half capacity
- messages from government on our mobile phones, warning us about COVID and promoting the 'vaccine'
- palpable fear between old friends and families
- import of COVID 'vaccines' banned under Magufuli...

But then, after just one week, something happened. Something truly remarkable...

After just one week of all the fear and insanity, the people of Tanzania had had enough...

First it was the police. Working in the tropical heat, they quickly realised that they were suffocating behind their masks, so they threw them where they belonged—in the bin.

So, when you see that the police themselves are questioning the narrative and distancing themselves from the nonsense, what happens?

Everyone else follows.

And so, whilst the new president and her acolytes appeared on TV daily, all masked up, pumping out fear and promoting COVID 'vaccines', out in the streets the people of Tanzania were having none of it and, believe me, the mass non-compliance was a sight to behold...

Quietly, THE WHOLE OF TANZANIA STOPPED COMPLYING.

THAT'S 50 MILLION PEOPLE in a land almost five times the size of Britain.

And so today, with the exception of the country's airports (which 90% of Tanzanians will never enter), life goes on as it always has.

In this report, Bushiri recounts the history of a paradigmatic instance of civil disobedience, which the Tanzanian government was powerless to neutralise by enforcing the Draconian COVID-19 rules. If other countries would follow suit, the globalist cabal would be equally powerless to proceed with their agenda. What the example of Tanzania demonstrates is how easy it is to scupper their plans, and in a peaceful manner to boot. It is a reason for hope, provided people (especially the police and the armed forces) have the courage to follow in Tanzanians' footsteps.

Then—given the demonstrable complicity of the WHO in engineering some of the scientifically unjustifiable health regulations of the COVID-19 'pandemic' (Mercola, 2022c)—there is this hope-inspiring news, just announced (Mirani, 2022): the WHO has failed in its attempt to get member countries to agree to 13 controversial 'amendments' proposed by Joe Biden of America, and a 'pandemic treaty' that in effect would have given it the right, according to international law, to strip member countries of their sovereignty, giving it central power to coordinate and manage disease control globally. At the recent meeting of the WHO's World Health Assembly, 'developed' nations argued in favour of adopting these amendments, but were stonewalled on 25 May by delegates from 47 African countries, as well as Russia, Iran, Brazil, India, China, and Malaysia, who declined to support the proposed amendments and treaty. As Mirani reports, however, those driving the attempt to undermine countries' sovereignty will not give up: the proposed amendments and treaty, aimed at gaining central control over countries worldwide, will be resubmitted in 2024.

Two more instances that inspire hope concern international court cases against the cabal. The first concerns the International Common Law Court of Justice in Brussels (Annett, 2022a; Olivier, 2022a), which—after a four-month trial—has convicted and sentenced 75 individuals to life imprisonment. It has ordered the seizing of their assets and prohibits the further use of their COVID-19 'vaccines' as *'products of medical genocide and mass murder'*. Among the

convicted individuals are Justin Trudeau, Prime Minister of Canada, Pope Francis (Jorge Bergoglio), Albert Bourla and Emma Walmsley, the CEOs of Pfizer and GlaxoSmithKline Pharmaceuticals, Xi Jinping, President of China, and Queen Elizabeth (Windsor)—all found to be complicit in the ongoing crimes against humanity involving the 'pandemic'. The fact that it took the court four months to arrive at this verdict testifies to its thoroughness, and although this court seems to have little more than symbolic significance, it probably compelled Pope Benedict to resign in 2013 after exposing the Vatican's involvement in the genocide of indigenous children in Canada (Annett, 2022b).

The second major court case (Mercola, 2022b) is being brought by attorney Hannah Rose, representing seven other people, at the International Criminal Court (ICC) in The Hague, Netherlands, against 16 individuals connected to the mainstream promotion of the 'pandemic', lockdowns, PCR tests, and 'vaccines'. The ICC is an independent court tasked with the investigation of crimes that concern the international community. An international treaty called the Rome Statute, which has been ratified by more than 120 countries, including the US, governs its activities. Its actions can be triggered when member states refrain from taking appropriate steps to prosecute criminals. Member states are supposed to cooperate with the court, at least in theory. The charges of crimes against humanity, genocide, war crimes, and crimes of aggression have been laid against 16 individuals by the seven applicants. The accused include UK Prime Minister Boris Johnson, Bill and Melinda Gates, the CEOs of Pfizer, Moderna, AstraZeneca, and Johnson & Johnson, Dr Anthony Fauci, Dr Peter Daszak and several other British authorities, as well as the presidents of the World Economic Forum (Klaus Schwab) and the Rockefeller Foundation. According to the ICC lawsuit, the 16 defendants stand accused of violating the Nuremberg Code (see Olivier, 2021a) and Articles 6, 7, 8, 15, 21, and 53 of the Rome Statute. Needless to emphasise, this is a momentous lawsuit, and the sooner it is heard by the ICC the better (on the assumption that judges have not been compromised and an unbiased judgement will be delivered). Regarding the identities of the 'Davos cabal', the list of accused in these two court cases gives one a good idea of who they are.

I shall conclude with a troubling thought expressed by Agamben soon after the advent of the 'pandemic' in Italy (2020; see also Mercola & Cummins, 2021):

What is worrisome is not so much or not only the present, but what comes after. Just as wars have left as a legacy to peace a series of inauspicious technologies, from barbed wire to nuclear power plants, so it is also very likely that one will seek to continue even after the health emergency experiments that governments did not manage to bring to reality before: closing universities and schools and doing lessons only online, putting a stop once and for all to meeting together and speaking for political or cultural reasons and exchanging only digital messages with each other, wherever possible substituting machines for every contact—every contagion—between human beings. (para. 4)

It is redundant to elaborate on these possibilities; suffice to acknowledge Agamben's point about ordinary humans being viewed as 'contagious' in a multivocal sense by the perpetrators of the current global *coup d'état*. In light of what has gone before it should be abundantly clear that, if humans want to retain their *bios*—their inalienable rights to live a political and cultural life—and not allow themselves to be forced (by the sinister forces discussed earlier) to descend to mere *zoē* or 'bare life', *they will have no choice but to gather the courage to resist in any viable manner*. As Deleuze remarked (1992, p. 4): 'There is no need to fear or hope, but only to look for new weapons'.

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PEER-REVIEWED ARTICLE

Unsettling the ‘master’s house’: A critical account and reflections on developing a clinical psychology anti-racism strategy

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ABSTRACT

Psychology and psychotherapy have long been regarded as a Eurocentric and largely homogenous field primarily dominated by white, socioeconomically privileged/middle-class women. This lack of racial/ethnic diversity and inclusion within the field has become an area of increased focus of discussion within psychological professions due to its significant impact on the care, experience, and outcomes of service users. Individuals from racially minoritised backgrounds face multiple systemic barriers when accessing the profession during their training and as qualified psychological professionals. Extensive research indicates that clinical psychologists from racially minoritised backgrounds experience racism in clinical psychology and this has persisted over the years. Similarly, in the psychotherapy literature, there has been an emphasis on addressing the lack of acknowledgement of racial disparities in psychotherapy training. As a result, it feels imperative that there is a radical shift in psychology and psychotherapy which involves acknowledging its role in creating and perpetuating racism and discrimination, as well as an urgent need to adopt a decolonised, socio-constructionist approach.

Despite this, there has been little focus or momentum on clinical psychology training programmes to actively address issues of racism and to develop anti-racist practice. The Newcastle University Clinical Psychology Doctorate Programme recently made an active stance to adopt anti-racist practice and implement an approach that supports collective responsibility and accountability. In this article, the authors engage in a critical, radical, and collective dialogue around their experiences, and share their reflections on developing a clinical psychology anti-racism strategy, attending to power, discomfort, and the role of

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systemic oppression. The diverse voices of trainers, trainees, and aspiring clinical psychologists presented suggest that collective action, solidarity, as well as attending to power and relationality, had a profound impact on the development of the anti-racism strategy, as well as on relationships, trust, and relational safety. The authors offer critical reflections on how these experiences can be helpful in further understanding the complexity and multi-faceted nature of anti-racist praxis in clinical psychology and psychotherapy.

KEYWORDS: clinical psychology; racism; anti-racism; narratives; whiteness

INTRODUCTION

Psychology and psychotherapy have long been regarded as a Eurocentric and largely homogenous field primarily dominated by white, socioeconomically privileged/middle-class women (Holland, 2018; Wood and Patel, 2017). This lack of racial/ethnic diversity and inclusion within the field has become an area of increased focus of discussion within the profession (Ahsan, 2020). This may be attributable to the rise in global consciousness following the increased prominence of the Black Lives Matter movement, following the murder of George Floyd in 2020 (Basset, 2022). Further, the enactment of a slave auction at the 2019 Annual Group of Trainers in Clinical Psychology Conference (and the field's poor/inadequate responses to the criticisms following this; Patel et al., 2020) may also have served as an impetus to evoke reflections and discussions regarding racism, diversity, and inclusion within the context of psychology and psychotherapy.

Racism is broadly defined as a 'system of power unevenly distributed along racial lines, resulting in the oppression of minority groups' (Harrell et al., 2011, p. 144), and is perpetrated at inter-personal, cultural, and structural levels. The impact of racism permeates several facets/layers/aspects of psychology and psychotherapy, resulting in particularly negative experiences/consequences for aspiring, trainee, and qualified psychological practitioners, and service-users from racially minoritised backgrounds (Patel et al., 2020).

The 'wicked' problem of racism in clinical psychology

The existence of racism is well documented across all psychological professions, including psychotherapy (Charura & Lago, 2021). However, in clinical psychology there is significant evidence that individuals from racially minoritised backgrounds face multiple systemic barriers when accessing the profession, such as being less likely to be shortlisted for interviews for training programmes or being unable to access the required professional and

academic experience (Atayero & Dodzro, 2021; Bawa et al., 2019; Turpin & Coleman, 2010). As a result, individuals from racially minoritised backgrounds are under-represented within the psychological professions workforce; however, these individuals are over-represented within the service user population, particularly in inpatient, secure, forensic, and crisis services. In addition, racially minoritised trainee clinical psychologists and qualified clinical psychologists have shared poor experiences of the profession and both direct/indirect racism and micro-aggressions (Adetimole et al., 2005; Ragavan, 2018).

The clinical psychology workforce has long been criticised for being starkly unrepresentative of the general population in the United Kingdom (Davenhill et al., 1989), which is argued to contribute to and perpetuate racism within the profession, and impacts the quality of care and treatment offered to individuals from marginalised and disadvantaged communities (Alhusen et al., 2016; Sorkin et al., 2010). For example, there is a large body of evidence highlighting racial disparities in the use of detention, restraint, and seclusion in mental health services for both adults and children from racially minoritised backgrounds (Bhui et al., 2003; Farooq et al., 2021; Vidal et al., 2020).

In addition, taking an intersectional lens on racial and ethnic discrimination and disparities can yield further evidence of the complicated and complex relationship between identity and outcomes/experience of psychological professions and mental health care. There is a lack of research taking an intersectional lens in the context of psychological professions; however, there is some evidence to suggest that experience and outcomes in mental health services are influenced by racial and ethnic identity, socioeconomic status, gender, sexuality, religion, nationality, and ability (Bowleg et al., 2003; Opara et al., 2020). The multiple domains of lived experience and identity often lead to complex forms of exclusion and marginalisation (Lorde, 1984); for example, racially minoritised women from a working-class background who are living with a disability are likely to be subject to the cumulative effect of occupying multiple disadvantaged identities. It feels imperative to understand, explore, and interrogate intersectional privilege, oppression, and discrimination in psychological professions to fully understand the 'wicked' problem of racism (Came & Griffith, 2018) in the profession.

THE CONTEXT

In 2020, Health Education England announced the provision of additional funding for clinical psychology training programmes to tackle and address issues around racial inequality in the profession. This funding enabled training programmes to develop and deliver mentoring schemes for aspiring clinical psychologists from racially minoritised backgrounds, as well as a number of other key indicators such as reviewing the curriculum, teaching, training, and selection processes. Although many training programmes chose to deliver these 'key performance indicators' by creating a time-limited, temporary 'Equality, Diversity, and

Inclusion (EDI) role'. The Newcastle Clinical Psychology Training Programme strongly felt that creating an 'Anti-Racism Lead' role would be more aligned to their values, in line with the evidenced racial disparities in the profession as well as inclusive of an intersectional perspective. As part of this work, a collaborative discussion was held with trainee and aspiring clinical psychologists from a racially minoritised background who suggested that the development of a co-produced anti-racism strategy may also be helpful. This strategy would account for the processes that the Newcastle Clinical Psychology Doctorate Programme would be engaging in and embedding to move towards becoming anti-racist. The strategy would also highlight how the programme would be taking a whole system approach to tackling racism, including in teaching, in selection, on placements, as well as interrogating themselves as a programme team. The anti-racism strategy would be considering the intersectional nature of privilege, oppression, and discrimination. Although there have been some international anti-racist efforts in psychology, such as the development of anti-racist audit tools to evaluate journals (Buchanan et al., 2021), there has been very little development and movement in the profession in the United Kingdom.

This article provides a reflective dialogue that the four authors engaged in on their experience of co-developing the anti-racism strategy. We chose to provide a dialogue of us reflexively wrestling and grappling with the process because we believe that racism creates, maintains, produces, reproduces, and justifies a particular narrative; for example, what anti-racist practice is, what it should feel like, and how it is enacted. One of the master narratives may be that the solution to addressing racism is simply the development of 'EDI strategies' (Ahsan, 2022), without any emphasis on the narratives of individuals engaged in this work, the challenges they experience, and how they navigate/survive this. This leads to the privileging of 'majoritarian' stories which are rooted in the legacy of racial privilege (Solórzano & Yosso, 2002).

Drawing on critical race theory and methodology, our collective dialogue and narratives are offered as counter-stories which are grounded in the experiences, knowledge(s), and voices of individuals from racially minoritised backgrounds. The aim of offering these counter-stories was to foreground race and racism, challenge the 'traditional' research paradigms used to explore the experiences of racially minoritised individuals engaged in anti-racist praxis, and to use more liberatory approaches to explore the strengths of individuals from racially minoritised backgrounds engaged in this work (Solórzano & Yosso, 2002). We begin by sharing who we are, our intersections of difference and similarity, and our positionality. We then go on to talk together about our individual and collective experiences of developing the anti-racism strategy, what was evoked in us, and how we navigated our relationships and the intersections of power, privilege, oppression, and difference.

WHO ARE WE?

We are three women from a racially minoritised background and one woman who identifies as white. We are at different stages in our journey in clinical psychology, with differing levels of experience and training. Geographically, we are all living in the North of England, although our life histories have consisted of migration and movement across geographical boundaries and nationalities. Some of us also have a history of displacement and disruption. We are all passionate about social justice and social empowerment. Despite our intersectional differences in age, race, ethnicity, education, religion, class, and professional trajectory, our personal and professional journey has been one shaped by social injustice, privilege, and discrimination, which has undoubtedly influenced our practice and our narratives. We are aware that through the process of writing this article that we may have chosen to make visible or invisible parts of our identities, and this is connected to perhaps our own relationship with different aspects of our identities. However, more importantly, from an anti-racist perspective, we believe that women from racially minoritised backgrounds should have autonomy and control over their narratives and their identities, including what they choose to make visible or remain invisible.

Olayinka (Yinka) Oladokun: I am a Black Nigerian heterosexual cisgender woman; born in England and raised in Ireland. I am presently in my final year of training on the Newcastle University Doctorate in Clinical Psychology. I am a qualified psychological wellbeing practitioner and have experience, within and outside of this role, working with individuals across the lifespan with a variety of psychological presentations, in the National Health Service (NHS)/statutory and third sector settings. I have also been involved in the development of outreach programmes to increase mental health awareness and community engagement for individuals and communities from a range of backgrounds, i.e., adults with forensic histories, children/young people at risk and in care, minoritised ethnic groups, and low-socioeconomic backgrounds.

Rawan Al-Mujaini: I am a heterosexual cisgender woman from an Arab, Muslim background and I am currently in my third year of training on the Newcastle University Doctorate of Clinical Psychology. I have a range of experience working with minoritised individuals that come from varied socioeconomic backgrounds experiencing mental health difficulties, risk, and vulnerability both within and outside of an NHS context. I also have previous voluntary experience of raising mental health awareness, increasing access to care, and reducing social stigma for individuals from minoritised socioeconomic backgrounds.

Chelsea Addy: I am a white, British, heterosexual cisgender woman from a predominantly white working-class background, and I am in my first year of clinical psychology training at Newcastle University. I have previous experiences of working with adults in the community who have experienced mental health distress within a socio-political context of poverty and financial crisis. I also have experience of working as an assistant psychologist in the NHS in the

Children and Young People's Secure Estate with children and young people victim to exploitation and modern-day slavery. More recently, I have worked as a research assistant with the Newcastle Clinical Psychology Doctorate Programme on their anti-racist initiatives and developments on the programme.

Romana Farooq: I am a heterosexual cisgender woman from a racially minoritised background, a Kashmiri and a Muslim who works clinically with survivors of human rights-based violations, gender-based violence, and sexual violence within the National Health Service. I have worked with children, young people, and their families who have been subject to sexual violence, exploitation, trafficking, and modern-day slavery both in the statutory and voluntary sector. I have worked with grassroots communities and community leaders to co-develop services and to support them in influencing existing service provision. I have significant experience of working with children and young people who present with high risk, high harm, and high vulnerability in the community, as well as those who have been deprived of their liberty in secure and locked settings such as the Children and Young People Secure Estate. I am currently a consultant clinical psychologist in a Tier 4 inpatient CAMHS (Child and Adolescent Mental Health Services) service as well as academic director for the Newcastle Clinical Psychology Doctoral Programme.

A DIALOGUE ON CREATING AN ANTI-RACISM STRATEGY

Romana: I guess when we set off on this journey to develop this anti-racism strategy, we weren't quite sure what the process would be like. And I know I in particular was really keen that the process of developing the strategy was as important, respectful, and anti-racist as the end goal. I also became very interested in your decisions to be involved in the development of the strategy, the different positions that you occupied, and how it felt working together.

Chelsea: So, I suppose thinking about the position that I occupy, I grew up in a really small working-class town, which was, I would say, 98% predominantly white. And so, I suppose when I'm thinking about my upbringing and my time in school, through primary school and even secondary school, I was always in the majority group. And I suppose for me, that continued when I moved up to Newcastle; we know that Newcastle is a predominantly white area too. It was the same in my undergrad and through my master's, it was the exact same, it was all majority white. So, I had the privilege of never really having to think about what it meant to be other than white. Perhaps I only really knew whiteness, but at the same time didn't know it at all.

Yinka: That's really interesting; I would say my experience is probably the complete opposite of yours, Chelsea. I'm Black African, but I grew up in a really rural area in Ireland which was 99% white. I was naturally part of the minority group there, and with that comes the

experience of being othered quite regularly. So, from a really young age, I think I became hyper-aware of what racism was and what difference was, because of my experiences. I do recognise the relative privilege I possess as a heterosexual, cisgender woman; however, my experiences of discrimination have also been compounded by my intersecting identities as a Black woman, resulting in experiences of misogynoir (the combined effects of bias rooted in sexism and anti-Blackness). So, anti-racist practice with a focus on intersectionality is something that's always been at the forefront of my mind and is what I'm most passionate about as well.

Rawan: Thank you both for sharing that. I think I share similar experiences with both of you, just differently. I moved a lot throughout my childhood, between different countries, and I have different experiences with being within the minority and then being within the majority. While being within the majority, I didn't feel that difference as much. I didn't feel like an outsider, it wasn't as obvious to me, and I didn't have to think about how I benefitted which I didn't realise was a privilege at the time. But when I was positioned as a minority or when I identified as a minority, it really hit me, especially as a child. In terms of what differences those experiences mean and how they affected me, I find that they affect all the things that I can do or some of the things that I'm able to access as part of that minority status and then having that complete opposite as a comparison of being a majority in some settings, if that makes sense? I think after moving to Newcastle, I went back to being a minority rather than the majority, so I'm still trying to explore the effects this has on me and the effects on the position that I hold not just within my career but also within my personal life at the moment.

Romana: For me I became politicised and aware of my difference and the intersections of my identity at a very young age—I distinctly remember being a child and witnessing the violence and riots across the Pennines which were fuelled by racial hostility, othering, and indifference. Having witnessed the hurt and pain of racism, I became passionate and interested in justice and equity, but in particular the need for racially just approaches. I came to the anti-racism strategy with hopes to do something different, whilst recognising that systems are pernicious, and racism is deeply entrenched in institutional structures.

Chelsea: And I suppose it's quite interesting, isn't it? Because we came together to develop this anti-racism strategy all having had really different experiences. And I don't think we've really thought about that much until we came to the end, and we were asked to present at the Equity and Social Justice in Mental Health Conference in Newcastle. And I think for me, the importance of being involved is that I really wanted to be part of that responsibility, I wanted to be responsible and accountable to my colleagues from a racially minoritised background in terms of taking responsibility to do this work, but without taking over. I think I've been sat thinking for a while, but more so as I've got further in my psychology career, but thinking more about well, if I don't sit and reflect on myself, like my journey, my relationship with my whiteness, or the kind of power and privilege that I have because of that, what could I continue to perpetuate in psychology, or in wider society? And I thought, actually, when the

opportunity of developing an anti-racism strategy came about, that was something that I definitely wanted to be involved in. I think from my experience, and from what I've seen, is that often these types of developments or initiatives can be left to those in racially minoritised positions, whereas actually I don't think that's ever going work. It needs to be that kind of collective response. And I think that's why we have worked quite well together. I don't know what you think about that?

Yinka: I agree, and I think there are many strengths in the differences that we have, because we are from different ethnicities and different racial and cultural backgrounds. I think that's really helped for us to have like a broad understanding and perspective of how the strategy should be approached and developed. For me, experiencing discrimination and racism can make you feel quite helpless, especially when you experience it within the system of clinical psychology. And so, for me, I think I felt really drawn to working on the strategy because it was an opportunity to have some power, in terms of making change and having an influence on the system so that those who are coming after us might not have the same experiences that we've had, in terms of discrimination and racism.

Rawan: I agree with that as well. I think it kind of made us sit, reflect, and question why these barriers exist, where they fall, and how we can start breaking them down together. Because it's easy to feel helpless, and sometimes it's hard to take that first step to doing something about it. And it can be as small as just acknowledging that it exists. Pulling together this strategy has been such a journey with different layers involved, because we didn't think it would come together to be as big as it is now, we thought it would be a small project that we were just working on and gathering ideas for, things that could be done within a small-scale context, and then it can be developed into some form of strategy. And throughout that journey, we felt a shift in our different positions in terms of how we relate to our experiences of racism, how we relate to engaging with diversity and inclusion and maybe in terms of leadership as well. When we first started pulling the strategy together, we didn't realise how empowering some of this work can be, and I guess it changed the way we engage in leadership, as the process of doing this work can be viewed from a leadership lens even though we might not necessarily see it that way.

Yinka: Yeah. I think there's definitely something about the fact that leadership is often viewed as something that's tied to a particular position, so people can often think you can only be a leader if you're in a really high position within the system. But the fact that Romana has extended, shed, and shared this power with us really enabled us to walk in and take ownership of this. That sharing of power meant that I was able to see myself as a trainee and a racially minoritised individual as having leadership qualities and this is something I am going to take away for when I am a supervisor and clinical psychologist. I think this process has really highlighted to me that it's not just the responsibility of people who are higher up in the chain, but that power should be shared with those who are less privileged and have less power within the system. At the same time, it's not about placing the responsibility to bring about

the change with the individuals who have access to the least amount of power, but during this process giving them access to those resources too. So, I think the process has really just given me the boldness that I didn't have before; to be more vocal and bolder about addressing racism as and when I see it within the workplace.

Romana: I guess I'm really struck by your experiences as throughout this process I've been aware of my structural power as a member of the programme team but also as a qualified clinical psychologist, and how that may influence your relationship with me and the process. Perhaps I am more open to shedding my power due to my own experiences of systems of oppression and discrimination; I guess if you've always been privileged in these systems, you wouldn't understand how profound shedding power is. I've also been aware of how doing this work can be challenging and emotionally triggering for individuals from a racially minoritised background. My own experiences have consisted of micro- and macro-aggressions from individuals in the system, such as placing profound responsibility on a racially minoritised individual to fix a racist system and then being critical, obstructive, and hostile towards them. This isn't unusual and is indicative of how racially minoritised women are positioned in institutions when they engage in anti-racist practice, but also how power, privilege, and whiteness operate in clinical psychology. It's fascinating to see how others react when you attempt to just unsettle the 'master's house'. I came to realise that the defensiveness and hostility said more about others and how wedded they were to racism and whiteness than it did about me or anti-racist praxis. I guess, Chelsea, this work can be challenging for white individuals too but perhaps in a slightly different way?

Chelsea: I think that's a really interesting thing for us to think about, as the challenges that I face doing anti-racist work as a white woman I imagine are starkly different. For me, an initial challenge, or should I say moment of discomfort, was really taking the time to reflect on and interrogate my whiteness, power, and privilege and I suppose the feelings of guilt and shame that comes with that when thinking about how I lived a part of my life not considering these things. However, I quickly realised that this discomfort that I was experiencing was really important and now the reason why I want to continue in this anti-racist journey. I also think that's when it clicked for me, about why we can see so much push back and defensiveness from white individuals when attempting to implement this work, which makes me think about this more widely in the context of clinical psychology as a field too. Another initial challenge for me was when I was considering whether I was the right person to be involved in developing Newcastle's anti-racism strategy and I was left with confusions around wanting to take responsibility and accountability and use some of my power, being white in psychology, but also not wanting to jump into white saviourism. I think even now after we've developed the strategy, these confusions are on my mind and I'm always trying to take the time to reason with them.

Rawan: I think I would relate with some of the points you make Chelsea, especially with the idea that this work increased our awareness of the importance of allowing ourselves to sit

with some of that discomfort. I guess that discomfort can also look different for different individuals whether they identify as being from racially minoritised backgrounds or not. For me personally, I initially felt that I wasn't entitled to speak up and contribute to making these changes as from my perspective; I had no official form of power to enable these changes to happen. Upon reflection, it also made me realise that being given the voice to speak up about some of the disparities in the profession was something I wouldn't previously engage in, as I worried that I might be perceived as trying to create a 'problem' or be 'problematic' as a racially minoritised individual rather than just getting on with things. It made me reflect on different adjustments I put in for myself to avoid sitting with that discomfort. For example, I would ask myself questions such as: should I put in extra work in a team to make up for the fact that I don't feel like I fit in? Do I have to be nicer to clients/allow myself to be more flexible to their needs to be less of a barrier? And similar thought processes that followed through, which made me realise that if I faced any difficulties as a trainee, I would have a tendency to overlook it, to steer away from the idea that I was trying to be 'problematic'. I guess on a wider scale, it was challenging to become more aware of the power dynamics and social differences both within the context of the profession, and of our roles as trainees for individuals seeking help. Despite that, we were still able to use some of those uncomfortable feelings to help us collate different steps that we can put in place to name these disparities, and to help give other trainees and aspiring psychologists a voice to start to tackle some of these barriers as well.

Yinka: Your points really strike a chord with me, Rawan. For me, the feelings of discomfort I have experienced were primarily related to anger and frustration towards the system. In conducting the background research for the strategy, I felt angered by the amount of research that has highlighted disappointingly consistent findings regarding the issue of racism in the field for several decades. Yet, there has been very little change observed in the system; attempts to disrupt oppressive practices and structures are often met with denial and resistance. This has made me question how willing the field is to allow, facilitate, and pursue change in this area, and perhaps may shed light on why there is still so much more work to be done in shaping clinical psychology into an anti-racist profession. Personally, I have also grappled with how much of my personal-self I can integrate with my professional-self and, indeed, how much of my personal-self is welcomed/invited in the world of clinical psychology. This fear/challenge has been substantiated by experiences of being 'othered' in professional contexts, due to my race and ethnicity. I found it maddening/frustrating/infuriating that the system has been designed in a way that often causes those from minoritised ethnic backgrounds to acquiesce to orphaning or minimising parts of their personal differences/identities to be perceived as more acceptable, professional, and feel more part of the homogenous group. And, congruous with our experiences, Rawan, this often manifests in us trying to compensate for the differences we present with, often shrinking ourselves to make others more comfortable or minimise the risk of experiencing discrimination and harm from others. This led me to reflect on the recent initiatives that have been introduced with

the aim of increasing diversity within the field. Although it is promising to see this commitment, engaging in this project and being privileged to hear the stories of those from minoritised backgrounds has highlighted a dire need for attention to be paid to the environments that trainees are being invited into. This commitment to increasing representation must equally be matched with a deeper commitment to go beyond simply acknowledging that the problem exists, but also examining, challenging, unsettling, and dismantling the oppressive structures that maintain and perpetuate the issue of racism in clinical psychology. Romana has modelled how those in positions of hierarchical leadership can use their structural power to empower others and collaborate with them to create meaningful change. With this in mind, I have found the process of developing the strategy to be hugely empowering. It has catalysed my passion and determination to take action, evoking a sense of resistance and a renewed commitment to take part in disrupting and dismantling the patterns and systems of oppression within the field.

CONCLUSIONS

In the field of clinical psychology, neuropsychology, and psychotherapy there is a call to level the playing field and address issues of colonisation, racism, and white privilege (Abbas & Farooq, 2022). However, there has been little focus and exploration of the challenges and impact of doing anti-racist praxis, and anti-racism in clinical psychology and psychotherapy. In particular, there has been little written about the experience of individuals engaged in this work, their intentions and hopes, and an analysis of their voices, narratives, and stories. The process of talking together about our lived experiences of co-creating the anti-racism strategy enabled multiple stories, experiences, and complexities to emerge. It also allowed our intentions and hopes for engaging in anti-racist praxis to become transparent to ourselves, to each other, and to others. It is vital that individuals engaged in anti-racist practice interrogate, explore, and make transparent their motives and intentions for engaging in this work and how it may influence their practice (Case, 2012).

Furthermore, although there have been calls to unsettle 'Western' thinking and 'dismantle the master's house' (Lorde, 1984), reflecting the Eurocentric, white Western models, ideas, and practices perpetuated in clinical psychology and psychotherapy (Wood & Patel, 2017), there remains more to be done to explore and analyse what happens when anti-racist praxis is introduced and the shifting emotions, tensions, and beliefs. Clinical psychology and psychotherapy are embedded and entangled in colonial relations of power and privilege that reinforce Western/white culture as the norm, and unsettling this is easier said than done (Abbas & Farooq, 2022; Cullen et al., 2020). Engaging in anti-racist practice can be evoking, challenging, and confronting for different reasons for different people (Zembylas, 2012). However, the dialogue that emerged between us highlighted the critical tensions and emotions that individuals from a racially minoritised background experience when engaging

in racial equity work and how this is different to the tensions and emotions that individuals who identify as white may experience. In spite of this, through the process of collectively co-creating the strategy we were able to harness the power of solidarity, shared responsibility, and accountability (Came & Griffith, 2018). The work to re-address the balance of power and racial inequalities is not the sole responsibility of individuals from a racially minoritised background, but equally, individuals who identify as white also do not hold all the answers. The emotional toll of anti-racist work highlights the importance of this burden being shared collectively and institutionally. Talking together about our tensions and emotions helped us to identify our sites of struggle and discomfort, including its effects on us personally and professionally.

One of the biggest ethical dilemmas when engaging in anti-racist praxis is the use of power, working with power, and taking power seriously in the process of doing this work (Wagner, 2005). A prominent theme across our reflections pertains to how emboldening and empowering it is to have structural power shared across different roles and positions. This work was made possible due to individuals in a position of power and seniority shedding and sharing their structural power and those currently positioned as trainees taking up the power and being supported. However, this is often not the case in clinical psychology and psychotherapy; those in positions of power struggle to let go of it whilst expecting individuals with limited power to be responsible for change and transformation. This is evident in the time-limited funding that was provided to clinical psychology programmes to recruit 'EDI leads' to address racial inequality; these positions were often taken up by individuals from racially minoritised backgrounds who were then afforded very little structural power to bring about change. Yet, anecdotal stories highlight that these individuals were subject to complex tensions, hostility, and micro/macro-aggressions.

Furthermore, true anti-racist praxis requires safe, trusting, and psychologically/relationally safe contexts for meaningful work to be facilitated (Patel, 2022). We were able to challenge each other, hold each other to account, and confront each other during the process of co-creating the anti-racism strategy because we felt relationally and psychologically safe. This again would not have been possible if we were working in a system that was not psychologically or relationally safe. The process of developing the strategy has emphasised the central importance of environments/contexts/systems characterised by mutual trust and psychological/relational safety, as well as the necessity for collaborative co-production between trainees and programme staff.

Through the process of sharing our narrative and dialogue on co-creating the anti-racism strategy we hope to amplify that this process is complex, complicated, and multi-faceted. Our hopes are that this dialogue enables others to see how this process can be meaningfully and sensitively facilitated/supported in the context of psychological and relational safety. In addition, we hope that clinical psychology and psychotherapy training programmes begin to attend to the workings of power and how power may influence anti-racist praxis. We

recognise that for this to happen, those in positions of power must begin to confront and interrogate their own positions and privilege, in order to create space for change to occur. It remains to be seen how willing and committed clinical psychology is to truly begin to recognise and shed its power.

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PEER-REVIEWED ARTICLE

Ethnic identity and wellbeing in the lives of third-generation British Bangladeshi adults: Finding a ‘sense of belonging’

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ABSTRACT

This study investigated third generation Bangladeshi adults’ experiences of ethnic identity (EI) and sense of wellbeing. British citizens from racially minoritised backgrounds, such as British Bangladeshis, face numerous challenges related to cultural adjustment, discrimination, and exclusion that can impact wellbeing. Strong EI has been shown to increase psychological wellbeing in minority ethnic populations. Fifteen participants who identified as third-generation British Bangladeshi adults were engaged in semi-structured interviews to explore their experiences of EI and wellbeing. Thematic analysis of the data conceptualised three main themes, namely, ‘*Oh my God, I’m different*’: *Being made to feel like an outsider in Britain*; ‘*You’re a coconut*’: *Being made to feel like an outsider within the British Bangladeshi community*; and ‘*A proper sense of belonging*’ through ethnic identity. The findings point towards the role that EI can play in later generation immigrants’ sense of self and wellbeing. Implications are discussed.

KEYWORDS: British Bangladeshi; ethnic identity; culture; mental health and wellbeing; discrimination; Islamophobia

INTRODUCTION

The 2011 United Kingdom (UK) Census documented nearly half a million citizens of Bangladeshi origin living in the UK, with 50 percent living in London (Office for National Statistics, 2011). Bangladeshis were reported to have migrated to Britain from as early as the end of the 18th century, as seamen on merchant ships, encouraged to do so under the rule of the East India Trading Company and the British Empire. Ninety-five percent of the British Bangladeshi population originate from a region in the north-east of what is now Bangladesh, called Sylhet (Ullah & Eversley, 2010). The vast majority identify as Muslim, although there are also Christian, Hindu, and atheist Bangladeshis, among others. Given that the majority of settlers arrived during the 1960s and 1970s, the current adult population can be thought of as the ‘third generation’.

In recent years, the British citizenship of immigrants and their British-born children has come under renewed threat. Specific government policies have contributed to a more hostile context for immigrants. The *Immigration Act*, passed by the UK parliament in 2014, has been criticised for creating two tiers of British citizenship: those who are unavoidably British through birth and heritage; and those who can be lawfully targeted for their non-British ancestry (Galey, 2019), reinforcing insecurity regarding British identity. Furthermore, the UK counter-terrorism strategy, titled Prevent (Home Office, 2018), which gives public sector organisations like schools and the National Health Service (NHS) a statutory duty to identify and stop radicalisation and terrorism, has been widely criticised and has left the British Muslim community feeling marginalised, targeted, stereotyped, and treated unfairly (Goodfellow, 2018).

Beyond these policy level developments, wider societal factors also impact on immigrant groups. In particular, within the UK context, ‘integration’ and ‘acculturation’ have been idealised as both socially and psychologically desirable and beneficial, providing the underlying assumption that responsibility for taking on the host culture lies solely with the migrant community, and removing ‘responsibility for multicultural relations from wider, collectively driven, socio-political forces’ (Bowskill et al., 2007, p. 795). Furthermore, a move towards far-right nationalism and anti-immigrant rhetoric in the UK, as in many Western countries, has intensified in recent years and at times become a particularly toxic discourse (Galey, 2019). A specific concern impacting the British Bangladeshi community is Islamophobia, given the connections between Bangladeshi and Islamic identities (Hoque, 2018). The monitoring group Tell MAMA (2017) reported a 26 percent year-on-year rise in the number of anti-Muslim attacks and incidents of abuse reported, with women disproportionately targeted. Williams (2017) described Black Muslim women as particularly vulnerable to a ‘triple threat’ due to intersections of being female, from an ethnic minority, and visibly Muslim. Research has continuously highlighted the serious negative effects of discrimination on wellbeing across generations and cultural groups (e.g., Arbona & Jimenez, 2014; Cheng et al., 2015).

Therefore, developing ethnic minority populations, such as British Bangladeshis, are at risk from a complex, largely undocumented negotiation of identities and stressors related to cultural adjustment in Britain, which significantly impact these groups and can potentially impact wellbeing and lead to mental health concerns, both for new immigrants and later generations (e.g., Kulis et al., 2007; Ying & Han, 2007). A number of specific challenges have been identified in the literature. Firstly, these groups encounter challenges related to their ethnic identity in relation to acculturation and belonging (Hoque, 2018). Secondly, many Muslims in Britain regularly experience forms of discrimination, and Islamophobia in particular, which can have an impact on their psychological wellbeing (Jasperse et al., 2012) and self-esteem (Every & Perry, 2014); and can lead to depressive symptoms and negative affect (Nadal et al., 2014), and a damaging increased vigilance and anxiety (Rippy & Newman, 2006; Willen, 2007). Thirdly, despite potentially experiencing mental health challenges in relation to experiences of migration and adjustment, this population are reported to be underserved by current mental health services in the UK (Bowl, 2007).

Research has also identified that ethnic identity (EI) could mitigate and protect against some of these negative factors. EI refers to the extent to which an individual identifies with their cultural group (Phinney, 2000), incorporating 'race', histories of migration, and cultural practices. The term 'ethnic' has evolved from purely biological and genetic characteristics to more socially constructed meanings (Helms & Talleyrand, 1997), which include aspects such as shared language, national origin, heritage, and a sense of belonging (Singh, 1977; Ting-Toomey, 1981). Phinney (1992) argues that EI is a personal and relational experience that can grow and fluctuate in response to contextual factors.

Numerous research studies, predominantly based within the United States, have repeatedly pointed to a positive association between high EI and positive wellbeing across ethnic groups, including positive psychological and socio-cultural adjustment, (e.g., Burnett-Zeigler et al., 2013; Smith & Silva, 2011; Umaña-Taylor, 2011), the development of positive self-perceptions (French et al., 2006), and increased self-esteem (Umaña-Taylor, 2004). Furthermore, a growing body of research has demonstrated that strong EI can be a buffer against the negative effects of racism and discrimination (Pascoe & Smart Richman, 2009). One explanation for this might be that a positive shared social identity can provide a sense of belonging and social support, in line with social identity theory (Tajfel, 1981), which holds that individuals' self-concepts are enhanced through group membership.

However, some studies have pointed to the potential negative effects of increased EI and discussed its double-edged implications. It has been argued that the development of EI can be distressing and unsettling, especially for immigrant children, because ethnic, religious, and national identities often result in conflicting values and behaviours (Birman, 1998). EI has been shown to also increase vulnerability to discrimination as people may become more sensitive to threats to their aligned groups (Greene et al., 2006). A meta-analysis investigating the impact of EI, discrimination, and impact on wellbeing demonstrated both the advantages

and disadvantages of EI (Pascoe & Smart Richman, 2009). These diverse findings may be related to the differences in study design and participant groups between studies (e.g., age, gender, ethnicity, measures, and social context). A limitation of this body of research was that researchers often used narrow definitions of EI (e.g., choice of clothing or ethnicity of friends) and of wellbeing (often referring to specific mental health diagnoses only).

A challenge for considering the literature on EI in relation to the British Bangladeshi population in particular is that this community have traditionally been grouped together with others in categories such as 'Asian', and more recently 'South Asian', within research studies. This is problematic, as there is significant religious, cultural, and other diversity within those described as 'Asian'/'South Asian'. At the time of our research, we found only seven studies that explicitly investigated the experiences of EI in relation to the British Bangladeshi population (Bhui et al., 2008; Eade, 1994; Franceschelli & O'Brien, 2015; Hoque, 2018; Kibria, 2008; Martin, 2010; Mand, 2010). The only study focusing on third-generation British Bangladeshi people was a qualitative study investigating the experiences of adolescents (Hoque, 2018) and no existing research was found relating to third-generation British Bangladeshis who were in their adulthood.

This small body of research highlighted the various ways in which individuals developed and maintained their Bangladeshi identity and the impact this potentially had on their wellbeing. For example, Eade (1994) described the British Bangladeshi population as continuously 'heart-searching' (p. 390), as they search for belonging within the British, Bangladeshi, and Islamic communities. Furthermore, the ways in which individuals from the British Bangladeshi population attempted to live in line with both their Bangladeshi, British, and Islamic identities, and the challenges this could pose to their wellbeing, was highlighted. There was also consensus across the studies that the British Bangladeshi population experience discrimination and marginalisation. In contrast, investing in strengthening an Islamic identity, mostly by later generations, was described as potentially facilitating a sense of belonging and acceptance (Franceschelli & O'Brien, 2015; Hoque, 2018).

METHOD

This study aimed to answer the following two main research questions, namely, how does a group of third-generation British Bangladeshis experience EI and how do they experience this to relate to their wellbeing? Ethical approval for the study was obtained from University of Hertfordshire Ethics Committee (aLMS/PGR/UH/03444(1)).

Prior to recruitment, research materials and the interview schedule were developed through consideration of the literature, followed by five pilot interviews (not included in the data), with each interviewee engaged in a reflective consultation about the study, design, materials, and interview questions and processes. Adjustments were made and debrief

materials were developed as the consultants highlighted the potential challenges of discussing racism and micro-aggressions.

Recruitment was through community connections of the first author with the London Bangladeshi community and through snowball sampling. Inclusion and exclusion criteria included that participants needed to: be 18 years or older; be born in the UK with at least one parent born in the UK or who came to the UK during childhood; have a family heritage from Bangladesh on both sides of the family; and identify as Sylheti British Bangladeshi. Participants were not included if they were experiencing significant mental health concerns at the time of recruitment. Fifteen participants, seven men and eight women, were recruited. Participants' ages ranged from 18 to 30 (mean = 24). All participants were either currently in higher education or educated to university level, with four having completed postgraduate studies. Professions included one teaching assistant, two teachers, two retail workers, two university students, three lawyers, a business owner, and two civil servants. Pseudonyms have been used to maintain confidentiality.

Semi-structured interviews were carried out, either face-to-face at a community centre in Central London or over the telephone, based on participant choice. The interviews lasted between 45 and 70 minutes. Interview questions included: 'What do you remember from being a child that you wouldn't have had if you weren't Bangladeshi?'; 'Which part of yourself if any would you say is Bangladeshi?'; 'What part of yourself is not Bangladeshi if any, or is something else?'; 'Do you remember any moments when you felt like you were different or treated differently because of your heritage?'; 'What helps you to feel good about yourself or is good for your wellbeing?'

Thematic analysis (TA) was employed to analyse the data following the six stages of analysis described by Braun and Clarke (2006). Coding was mainly completed by the first author, while other authors either independently coded a section of the data, or reviewed identified themes. The Critical Appraisal Skills Programme (CASP, 2018) was used as a quality framework for the study.

Throughout all stages of the research, it has been important for the research team to adopt a reflexive researcher position. The team consisted of British Bangladeshi, white British, and white immigrant researchers, with the primary researcher identifying as a Muslim British Bangladeshi woman. Sharing a racial identity with the study participants and showing racial awareness with participants has been shown to be potentially helpful and valuable in research (Vass, 2017). It has been suggested that 'coded' (Kanuha, 2000) communication can be enhanced due to the 'feelings of empathy and emotions which insiders share from knowing their subjects on a deep, subtle level' (Hayano, 1979, p. 101), helping to create a trusting relationship with the participants where their stories can be met with respect, validation, and understanding (Dwyer & Buckle, 2009). Bringing together insider and outsider researcher perspectives in reflective conversations supported the identification of biases, assumptions,

contradictions, and complexities. The primary researcher also made use of a reflective research diary.

RESULTS

Three main themes were constructed from the data. The first theme—*'Oh my God, I'm different': Being made to feel like an outsider in Britain*—described participant experiences of feeling alienated from and rejected by the dominant British culture into which they were born. The second theme—*'You're a coconut': Being made to feel like an outsider within the British Bangladeshi community*—described an experience of a lack of acceptance and belonging within their ethno-cultural communities. The third theme—*'A proper sense of belonging' through ethnic identity*—described how EI was formed for participants through connections with family and peers, and through learning about their cultural and religious heritage. These themes will now be discussed in more detail.

Theme 1: 'Oh my God, I'm different': Being made to feel like an outsider in Britain

Within this theme, nearly all participants described their experiences of feeling like an outsider while navigating public and professional spaces. For example, Haroon reported:

The first question they ask is, 'Where are you from?' And I'd say, 'I'm from London.' And then you can see them looking at you, like you haven't answered the question, it's not enough.

This started early in their lives, with a common experience reported by participants about their childhood being a sense of 'shame', 'embarrassment', and judgement about the Bangladeshi culture, which led to a strategy where 'you're one person at home and you're one person at school' (Bilal).

Furthermore, most participants, especially women observing hijab, provided vivid descriptions of experiences of overt racist abuse in public places. Although these experiences appeared common amongst participants, this did not seem to lessen the impact on participants' emotional wellbeing and sense of belonging. For example, Kolpona described an experience of asking for directions in Central London:

I asked about eight people in the space of an hour and four people shooed me physically with their hands... and two people racially abused me... called me effing terrorist... And that was the first time in ages, I was like, 'Oh my god, I'm different'... and it was just like a massive knock...

Whilst talking through an experience of being racially abused by a member of the public, Zahreen also highlighted the lack of response from others, and this seemed to add to her sense of isolation in this public place:

I was on a train... then this white man came, sat next to me... and then he was like, 'Oh, you should be ashamed of yourself, you're disgusting, you need to go hell...' Everyone was staring, no one on the train said anything. They were letting this man just abuse me.

At other times, being defined as different was more subtle, through assumptions, omissions, or misrepresentations. The overt stereotypes and assumptions seen in public discourse appeared in descriptions of professional environments. Roxana discussed her experience of having her religious beliefs addressed and linked to terrorism during a job interview:

So, for example, did an internship for two weeks, the partners loved me, they sent messages to HR, everything. And then when it came to my interview, they asked me questions like, 'So what do you think the issue with terrorism is? Do you think racism still exists? What's the solution to terrorism?'... I think it's very much because they saw me with a hijab, and they wanted to see if I'd be offended.

Some participants reported that they had withdrawn from spaces and activities because of discomfort. A sense of heightened consciousness and a lack of playfulness was experienced when they did choose to take part. Participants felt that these experiences impacted their sense of identity and belonging and had emotional consequences, leaving them feeling unwanted, homeless, and rootless.

Aayana: I actually had conversation with [a friend] the other day, like if anything happens and we get kicked out this country, where am I going to actually go? I need to make sure I have enough money to buy a villa in Spain or something [laughs].

Participants discussed times when they had responded to such experiences by 'pretending to be something I wasn't' (Kadeer) and discussed some of the emotional consequences of using this as a strategy. Many participants discussed experiences of pretending or performing as a survival strategy whilst navigating predominantly white spaces. This appears to be triggered by their beliefs about the negative societal narrative around being brown and lead to constant vigilance.

Salman: When I'm moving around white people, 100% I give the pressure a lot to myself too... So, I sort of feel like I have to give the right impression sometimes.

Kadeer: I am an outsider... I am brown. But I have to pretend to be white as much as I can... It was me pretending I'm white in order to get myself ahead. And I didn't realise how bad it was to do that... I spent a lot of time thinking about a lot of things in terms of trying to prove myself.

Some reported emotional struggles in response to these experiences. Kolpona talked about the anxiety of always watching one's behaviour and feeling worried about how being herself would be perceived:

I think, it felt a little bit like having some kind of split personality, where, at home, I can be relaxed and can completely be myself. But there are times, where I feel bit embarrassed ... Then being outside of the house just generally, it was just exhausting, pretending to be something

that I wasn't actually. Like, just constantly feeling alienated or probably even anxious being caught out, if I slipped up at all in try to keep up this façade.

Many participants discussed negative consequences of seeking approval from white people.

Haroon: Yeah, when you think of other people's approval (all) the time, so you never really truly going to be happy, never going to be confident with yourself, unless you accept yourself as a whole.

Some participants reported that they had considered accessing mental health services, but felt that clinicians' views may be unfairly shaped by stereotypes associated with the Bangladeshi and Muslim cultures, and were therefore deterred. Three participants did access mental health services, and all described having negative experiences. Clinicians having limited knowledge of the Bangladeshi culture appeared to be a significant barrier. For example, Kolpona shared her experience as a Muslim British Bangladeshi woman during an assessment with a white male psychiatrist. She appeared to refer to government policies such as the 'Prevent' initiative, stating:

He kept telling me to speak quite freely... I was sharing some of the things for the first time in like four years. And I was finding it very difficult to articulate and catch my breath because I was crying... I don't know if what I'm going to tell you is going to be used against me. I don't know if you're going to refer me on to some kind of counter-terrorism program... and to not share what's happened to me in fear of you referring me and me ending up in prison or worse... I'm suffering and I have been suffering for many, many years, but I suffered in silence...

All the participants who accessed support described feelings of rejection and perceived misunderstandings from the therapists that they had been working with over a period of time.

Madeeha: ...she was trying to reject some of the things that I was saying and was quite resistant to accept my reading of my experience, instead she was trying to call it something else, for example I would call it 'racism', and she would call it 'bullying'.

To summarise, within this theme many participants described their experiences of being positioned as different, including overt and covert racist abuse, unfair treatment, lack of access to opportunities and services, and lack of representation in both public and professional settings. This was felt to contribute to making them feel like an outsider in Britain. Many participants seemed to feel that they were being understood through the lens of problematic societal narratives that were associated with being non-white and Muslim, leading to increased vigilance and distress in social spaces. Although participants seemed to identify Britain as home, there was also an apparent feeling of being isolated, unwanted by Britain, and fearful of seeking professional help for mental health difficulties.

Theme 2: 'You're a coconut': Being made to feel like an outsider within the British Bangladeshi community

Within this theme, for many participants, there was a discussion about moments when it had felt difficult to find a sense of belonging within the British Bangladeshi community.

Madeeha: You're supposed to fit in, and these are like your people... But then the same for like when I hung out with family, I was the coconut, the too-white kid... I was seen as not as connected to brown... I was seen as the outsider... It is not nice; it is like you have less of a right to that heritage. You have less of a claim to it...

A term that many participants often came into contact with was 'coconut', which implied they looked Bangladeshi, but thought and behaved like their white counterparts.

Kolpona: The first thing I accomplished was being able to somewhat reduce the frequency of being called a coconut [laughs] which is what I've been called since I was back in primary school by my Bengali friends. They'd be like, 'You don't know Bangla, you're a coconut'.

Many participants described the challenges of moving between British Bangladeshi and majority white spaces.

Salman: I'm the only one [out of British Bangladeshi friends] that went to college and university, and I'm sort of the only one that's working like in a professional environment... my friends call me a white bird, because they think I speak so posh...

Some participants identified a specific inter-generational challenge, where the difficulties encountered during their day-to-day lives did not seem to be understood by the older generation: 'you try to explain and [they] can't relate' (Kolpona).

Whilst negotiating their multiple identities (the British, the Bangladeshi, and the Muslim), many participants described a sense of judgement from members of their community when engaging with perceived non-Muslim practices.

Roxana: [British Bangladeshi friends would say] 'Why would you do that? Why are you doing Christmas presents?'... like it's really difficult. I think we [the British Bangladeshi community... can be] very toxic as well. I've seen it, like I've had to cut people out of my life because they're just being so judgmental about what I'm doing.

Many participants described being made to feel like an outsider within the Bangladeshi community through conflicts between Bangladeshi and Islamic values and practices, especially where they felt more aligned with Islam.

Jasmin: In our culture, we [are] encouraged to marry a Bengali guy, but I wouldn't go for that, so I would say actually no, there's a massive spectrum of Muslims, we should be accepting anyone and everyone...

Fear of judgement or misunderstanding was sometimes linked to feelings of anxiety when meeting or communicating with members of the British Bangladeshi community.

Noor: They're [members of an online British Bangladeshi groups] level 10, they're level 20 and I'm level zero point one, level one [laughs]... I feel anxious fitting in with them, same way I feel anxious fitting in with the English people after work going to a pub.

Other challenges identified by a few participants include colourism, discriminating by skin-tone:

Haroon: I'm quite dark compared to other people I'd say and I was made to feel that I wasn't as attractive or desirable because of it...

Because of the judgement from within the British Bangladeshi community, some participants who had not previously accessed mental health services reported that they would prefer to be seen by someone outside of the Bangladeshi community. A common rationale appeared to be due to experiencing judgement:

Haroon: I think it's more difficult to talk to someone who's Bangladeshi. I feel like people judge within the culture more. So, it's easier to talk to strangers about your problems sometimes, like a therapist or someone. And the further away they are from you, the easier it would be.

In summary, in this theme many participants described their difficult experiences whilst trying to fit in with other British Bangladeshis. Some reflected on being stigmatised within the community for not being 'Bangladeshi enough'. Participants described experiences of racism within the community, usually from older generations, particularly in relation to colourism. Often, aligning with Islamic knowledge was used to create new norms and challenge the Bangladeshi cultural status quo. Prioritising Islamic values over Bangladeshi values appears to have been an important decision for many of the participants.

Theme 3: 'A proper sense of belonging' through ethnic identity

This theme captures participants' evolving sense of EI, reported as constantly moving and changing in response to many factors, and the connection many participants described between this and fostering a sense of belonging. This appears to be a way of responding to the many challenges (though not all) raised in the previous two themes. Participants described what seems to be a developmental experience where a desire to invest in the Bangladeshi identity seemed to be formed over time through experiences and milestones such as age, early education, university, marriage, family gatherings, and experiences of racism.

An understanding of Bangladeshi and Islamic heritages seemed to be a strategy for managing and challenging feelings of discrimination and negative stereotyping associated with the British Bangladeshi identity.

Madeeha: ...learning gave me the importance to like un-reject my culture and re-learn and reconnect with my family. Be more open to spending more time with people who look like me. And yeah, I might have felt rejected by them, but actually there is a lot I learnt from them...

The more they described feeling as though they must respond to dominant narratives, the more participants seemed to draw on their EI. This, in turn, appeared to improve their level of confidence when questioned about their culture.

Haroon: Like, the Western culture always sees themselves as the moral arbiter of everything... the scientific developments also say that eating with your hand is better for your immune system... But, before that, I had no argument for it, but they would say, 'Oh, you eat with your hands? Oh, that's disgusting'. And I would try to make excuses, or I wouldn't mention it, or I would shy away from it... it's made me more confident about who I am.

When it came to learning about the history of Bangladesh and Bangladeshi migration, many participants appeared to experience an extra layer of commitment towards their Bangladeshi identity through engagement, discussion, and a reconnection to their Bangladeshi culture.

Ebrahim: My paternal granddad came here, he was one of the first working in the factories and stuff like, rebuilding Britain. And my granddad was directly involved in building Bangladesh... So, I've got two histories right there and stories to tell to my grandkids... I come from a lot of history, that's why history, like knowing my roots... played a huge part in grasping my identity.

Some participants talked about drawing on the stories of their ancestors when they are experiencing difficulties too.

Chadiya: So, being able to persevere through a genocide, I still can't imagine, I don't think I'll ever be able to imagine, how that must have felt like, must have been much worse than any horrible situations that I've been put in. So, just having that constant reminder that, 'Oh, my ancestors have gone through a genocide and what am I doing here', is like sulking about something that's much smaller than genocide. I guess that would encourage me and motivate me to actually persevere through those struggles.

For some participants, the desire to invest in Islam could be viewed as an act of resistance against the societal perspectives Muslim women and communities are faced with. In understanding the value of her Islamic practice, it appeared that Madeeha had come to be empowered in her responses to Islamophobia. She affirmed its beauty and appeared confident in it despite negative stereotypes about the religion.

Madeeha: I think in white feminism, displaying as much flesh as possible... is one way of being liberated. My mum found liberation in the way that she chooses how to dress (observing hijab) that is an act of resistance and act of holding on. And that is what a lot of women have done, they have re-fashioned modern attire into these modest outfits, and they made it so beautiful. That is an act of resistance, that is an act of feminism, and that came from my own culture...

Many described finding role models that helped them imagine how to balance oneself between the West and the Bangladeshi culture. Online forums and social media also played a large role in building this cultural awareness and forming a community of British Bangladeshis.

Noor: Wow-we, you're like me, but you have so much love for it now. Like, you're already reading these history books... So, I'm just drawing off them.

In response to feeling like an outsider in public and professional spaces, participants reported that this generation of British Bangladeshi communities created and accessed learning spaces at universities and through social media groups. The majority of participants then discussed experimentation with identity at university, which has helped them to establish long-term commitments towards their EI:

Bilal: It just felt like a proper sense of belonging, where I didn't feel like I was kind of trying to lie to myself or trying to get myself to be someone that I wasn't. It was the first time I was in a friend circle and I was like, oh, I can just be me, they're all like me I think, they're British South Asians, so am I.

Many participants discussed the ways in which their families had attempted to preserve cultural practices through the generations, which made it easier for them to access skills such as the Bangla language. Most participants also described their sense of pride and commitment to speaking in Bangla and many mentioned its historic significance and described how it enabled them to build meaningful relationships with older generations:

Roxana: Everyone fought for language... I really want to preserve that.

Attachments to the language and culture drew together points of reference from childhood, adolescence, and the turn to adulthood while at social events, which appeared at times to sustain a sense of comfort and familiarity in constancy.

Kolpona: I come across things that like loads of... phrases, that in Bangla, I think of in like certain situations. That kind of gives me comfort, because they're so funny, that, I don't think could be translated to any other language.

While participants described increased engagement with their Bangladeshi identity as a way to help them feel more able to respond to experiences of being made to feel like an outsider in Britain, as well as within the British Bangladeshi community, a few participants talked about the potential negative emotional consequence of identifying with the Bangladeshi identity, especially when faced with discrimination.

Bilal: Where you are around non-Bangladeshis and British friends and stuff like that and they're making fun of you for a particular stereotype... you make more jokes about your particular territory or group of people to try and integrate... But now, it's like if someone makes fun of my culture... I take offence to it.

For some, the period of transition and exploration of EI was associated with emotional distress at this time of their life.

Kadeer: At University, I was depressed. I had depression for a few years. And it's still about, like it was because you just have to think about who you are as a person constantly and just sort of break down a sense of self

However, once participants eventually built up a sense of confidence about sharing parts of their Bangladeshi culture in outside spaces, many reported feeling empowered. A few participants acknowledged the journey towards safety in environments that previously appeared threatening. Having a strong sense of identity that came from exposure and experimentation appeared to have strengthened many participants' levels of confidence whilst navigating spaces in which they are a minority.

Kolpona: I feel a lot more comfortable outside of my bubble as well.

To summarise, in this theme movement towards a Bangladeshi EI seems to have been triggered by a number of factors, including maturing and moving to university, and for some in direct response to being made to feel like an outsider, as well as being seen as a 'coconut' from within the Bangladeshi community. For many, this strengthening EI was reported to foster a stronger sense of self and confidence in cultural practices. Exposure to the Bangladeshi heritage, through family and the wider community appeared to be inspiring for many participants, who stated that they gained a sense of pride and passion. While a positive development for almost all participants, one participant discussed how identifying with their EI could also be detrimental, since it makes one more aware of negative societal discourses. Research into the cultures and histories of Bangladesh and Islam was an avenue of resistance for some participants against stereotypes, biases, and assumptions in wider society, and many seemed to gain confidence in finding reasons to be proud of their Bangladeshi and Muslim communities. Although issues such as colourism, racism, and religious judgement still existed in participants' lives, they reported that a movement towards EI has supported them to create a stronger sense of self and connection to others when navigating these issues. Relationships to EI consistently seem to evolve depending on contextual circumstances.

DISCUSSION

This study has highlighted that third generation British Bangladeshis face ongoing negative societal constructions of people seen as Muslim and/or South Asian. Most participants in the study reported that expressing one's EI could lead to negative and often oppressive consequences, leaving participants with a sense of not being wanted. In line with previous research, the Muslim British Bangladeshi background also appeared to increase the likelihood of being a target of Islamophobia and hate crimes, both in public and professional spaces in the UK (Abbas, 2009; Franceschelli & O'Brien, 2015; Hoque, 2018), with more overt

experiences of hate crime coming from women who wear hijab (Reynolds & Birdwell, 2015). Many participants described experiences of a pressure to demonstrate whiteness and more assimilative behaviours in professional settings as a strategy to excel professionally and avoid further discrimination. As suggested by Berry (2006), experiences of racism and discrimination appear to have led participants to experience difficulties in developing a secure sense of identity.

Participants in this study also disclosed the negative impact that ‘pretending to be white’ had on their levels of confidence and how they viewed themselves. This appears to be in line with previous evidence demonstrating that despite a correlation between assimilation and positive life satisfaction, assimilation and marginalisation also appeared to be negatively correlated with mental health and wellbeing (Berry & Hou, 2016). As a result of these experiences, British Bangladeshi people may experience ‘damaging increased vigilance’ as described by Rippy and Newman (2006), and become wary of expressing their EI, potentially leading to anxieties about openness in public and professional spaces. Previous evidence has suggested that identifying more with the dominant culture can increase economic gains, while separation and marginalisation appear to decrease earnings (Drydakis, 2012).

A third of participants also described instances of being viewed within the British Bangladeshi community as being too aligned with the British national identity as ‘a coconut’, implying one has brown skin on the outside with culturally white values and behaviours inside. Participants described this as an alienating experience that acts as a barrier from within even their own generation when trying to connect to their EI. Adopting whiteness has at times been seen as undesirable within the Bangladeshi community in the UK and creates a division between individuals and their other British Bangladeshi counterparts. This finding brings new perspectives to our understanding of third-generation British Bangladeshi people.

Another important finding was that a number of participants had wished to access mental health services, but were deterred by fears that negative societal stereotypes associated with the Bangladeshi and Islamic culture would influence their care. Furthermore, the three participants who had accessed mental health services all described negative experiences, where practitioners failed to understand the unique cultural nuances that contribute to mental health difficulties.

Belonging through developing EI

Relationship to EI was reported as being strengthened over time through an exposure within different contexts. In line with Phinney’s model of EI development (1992), participants appeared to go through a process of exploration before committing to their EI. During childhood and into early adulthood, participants described attempting to fit in and belong by pretending to adopt the dominant white culture. However, many participants described that

at later stages of development, they were exposed to safer spaces in which they willingly moved to a place of wishing to embrace their EI.

A number of contexts appeared to also facilitate the development of a stronger EI over time for participants. Families played a significant role in the formation of a number of participants' EI. For many participants, stepping into culture-specific spaces (e.g., British South Asian, Muslim) helped them make sense of their experiences living as British Bangladeshis, and empowered them to get a better sense of themselves. Online movements in forums and on social media also appeared to give participants a safe entry into their heritage. British Bangladeshi spaces at university were also important to some.

Developing a Bangladeshi identity appeared to foster a sense of belonging for many participants in educational and professional settings. In contrast to the discomfort during adoptions of white culture, the Bangladeshi identity appeared to help some individuals experience more authentic versions of themselves. Many described a sense of pride in the significance of their history and language, and the connection to Islam and Bangladeshi identity further provided a source of strength for them.

Although individual experiences differed, a sense of safety appeared to arise in community spaces of shared EI. Experiences of racism also triggered a need for participants to connect to their EI, seeking a greater sense of safety within their communities. Moreover, the stronger sense of EI through connecting with others helped them engage better with the outside community. Having a strong sense of community then helped them feel more comfortable while negotiating public and professional spaces.

The findings of this study appear to be in line with strong existing evidence suggesting that EI can be helpful for wellbeing (Smith & Silva, 2011). In this instance, it has been described as positively impacting confidence, and relationships. However, through an intersectional lens, some unresolved issues remain which may impact negatively on some individuals more than others and relate to participants stating they felt judged negatively within their Bangladeshi community, for instance, due to gender, racism, colourism, or matters of prioritisation between Bangladeshi and Islamic identities. The situational dynamism in these negotiations of layered identities evidenced participants' fluid relationships with EI, while suggesting that strengthened EI provided greater safety than assimilation into whiteness had done.

IMPLICATIONS

This study does not imply that a solution to discrimination and racism is to equip those on the receiving end of abuse with strategies to manage societal subjugation and oppression. Responsibility should lie with those who discriminate, both personally and institutionally. Our roles as clinicians and researchers should be used to strive to eliminate systemic

discrimination and racism in all its forms, since we are equipped with the skills and power to advocate for the rights of the people that we serve (Reynolds, 2011). Nevertheless, the current research points towards the potentially protective role of EI, which for this generation of British Bangladeshis appears to be a combination of Islamic and Bangladeshi heritage. This research supports the notion that a stronger relationship to EI in later generation immigrants' sense of self and wellbeing can protect them in the process of navigating complex identity construction and dealing with racism, discrimination, and marginalisation.

This study has highlighted how experiences during childhood and adolescence can be extremely influential. Clinicians, educators, and researchers could advocate for an educational model that honours and seeks to understand and value the narratives and everyday social worlds of ethnic minority pupils. Weaving this complex negotiation of identities into the curriculum can make learning relevant, rewarding, and more meaningful (Hoque, 2018). Niche groups (e.g., British Bangladeshi, Muslim, and South Asian performing arts and literature groups) within university spaces and social media appeared to play a pivotal role in helping participants to connect with their heritage and to others. We believe that more can be done to work alongside such community groups, to develop and promote these spaces through mainstream educational and wellbeing services.

As reported by participants in this study, British Bangladeshi and Muslim people are at risk of experiences of hate crimes and other forms of discrimination. Addressing this should be a priority. One example of how this has been tackled is from Australia, where the Bystander Project (Dulwich Centre, 2019) has been developed. The local community decided to take action by starting a project that equips bystanders with the tools to respond in hostile situations. This kind of approach can be both therapeutic for those being targeted whilst also creating more community cohesion and addressing Islamophobia and other forms of discrimination.

The current research also points towards the central role that EI potentially has in later generation immigrants' sense of self and wellbeing. Despite this, EI does not seem to be regularly considered within the therapy context. Williams (2018) encourages using EI models to help create more conversations with clients about their multiple identities, some of which may feel dominant and others that may not be as developed, as this can create pathways for more helpful conversations with clients. Therapists would be able to use these models to help them gain more of an understanding of how clients may be experiencing their EI.

When looking particularly at therapeutic interventions related to working alongside marginalised communities, one approach that has a limited but growing evidence-base is narrative therapy (Monk et al., 1997). For example, in East London, clinicians worked alongside the Imams at a local Muslim Centre (in a predominately British Bangladeshi area), working in partnership with Black and minority ethnic voluntary sector groups to shape psychological interventions to the 'needs and strengths of communities' (Byrne et al., 2017,

p. 396). This approach was seen as more holistic and ‘acceptable and relevant to community members’ (p. 396), as it took into account a breadth of identities both communal and personal, including ethnicity and faith among other threads of belonging.

Similarly, the Tree of Life narrative practice has been adapted for a group of young Muslim women living in Australia. The approach allowed them to uncover the survival skills that the young women drew on to resist encounters of daily struggles. In their project, ‘We try not to take people’s hate into our hearts’, young women from the Muslim Women Association of South Australia and members of the Afgan youth of South Australia utilised narrative collective documentation as a way to try to not ‘take people’s hate into (their) hearts’ when ‘dealing with weird experiences like being stared at, being yelled at by random strangers driving by in their cars, or other strange stuff that happens here and other places’ (Muslim Women’s Association of South Australia, & Afgan Youth of South Australia, 2019, para. 1). They also created a video designed to raise awareness and influence bystander action projects to address Islamophobia.

It may also be useful for therapists to reflect on their own relationship with their EI. Williams (2018) discussed how a therapist from an ethnic minority group may be in an early stage of racial identity development and therefore experience hostility towards a client of the same racial background, which can create distancing and difficulties within the therapeutic relationship. Similarly, she suggested that a therapist from the dominant background, who is also in an early stage of EI development, is at risk of being defensive or upset when exposed to racially charged material from ethnic minority clients. Williams encourages using EI models to help create more conversations with clients about their multiple identities, some of which may feel dominant and others that may not be as developed, as this can create pathways for more helpful conversations with clients.

LIMITATIONS OF THE STUDY

One limitation of the study relates to the demographic of participants. The study focused on the British Sylheti Bangladeshi population and the experiences of the wider Bangladeshi population might be different. Similarly, the London environment is very specific and experiences from Bangladeshi people living elsewhere in Britain might be different. Notably, all participants were educated to a tertiary level. While these participants potentially share many experiences with the wider community, the impact of education and social class on their experiences should not be underestimated. Disengaged, disaffected, or unemployed Bangladeshi adults’ voices are not captured in this study and could potentially include some notable differences. This would be an important area for future research, where a more foundationally intersectional approach could further detail the nuanced experiences of this growing community.

CONCLUSION

While this was a small exploratory study and findings cannot be generalised, it brings new richness to our understanding of the experiences of third-generation British Bangladeshi adults (including women, whose voices are often absent from research) and explored important issues such as Islamophobia and the climate of 'Prevent'. The study contributes to the growing literature about the effects of racism, discrimination, and exclusion on identity, mental health, and wellbeing.

The Muslim British Bangladeshi population are at risk of acculturative stressors as their families adapt to living in Britain. A strong sense of EI has the potential to foster a sense of identity and belonging that can counter some of the challenging experiences reported in this study. However, these findings should be approached with care as some research suggests the opposite effect, namely, that high levels of EI may potentially increase vulnerability to distress when faced with discrimination, especially when considering populations that face intersectional disadvantages. The findings from this study can usefully be considered within education, mental health services, and by Muslim British Bangladeshi community leaders.

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PEER-REVIEWED ARTICLE

A process oriented psychology (POP) approach to processing collective trauma in an Irish context

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ABSTRACT

The island of Ireland and Irish people have experienced a vast array of social, political, and military and paramilitary events and occurrences throughout history. Many have given rise to different forms of collective trauma. This has influenced the development of a national psychology and the many sub-psychologies of different groups of Irish people. Unprocessed, this trauma is transferred to subsequent generations at an individual, group, and collective level. This article considers an integrative approach to working with collective issues within groups of people who have a relationship with Irishness. This is heavily based on process oriented psychology (POP) or its larger scale application, worldwork. Mapping and following the different roles that may emerge within the process is key. We combine this approach with the spirit or essence of ancient Irish storytelling in hosting community-based dialogue interventions. These groups explore 'the experience of being Irish in 2022 or different relationships with, or to, Irishness in today's world'. The different themes and topics that emerged across the initial groups are discussed with further reflections from participants and more in-depth commentary from the perspectives of the group facilitators. The next stages of this group-based psychotherapeutic work are considered within an Irish framework; as well as the potential benefit of this kind of work at an international level, given the many collective psychosocial challenges we face across a very interconnected globe.

KEYWORDS: process oriented psychology (POP); The Seanchaí Project; collective trauma; worldwork; group psychotherapy; innerwork

INTRODUCTION

Like many other regions of the world, the island of Ireland, the Irish people, and the cultures of these peoples has been heavily influenced by a range of collective and societal events in the recent and not-so-recent past (Curtis, 1978). Colonisation, famine, partition of the island, civil war, the 'Troubles' in Northern Ireland, and significant religious oppressions are to name but a few (Ferriter, 2019). The social, economic, and psychological impact of some of the more recent events has been shown to be very significant (e.g., Corcoran et al., 2015; Ferry et al., 2015; Griffin et al., 2014; O'Neill & O'Connor, 2020).

Unprocessed, untold, and unconsidered trauma that such events may lead to can be transferred to subsequent generations and re-enacted in different ways at an individual, group, or collective level (Dowd, 2019; Inger, 2012; Zerach et al., 2016). This can occur in both conscious and unconscious ways (Audergon, 2004). For example, a 'victim-oppressor' interaction (Audergon, 2005) can play out in dynamics of internalised oppression within people's own psychology, within parent-child relationships, within romantic relationships, in the classroom, on the sports field, and at a broader level within political arenas. This interaction between people and what happens in their environs informs the development of a national psychology, different 'sub-psychologies' across many different groups of people, as well as impacting the development of each person's psychology at an individual level. All are interconnected—the individual, their groups, sub-groups, and the larger collective (Mindell, 2014), giving rise to a notion of 'Irishness' or rather many different conceptions of what it means to be Irish. That said, we realise that there is much more than hardship to the many stories of Ireland and Irish people—both past and present—and we do not wish to overlook this. In recent times, benefits of joining the European Union (EU) have been many; many parts of the island now experience as much immigration as emigration; and there has been significant progress on social issues such as same-sex marriage and legislation pertaining to abortion (Ralph, 2020; Tiernan, 2020).

Over the past half century, there have been a wide range of efforts, at various different levels of society, to address the impact of intergenerational trauma on Irish people and in particular, its impact in Northern Ireland. These have included innumerable reports, community development projects, local and national initiatives, and working directly with trauma within a psychotherapeutic setting (e.g., Bolton, 2017; Byrne et al., 2009; Day & Shloim, 2021; Eugen, 2022; Ferry et al., 2014; Goodbread, 2010; O'Neill & O'Connor, 2020).

Several years ago, along with other Irish people, we began processing some of the abovementioned issues at an International Group Process Seminar, hosted by CFOR (Force for Change) in conjunction with Research Society of Process Oriented Psychology United Kingdom (RSPOPUK). It was entitled 'The World Inside Out' and focused on the application of process oriented psychology (POP) within a group setting (Mindell, 1995, 2014). This was the beginning of a further project undertaken with another colleague at a subsequent

CFOR/RSPOPUK programme, 'Facilitating Our Future'. This work, on the relationship between Ireland, Northern Ireland, and England, was part of a series of workshops facilitated by people from around the world, working in the areas of conflict negotiation, post-conflict rebuilding, peacebuilding, and community development. This work led to the development of *The Seanchaí Project* (Cotter et al., 2022a). This is one of ten projects seeded by the 'Far in Far Out' (FIFO) Jean-Claude Audergon Memorial Project. The purpose of the FIFO project is to support the facilitation of personal and collective awareness within community-based projects at a range of different levels, including design and practical implementation, as well as within individual facilitators, facilitation teams, and the interplay between these and the groups they work with.

The current paper

The work to date has involved facilitating group-based, community dialogue interventions. These have had a broad initial starting point of 'the experience of being Irish in 2022 or different relationships with, or to, Irishness in today's world'. From here, we follow the group's process and facilitate the exchanges and interactions that emerge. We do not have an aim within these groups of 'healing trauma' per se; however, we hold the perspective that this is often an artefact of groups following their own process and being supported in doing so. The remainder of the article gives an overview of our approach to group facilitation, the themes that emerged across the initial events, reflections from the perspective of participants, reflections from our own perspective as facilitators, and finally some thoughts for the future of the project. Participants have consented to their direct feedback being used and where our own reflections have concerned particular participants more directly, we have sought further consent to reproduce such reflections.

APPROACH TO FACILITATION

The underlying perspective from which we operate is integrative, interdisciplinary, and pluralistic (Boix Mansilla, 2010; Norcross & Goldfried, 2005; Teo, 2010). We are informed by a range of models and schools of thought, including person-centred therapy (Rogers, 1957), group psychotherapy (Yalom & Leszcz, 2005), compassion focused therapy (Gilbert, 2005), and existential psychotherapy (Yalom, 1980). However, our biggest source of learning and training has been in Arnold Mindell's process oriented psychology (POP; Mindell, 1988, 2017).

POP is a very integrative approach itself, incorporating learnings from Jung's analytical psychotherapy, psychodynamic therapy, cognitive behaviour therapy (CBT), client-centred psychotherapy, Gestalt therapy, and systemic and family therapy (Cotter, 2021a). Beyond the domain of psychology and psychotherapy, it also introduces concepts and ideas from physics,

Shamanism, Buddhism, alchemy, and mythology (Mindell, 1989). An essential underling viewpoint that pulls all of this together is grounded in the Chinese philosophy, Taoism (Addiss & Lombardo, 1993). In terms of philosophical underpinning, it is also grounded in the theory of phenomenology (Husserl, 1970). The aim of this work is to follow nature, the 'Dao'; the 'way' or the 'process' as it arises in each moment (Mindell, 1989).

As a prelude to outlining some key aspects of the approach, a few issues are worth noting. Within POP, terms are considered important because they describe experience, which is changeable, not because they are absolute truths (Mindell, 1995). Mindell's terminology frequently borrows from other scientific (e.g., quantum physics) and spiritual (e.g., Zen Buddhism) arenas and often presents ideas from a more phenomenological (Husserl, 1970) or relativistic stance (Carr, 1987) than a positivistic (Comte, 1997) or realistic (Kanzian et al., 2019) one. The latter is more common in mainstream Western psychology and psychotherapy (Teo, 2010). The reader who views the world in terms of objective truths will likely experience Mindell's writing differently to the reader who experiences the world in terms of subjective 'truths' that are continuously shaped by the interaction between context and observer. The positivist may experience some of Mindell's descriptions as vague whereas the relativist may favour the space for interpretation they afford. The qualitative investigator may see rich opportunities for investigation whereas the quantitative viewpoint may see challenges in terms of definition, operationalising terms, and measurement.

In recent years, there has been more and more recognition of the impact of social, political, and collective traumas on individuals' mental health (Johnstone & Boyle, 2018; Sweeney et al., 2018). Early in the development of POP, Mindell (1989) came to see how there seemed to be many advantages to processing collective events and societal issues in larger forums beyond the traditional psychotherapy dyad. Working with people who experienced shared traumas (e.g., war, genocide, natural disaster) highlighted how collective trauma also benefitted from a collective approach to processing it (Mindell, 1995, 2014; Reiss, 2018). This larger scale group processing has become known as 'worldwork'. We have had the benefit from learning quite closely from some of Mindell's early students in Ireland (Hollwey & Brierly, 2014), England (Audergon & Audergon, 2017), and Spain (Instituto Trabajo de Procesos). Two of our most influential mentors, Arlene and Jean-Claude Audergon, along with their colleagues, have used this approach in other parts of the world that have been heavily affected by war and conflict. These have included Rwanda and the Balkans (Audergon, 2004, 2005, 2006, 2008; Audergon & Ayre, 2005).

This approach involves using a range of POP-oriented facilitation skills and perspectives (for a more complete overview see Audergon, 2004). An overarching metaperspective is Mindell's (1995) concept of 'deep democracy'. From this perspective, all views and voices within a community are valued and welcomed, including those that may be considered extreme or unwanted. It also involves processing the polarisation between different sides (called roles) of a conflict and supporting all forms of emotion to be expressed. Through

facilitating these different parts of a process with awareness, it is theorised that a group or community can find their own way forward. From a POP perspective, the facilitator represents a 'role' belonging to the group as opposed to being some separate external entity that enters it (Mindell, 1989). Working with 'hotspots' is also central (Mindell, 2017). These are particular types of interactions within a dynamic where conflicts can cycle and escalate. Within the context of this approach, slowing down and bringing awareness to what is occurring at hotspots can lead to change. Similarly, bringing awareness to momentary resolutions or 'cool spots' is important. Bringing awareness to issues of rank (contextual, social, psychological, and spiritual), power, and privilege is also considered important within this work (Mindell, 2014). Working on these issues within oneself—known as innerwork—is a further key part of facilitating groups in this way.

A key aspect of worldwork methodology that deserves special mention here is working with roles. Mindell (1989) uses the term role to represent different parts of an individual's or group's process (Mindell, 2010). The term 'timespirit' was used laterally to highlight the temporal and transient nature of roles within a group (Mindell, 1995). Mindell describes roles or timespirits as:

a cultural rank, position or viewpoint that depends on time and place... that change rapidly because they are a function of the moment and locality... [and] are not fixed but fluid. They are filled by different parties and individuals over time, keeping the roles in a natural state of flux. (1995, p. 2)

Common roles may include insider and outsider or victim and perpetrator.

When someone identifies with a particular role within a group process, their consciousness can become altered, and they can experience the emotions of that role or the group of people that it is representing. Although each role seems located within a given individual or group, it is thought of as an evolving entity, a nonlocal transforming 'spirit of the times' that needs everyone to fill it (Mindell, 2010). Each role is much greater than any one individual or group and each person or group is much bigger than any one role.

As indicated earlier, one of the philosophical perspectives that underpins POP is the Chinese Philosophy or spiritual tradition, Taoism (Addis & Lombardo, 1993). Taoism, which developed in response to the more traditional Confucianism, purports that reality is ultimately a unified whole (Wong, 2011). This is represented in the Tajitu or Yin Yang symbol. This symbol denotes how opposite entities in the world are not separate but rather in coming together bring a sense of completeness into life. This is called monistic dualism and is contrary to the notion of Cartesian dualism (e.g., mind–body, right–wrong), which has had a big impact on much of Western society (Robinson, 2003).

This overarching perspective guides working with roles within worldwork fora. Viewing roles as opposites that are part of a greater whole helps group facilitators to notice how there is likely to be a parallel role for each role that emerges within the group. This aids facilitators

in bringing awareness to the missing or unspoken role, called the ghostrole (see below). Common pairings include victim and oppressor; communist and capitalist; and poor and rich—each group may have different names for these (Mindell, 2014). That said, there may not always be an obvious opposite to a role and group processes are rarely, if ever, as linear as this may suggest. Furthermore, there may often be interconnected roles that may appear in slightly different ways over time.

A ghostrole is a particular type of role that signifies aspects of a group's process that are not represented by anyone (Mindell, 2014). They may be people, events, or institutions that are referred to or spoken about, but nobody identifies with them in the moment, or they are not given a chance to speak (Mindell, 2010). Typical ghostroles include ancestors, the government, the prime minister, the environment, and the 'bad person' not present.

One of the chief ways that we identify and work with roles is through noticing and bringing awareness to verbal and non-verbal signals and feedback. This flow of information is differentiated in terms of 'primary' and 'secondary' processes, separated by an 'edge' (Mindell, 1988, 1993). A group's primary process refers to the experiences (e.g., thoughts, feelings, behaviours) that they are aware of and that they perceive as being closer to their known sense of identity. Secondary processes refer to experiences that are further from that known identity and that the group perceive as being unknown or 'not us'. The edge represents the limit of the known identity and the beginning of lesser known or disavowed experiences. This framework provides a way of organising perceptual information. The emerging process—including intended communication signals from the primary process and unintended communication signals from the secondary process—is explored and amplified across six modes of perceiving (Mindell & Mindell, 1992). These are called channels. There are four irreducible channels (auditory, visual, proprioceptive, movement) and two composite channels (relationship and world). Differentiated awareness is key to unfolding the process and following the group's feedback (in the form of communication signals) to interventions. Changes in the group's feedback guides the unfolding of the process (Mindell, 1989). Double signalling occurs where intended communication from a primary process (e.g., 'nice to meet you') conflicts with unintended communication from a secondary process (e.g., head and eyes look away) (Mindell, 1988). The effect of double signals is what Mindell (1988) calls 'dreaming up'. This occurs where one side of a conflict (receiver) responds to a disavowed part of another side's process (sender) that is carried by unintended communication signals. POP group facilitation includes monitoring the group's process with awareness; 'weather reporting' on different communication signals and feedback; and identifying and representing the opposing roles. From here, we support the roles to interact with each other and facilitate the hotspots and issues of rank and power. The aim is do this from a position of deep democracy. Representing and communicating the perspectives of ghostroles is often key to facilitating a process to unfold (Mindell, 2017).

One of the dynamics we want to bring awareness to is ‘role switching’ (Mindell, 2010). Role switching occurs where someone has identified with a particular role (e.g., perpetrator/victim) but at a particular point in the process begins identifying with the other side (e.g., having agency rather than only feeling vulnerable). This supports people from different sides to see how everyone shares these different roles and supports people in becoming less entrenched in one position. This helps a process to unfold. When roles are processed, people within groups may become personal, which can support healing to occur.

A final point regarding the facilitation approach concerns how, in an effort to incorporate aspects of human psychology and consciousness that have become less prominent in modern Western thinking, Mindell and colleagues have incorporated concepts from more Indigenous cultures and long-standing schools of meditation in the East (Mindell, 2000). These perspectives often inform the use of what are called ‘metaskills’ (Mindell, 1994). While this has been questioned in terms of it being a form of cultural appropriation by some practitioners, it has been highly valued by others, including those from Indigenous cultures (Mindell, 1995). These are the feeling attitudes, values, and beliefs that inform the facilitator’s overarching engagement and guide how they do what they do (e.g., following nature, beginner’s mind, eldership; Diamond & Spark Jones, 2004). Over time, the development of our own metaskills has been informed by our relationship to and conception of an ancient Irish tradition, the *Seanchaí*. This way of being has a range of resemblances and some more direct overlap to other Indigenous cultures that Mindell has learned from and studied with in other parts of the world.

A *Seanchaí* (shan-a-key) was a traditional Irish *storyteller* (Ó Súilleabháin, 1969). In a literal sense, the word means ‘bearer of old lore’. The *Seanchaithe* (plural) were custodians of history and culture on the Island of Ireland for many centuries (Mercier, 1964). Historically, they are said to have been highly valued by their local chieftain and had a wide range of roles that involved dealing with legal issues, literature, and genealogy. Following the English Conquests of Ireland—from the 1500s onwards—the work of the Seanchaithe became more and more centred on storytelling and passing on Irish folklore, myth, and legend (Kiberd, 1979). It is important to note here that while the foregoing gives some indication of the history of the Seanchaithe and their place in ancient Ireland, it is very difficult to be clear about who these people were and what they did because the accounts that survive often do so in the form of copies of copies (Heaney, 1983). Furthermore, it is also the case that we are using this term in a subjective way that reflects our relationship to storytelling within an Irish context, something that is recreated within each group we work with. Some readers might view this as appropriation or misuse of an ancient term and way of being (this would make for an interesting group process in and of itself); however, that is not our intention. We could have called the project ‘The Storytelling Project’ but believe we have gained a lot from using the term ‘as Gaeilge’ (‘in Irish’) and we keep seeing this in terms of how participants and prospective participants relate to it. This rich and ancient way of being—as we have

interpreted it to be—has become an important background spirit or metaskill and starting point for this work.

THEMES AND REFLECTIONS

A broad range of topics emerged across the initial three sessions, two of which were online and one of which was in person in London. Participants also regularly indicated that what was discussed was ‘only the tip of the iceberg’. An overview of these themes is presented in Table 1. This reflects our interpretation of the subjective experiences of participants within the groups and the groups as a collective. In keeping with the spirit of deep democracy, all were welcomed into the group, as were the differing perspectives on each.

Table 1. A selection of themes

The questioning
What does it actually mean to be Irish?
Do I ‘qualify’ or am I ‘legitimately’ Irish?
At what point can I call myself ‘Irish’?
Northern Ireland, the North of Ireland, and the Troubles
The history of pain and suffering that the Troubles have left behind in the ‘North of Ireland’.
Differences and similarities between Catholics and Protestants in ‘Northern Ireland’.
Having parents who came from each side of the Catholic–Protestant divide.
Progress made in Northern Ireland—and how this is neglected in the English narrative.
Ireland–England
Challenges of being Irish in London since Brexit.
Having an Irish identity when born in England and having an English accent.
Women who fled Ireland for England to give birth; and how they were treated by State and Church.
Being valued for being a joker and joke-maker, one of the stereotypes often bestowed upon Irish people in England.
Second families, who fled Ireland.
The ignorance of Irish–English history amongst people in England.
Pre-anglicised Ireland—Irish mythology, fairies, fairy forts, and leprechauns.

Ireland and the world
Being Irish and our relationship with racism.
How welcoming and open is Ireland to people from other countries and backgrounds?
The overlap between what has happened in Ireland and what has happened in other colonised countries.
The past made present
The 'Famine' and the lasting impact of this.
'Deconstructing' versus 'embracing' colonialism.
Loss of and reconnecting with the Irish language.
The role of alcohol and how it has been both tragic and needed.
Class within Irish society and particularly its impact on education.

Participant reflections

The people who participated in the initial sessions varied significantly in terms of age, gender, socioeconomic status, and geographical location (Ireland and UK). They provided feedback regarding their experiences in different ways, including a follow-up questionnaire. Table 2 provides an overview of the types of things that people said in response to questions such as: What was your experience of the session? What, within the session, was most important to you? Was there anything that emerged that you would want to share with someone else in your life?

Table 2. Reflections from participants

Making space for the past in the present
'It was a very profound experience for me. It reached into a deep sense of shame, the shame of poverty, displacement, and internalised oppression that I carry inside.'
'This enabled me to speak from a deeper place of my experience of Irishness both here in Derry where I have lived through the Troubles but also of times when I have lived in England, both in London (1973–1978) and Sheffield (1986–1991) also during the Troubles, when being Irish, sounding Irish, having an Irish name could draw negative, as well I may add, positive attention.'
'The complex pain people shared with regard to their relationship with the coloniser who both took and provided.'

'I've spoken to my mum about it and had a new conversation with my dad about intergenerational impacts that for once was curious rather than confrontational.'

'I feel living in the South of Ireland, the experiences in the North were very separate to me. It was a real eye-opener hearing these personal accounts.'

'The personal sharing on colonisation in Ireland and the world.'

Welcoming Irishness

'The sessions reminded me of my love for the Irish language and further empowered my resolve to keep learning an teanga.. I have go leor Gaeilge ach nil me liofa...'

'The space to be Irish without reservation.'

'My insight into intergenerational trauma and the inability to express this when you don't speak your native language.'

Power of the group

'But I didn't feel alone in it, because the group created a safe container for my inner experience. I felt closer to the emotional level and the invisible trauma of what the Great Hunger has left behind in our psyche.'

'Really appreciated the sense of belonging to a community that emerged.'

'The opportunity to share whatever felt relevant, in a non-judgemental space.'

'Listening to different stories/individuals experiences and connecting it to my experiences as an African woman. I appreciated the openness, honesty, relaxed atmosphere and the respect by the organisers and the participants throughout the session.'

'Diversity of experience, connection, open-hearted, kind, and bold facilitation. Sense of inclusion.'

'One of the most moving sessions for me was my reaching out to my Northern friend... hands across that deep enough (cultural??) divide that exists here in NI [Northern Ireland]...'

'I was struck by the openness of those who participated.'

'Hearing from everyone. Learning about different people's experience. A safe space where people felt comfortable expressing themselves candidly.'

Facilitation role

'The facilitation guided the process beautifully... the human-ness of those present touched me and the humour...'

'The excellent facilitation made honest and open sharing very safe for me.'

'It was a very welcoming forum where a feeling of safety was cultivated by the facilitators and space was offered for those who wished to share their experiences.'

'These sensitive enriching conversations were very well facilitated...'

Facilitator reflections

What follows is an overview of some of the many reflections we have had about the initial stages of this work. Our perspective is influenced by our own relationships with being Irish and the lives we have lived more broadly. We were both born in the Republic of Ireland and have had traditional, rural Catholic upbringings. We are male and currently live in London. We have a strong interest in Irishness and being Irish as well as the world beyond that. Our reflections are an effort to make sense of the experiences we have, as opposed to representing 'fact' or 'absolute truths' in some way. Other people in our position may have very different experiences and perspectives. It is also of note that the following descriptions are made more concrete by virtue of putting them into words, but these experiences are much more transient and non-linear in 'reality'.

Innerwork

An essential part of this work is the preparatory work we engage in and how it assists us to facilitate, and model alternative ways of being for the group. We are always looking at how different roles emerge within ourselves; as well as our relationship with the different themes and topics that emerge within the group. One pair of roles that we have regularly found ourselves processing might be best represented as 'The Confident Role' and 'The Shy, Unable or Incapable Role'. At different times we have both experienced each of these in different ways. We have processed these within our own psychology, within our relationship with each other, and how they emerge within the groups and how they are connected to Irishness, both past and present. We have reflected on how such a dynamic can be very prominent at a collective level, given the power imbalance that Irishness has had relative to Englishness for many centuries. However, we also recognise this as one interpretation from our standpoint and that there are many more ways of considering the dynamic. This innerwork has supported our facilitation and work on the project more broadly. It has allowed us to step more fully into being confident about the work we are doing well; and 'not be against' moments when we feel shy or in need of support. The awareness we have generated through processing these roles has supported us in noticing them when they emerge within the group as well as having more space to respond to each from a more compassionate place rather than being psychologically 'knocked out' at one end of this polarity. We regularly conceptualise different aspects of our innerwork in terms of how they relate to different aspects of our Irish heritage and consequently our version of the ever-evolving Seanchaí metaskill that informs our facilitation.

Roles

Over the past number of years, we have identified and worked with a whole range of what we conceptualise as roles related to the Irish experience from our perspective. We have prepared a further article outlining these in more detail that will be submitted for publication soon. In this instance we focus on two related pairs of roles that have been influential on several occasions.

The first pairing is what we have called 'The Jester/Jesting'—'Being Serious/Taking it seriously' and the second is 'Going deep into the hurt/past'—'Bypassing the hurt/past or Moving forward'. Separating these roles or even pairs of roles is an artificial distinction that is an artefact of putting names or attributing words to complex psychological phenomena. As we see below, these 'individual' roles are much more interlinked and not really distinct constructs at all.

While participants may have their own relationship with these roles at an individual level, from a group level perspective, it's not difficult to relate many narratives from the past to these roles and why they still influence discussions on being Irish in the present. The reader will likely have many thoughts of their own—we offer some reflections from our own experiences and our experiences of being with others in relation to these roles. Use of humour and 'the craic' (the 'fun') appear to have been very important ways of being and coping for Irish people for hundreds of years, both in good times and in bad. There have been many times in the histories of the island where it was too difficult to 'take things seriously'. In addition, the stereotype of the 'Jester' has been bestowed upon Irishness and caricatured by the 'serious, civilised Englishman' from very early in the shared relationship between the two nations. This is one example of how we experience Irishness as having developed relative to Englishness; and how it has been defined from this relative or othering perspective, which does not value humour. Many participants in the groups have considered how Irishness has been heavily influenced by how it has been consumed by the 'serious, civilised Englishman'. People have spoken about how this is still often held up in many conscious and unconscious ways today—in Ireland, England, and on an international stage. 'We' continue to receive a lot of positive reinforcement for 'being great craic' and being the 'life and soul of the party' while other qualities may be overlooked.

The second pair of roles, 'going into the hurt versus bypassing it', are not uncommon amongst groups of people where there is significant collective trauma. This has been observed and considered more fully by Audergon (2005). They can occur at an intrapersonal, interpersonal, and collective level. They can emerge within a group where some people wish to focus more on the hurt of the past whereas others do not. Even framing this, as a facilitator, and bringing awareness to it can help the group appreciate both rather than becoming entrenched on one side or the other. One of the ways that we have observed this emerging is where the more dominant jesting can lead to skipping over points where there is also much feeling. This can create confusing communication signals or what we often refer to as 'mixed

feedback'. Continuously skipping over these feelings can lead to an escalation, eventually creating a hotspot. From a facilitation perspective, we have really worked with welcoming, embracing, and appreciating the jesting, humour, and 'the craic'. However, we are also looking for moments to slow down and welcome in the less apparent feeling-experiences and to ultimately 'take ourselves and our experiences seriously—take being Irish seriously' while not forgetting the value of humour. This is often a missing role or ghostrole. Through doing this, we create an environment in which something different can happen or new patterns and ways of being can emerge.

One final point regarding roles concerns the degree to which we step into a 'participant-facilitator role' within each group (Mindell, 2014). We view the facilitator role as part of each group we step into—as opposed to being some kind of external agents with external expertise. We are also always there as participants, on our own version of the same journey as all the other group members.

Hotspots and rank

Facilitating hotspots and issues of rank and power are important parts of this work. We take our experience of one such instance as an exemplar of this but again wish to stress that its depiction here is a gross oversimplification of the many complexities within it.

One of the groups was made up predominantly of people who had an Irish Catholic upbringing, whereas there was only one person who identified themselves as having grown up within a Protestant tradition in Northern Ireland. At one point in the group, a hotspot emerged around the use of violence within the Troubles and at other points during the past, such as the War of Independence.

There was a strong Irish Republican perspective presented early in the session by one member of the group (thus representing a role within the process as opposed to being solely the purview of that individual) and this was added to in different ways by other group members. This person had high 'contextual' rank in that their perspective could be conceptualised as likely representing a more dominant viewpoint within the group. This was furthered by the fact that it was known within the group that we as facilitators also had a Catholic upbringing. The contextual rank that facilitators hold within a group can be an influential factor in terms of what may get centralised versus marginalised (Mindell, 1995).

As facilitators, we were aware of how this may have been marginalising the viewpoint of the individual who grew up within a Protestant tradition. Eventually, we offered an intervention, highlighting how the foregoing perspective was one viewpoint and that there were also likely lots of other perspectives that we wished to hear. When this group member eventually spoke, they mentioned how they had been having lots of feelings within their body in response to many of the other viewpoints and that it had been difficult to hear. At this

point, we really appreciated them bringing their perspective and we outlined how grateful we were for them bringing it within the group; how we were learning from it; and how the group was much richer for having it. Other group members echoed this appreciation and a 'cool spot' of sorts followed. We reflected after on how bringing this framing and awareness sooner may have been preferable, however it was challenging to find a moment to 'interrupt'.

It is also worth noting that as facilitators, we had an awareness of how the person in question had a lot of 'psychological' rank and facilitation experience themselves and also had a number of allies in the group. This influenced some of our decisions in terms of how and when we intervened.

Deep democracy, following the process, and metaskills

As outlined above, two of the key pillars underlying worldwork facilitation involve following the wisdom of the group and welcoming in or making space for all of the different perspectives and emotions. We are continuously growing the 'how' by which we do this or the metaskills that inform our work. As outlined above, we relate this to being in keeping with our interpretation of the spirit of the Seanchaithe. What we mean by this is that our style of facilitating has an informal, storytelling-like approach to it where we are both 'doing' and 'not doing' or 'facilitating' and 'not facilitating'. It is also a somewhat different way of being to what has become the dominant way of 'leading' or 'hosting' groups in many aspects of modern life (e.g., business, healthcare, sport). This metaskill is something that continues to grow and evolve between us and each time that we engage in this work. It is an ongoing process itself as opposed to some fixed entity. While it is a part of our facilitation, it also represents a wider process within the project of finding or reclaiming an Irish voice(s) or Irish way(s) of doing things, something that is important to ourselves and is referenced in various different ways by group participants. As with much of the rest of the project, this is an ongoing process that evolves continuously.

POTENTIAL NEXT STEPS

We have many hopes for this project and the nature of the work it represents. We hope to host a range of further events across the islands of Ireland and Britain as well as online. The latter, as well as increasing accessibility, allows us to facilitate discussions on being Irish in a way that brings people together from different parts of these islands and from different corners of the world. Already, we have seen the value of this and the interconnectedness it engenders. With that said, we also feel that it is important to follow the feedback we receive in terms of hosting, planning, and locating groups (e.g., following invitations from people who have already participated) rather than solely following our own agenda.

We wish to host ‘open’ groups where anyone with a relationship to Irishness can join, as well as ‘closed’ sessions for groups of people who share a particular connection. This can be especially relevant to people who have been minoritised or marginalised within mainstream society. This may be due to gender, race, sexual orientation, disability, socioeconomic status, or the many other ways that people are discriminated against. One group within Irish society that is deserving of special mention in this regard is the Travelling Community, which experiences the greatest degree of disadvantage ‘by far’ among minority groups (McGinnity & Watson, 2021). Using a closed group model where appropriate may support integration in the longer term as it can support people from minoritised groups to later attend open groups. From our perspective, there are a number of important factors to consider when working with any group or culture of people, who have been minoritised within society: being invited to undertake the initiative; continuously co-creating it with the group members; following the group’s process and their own wisdom; and recognising that we step into the facilitation role, which itself is part of each group. Closed groups may also be useful for groups of people with a common interest or shared goal. This might include writers, documentary makers, sportspeople, politicians, students, and what may be of particular interest to the current readership: psychotherapists, psychologists, and counsellors. We believe these types of group-based interventions can support such people in their own lives as well as with the work that they do.

Supporting people with different viewpoints and perspectives to come together is an important part of this work. One somewhat ubiquitous example of this is bridging ‘the generational divide’, in the context of differing experiences in a period of accelerated change. This may involve working with younger people and older people in closed groups initially and then bringing them together to share each other’s stories and perspectives. Potentially even more important is when these dynamics arise organically within open groups. Other examples might include Catholics–Protestants, Northern Ireland–Republic of Ireland, and Urban–Rural.

Awareness is one of the most important things within POP. Awareness of our own blind spots, as facilitators, is key, as is an awareness of the approach itself. In doing the latter, however, it is important that it is not an artefact of the former (i.e., projecting our issues on to ‘the approach’ or Mindell or other such authority figures in the field). We are always asking ourselves questions such as ‘who in me is facilitating?’ and ‘how might I be projecting part of the process onto some other external figure?’ With that caveat in mind, we wish to recognise that POP is not without its shortcomings and just like any other school of thought there is always room for innovation, development, and improvement. For instance, as a paradigm POP is over 50 years old; however, there are still relatively few academic articles explicating the approach and comparing and contrasting it with other such approaches. We hope to contribute in our own small way to this with articles such as this.

Despite our deep interest and focus on POP within this article, we also wish to recognise the many other approaches to group facilitation and see there being great scope for

comparison and collaboration with these in the future. Within an Irish context, these have included a wide range of approaches including the Face Your Fear Club (FYFC) with young people (Stewart & Thompson, 2005); group analysis focusing on shame-rage cycles (Rice & Benson, 2005); community art therapy groups (O'Neill & Moss, 2015); and faith-inspired approaches to peacebuilding (Tyler, 2015).

CONCLUDING COMMENTS

There is a *Seanfhocail* (old Irish saying) 'Ar scáth a chéile a mhaireann na daoine' or 'under each other's shadow is how people survive' (Magan, 2020, p. 126). We do not mean to overlook how many people have suffered and continue to suffer within individual and collective relationships. Rather, we believe that growth and healing can emerge from within this so called 'shadow', especially when appropriate conditions are cultivated and nourished. This *seanfhocail* can also be understood as 'it is in the shelter of each other that the people live' (Ó Tuama, 2015, p. 5), recognising further how we are part of each other stories.

Much of modern Western thinking is grounded in a particular way of viewing the world. This is reflected in perspectives such as positivism, capitalism, and the scientific method (Cotter, 2021b; Cotter et al., 2020, 2022b, 2022c). While there have been many benefits to these ways of being, their dominance has created many problems in today's world (Nekrasas, 2016). The individualistic, objectivist, and reductionist stances they promote have contributed to eroding much of the interconnectedness between human beings—and between humans and other animals and the natural world more broadly (Farrell et al., 2012). This is an underlying factor in many of today's major issues (e.g., climate change, rise of fascism, treatment of immigrants, lack of humanity in modern healthcare).

Within Europe, former colonial 'powers' may find it especially difficult to 'correct' this imbalance because they have taken it on, and benefitted from it, most wholly (Davis & Serres, 2018). Ireland's somewhat different history may mean that there's a little more space for a change in direction (Montano, 2013). We believe that combing the spirit of the *Seanchaí* with learnings from the humanistic and integrative psychotherapies can play an important role in supporting modern Ireland in becoming a more equitable place; in developing a different relationship between Irishness and Britishness; and in evolving the concept of Irishness on a more global level.

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setting; supporting men in becoming aware of, and growing into their masculinity; and use of POP in processing collective experiences and historical trauma within an Irish context.



Paul Callery grew up in the northwest of Ireland but has spent most of his adult life in the Basque Country and in London, where he now lives. His background is in education where he focussed on developing generative and integral models using critical and reflective practices. He currently mentors and supports unaccompanied asylum-seeking minors. Paul is continuously engaged in learning and development within the field of process orientated psychology, working in private practice with individuals, couples, and organisations. He has a deep interest in the Irish experience, how we live it and how it lives in us.

PEER-REVIEWED ARTICLE

Counselling without boundaries: A thematic analysis of counsellors' experience of unconventional boundaries in the Hestia Overnight Hotel Counselling Service for survivors of the Grenfell Fire

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ABSTRACT

Hestia's Overnight Hotel Counselling Service for survivors of the Grenfell fire was set up in response to a disaster and therefore most of the 'normal rules' of counselling boundaries could not apply. There is a gap in the literature regarding counselling in times of disasters and the ethical dilemmas that come with it. The deficit on this issue is especially great in the UK.

Using a thematic analysis, this study explores how nine counsellors experienced working within unconventional counselling boundaries in this service.

Findings indicate that the challenges encountered, and outcomes experienced, fostered a questioning of many of the rules assumed about counselling and psychotherapy especially regarding boundaries. Furthermore, they seem to validate the common factors' view on the importance of the therapeutic relationship for successful outcomes, even within an unconventional framework.

The study raises some questions for counselling and psychotherapy practice, training, and research such as preparedness for disaster counselling, diversity in service provision, and developing further the concept of community counselling by a community of counsellors with a community of clients in community settings.

KEYWORDS: boundaries; common factors; community counselling; crisis counselling; disaster counselling; social psychiatry; therapeutic relationship; therapeutic setting; trauma counselling

INTRODUCTION

Aims and rationale

This study explores how counsellors experienced working with unconventional boundaries in Hestia's Overnight Hotel Counselling Service for survivors of the Grenfell fire.

Background

The fire occurred just before 1:00 am on 14th June 2017 killing 72, injuring many more, and rendering survivors homeless. By September 2017, many survivors were being housed temporarily in hotels across West London. There were reports of increasing emotional distress amongst residents. According to the Grenfell Tower fire Wikipedia page ('Grenfell Tower fire', 2019, para. 48), 'On 26 July 2017... a local volunteer reported that there had been at least 20 suicide attempts in north Kensington since the fire, one of which had been successful'.

There seemed a desperation to provide an alternative service to conventional counselling and psychotherapy provision. Although the North and West London NHS (National Health Service) Trust offered a round-the-clock mental health service, there seemed hardly any engagement with it. The community was reeling with anger at, and distrust of, the local authority, which itself was staggering under acute criticism.

The Kensington and Chelsea local authority (Royal Borough of Chelsea and Kensington—Grenfell Recovery Scrutiny Committee, 2017, para. 5.18) subsequently commissioned a counselling service to be taken to the community, and at the times when they suffered most, hence 8:00 pm to 3:00 am daily. Hestia, an established local charity, was tasked with running the service.

The service

Hestia recruited a diverse team of counsellors into the Overnight Hotel Counselling Service. Two counsellors were assigned to each participating hotel every night. They would typically set up in the hotel lobby/bar/restaurant and engage with residents who approached them. Most counsellors floated between hotels as opposed to being assigned to specific ones. Each counsellor had a scarf—a symbol of the service by which residents could recognise a member of the team (see Appendix). The service was scaled down in June 2018 and decommissioned in February 2019.

As one of the counsellors who worked on the service, I was interested in exploring how colleagues had experienced the work, and what, if anything, they had taken back into their

'regular' practice. Additionally, I hoped to discover what could be beneficial for the training and practice of counselling and psychotherapy, especially in responding to disasters wherein counsellors and services would need to be flexible and strive to engage meaningfully with individuals and community.

LITERATURE REVIEW

Hestia's Overnight Hotel Counselling Service was set up in response to a disaster and therefore it was difficult for the 'normal rules' of counselling boundaries to apply.

Boundaries in counselling

According to the British Association for Counselling and Psychotherapy (BACP) (Kent, 2017), boundaries are agreed limits within which psychological safety is provided and which enable the client to experience the counselling relationship as a formal one.

Kent acknowledges that different modalities relate differently to boundaries, and outlines what seems to be the received wisdom regarding counselling boundaries, including offering the same time and place for sessions in an environment which is calm, distraction-free, and where confidentiality can be ensured. Additionally, she stipulates the need to avoid exchange of gifts during the therapy relationship.

Hestia's Overnight Hotel Counselling Service broke them all!

Boundaries or barriers?

Practitioners agree that boundaries are essential. However, there seems to be a spectrum ranging from those who advocate firm boundaries and those rooting for more fluid ones.

Totton (2010, p. 13) castigates rigidity in boundaries, suggesting that therapists are increasingly feeling forced into 'defensive practice and to work in ways that are not based on giving the client the therapeutic environment best suited to them but avoiding vulnerability to misconduct hearings'. This approach, he insists, is a barrier to effective counselling. He suggests that some of what have now become traditional counselling boundaries credited to Freud were merely guidelines for the protection and practical convenience of the practitioner and were not necessary for the 'safety' and 'treatment' of the client—reasons often given for very strict formal boundaries.

Agreeing with Totton, Mearns and Cooper (2005, p. 58) offer, 'such is the historical power of the analytic community that the norms around boundaries have become a tyranny which judges as deviant all but itself'.

Similarly, Wosket (1999, p. 164) suggests, 'boundary relaxations and extensions, might, on occasion, prove therapeutically beneficial and provide a greater experience of safety for the client than would rigid boundary enactment'. She gives examples of occasions when therapists broke conventional boundaries for their clients' greater therapeutic good, with positive outcomes. My experience with the Overnight Hotel Counselling Service seems to confirm this position.

However, Ingham (2010, p. 27) insists, 'well-observed boundaries are the life-blood of therapy' and 'the most valuable thing about what we offer is a fixed frame'. Responding to a vignette by Totton (2010), Ingham insists that 'doing things because they feel like a good idea is the first step on the path towards a more serious violation of the therapeutic position'. He concludes that as a rule of thumb, counsellors should simply stick resolutely to the frame and always put it first.

Similarly, Mitchell (2009, p. 16, citing Cloud and Townsend, 1992) offers the purpose of boundaries as helping to 'keep the good in and the bad out', a position affirmed by Clark (2016).

This viewpoint, in my opinion, seems to overlook the possibility that relentless execution of strict boundaries could do more harm than good, in that they become barriers to forming a constructive therapeutic relationship. For instance, my experience suggests that the refusal of a hug offered by a client in Hestia's Overnight Hotel Counselling Service could have been harmful if the client experienced it as a rejection of and/or a judgement on them. Johns (2020, p. 16) concurs, 'withheld contact can be just as abusive as unwanted contact'.

Striking a balance

Armstrong (2015) recognises this tension between holding firmly to strict boundaries such that they become barriers and relaxing them to suit the context. This sentiment is shared by Jinks (2012). Extending this opinion, Mearns et al. (2013) state that well-used boundaries could facilitate an equal relationship and help the client to feel increasingly empowered. Agreeing, Jordan and Marshall (2010, p. 350) suggest flexible boundaries can bring 'mutuality to the therapeutic frame'. This flexibility, in my view, rings true for the Overnight Hotel Counselling Service.

Counselling response to disasters

The Merriam Webster online dictionary defines disaster as ‘a sudden calamitous event bringing great damage, loss, or destruction’ (n.d., Definition 1). The literature uses ‘disaster’ and ‘crisis’ interchangeably (Al-Dahash et al., 2016).

In addition to the above definition, findings were sought from other researchers regarding counselling response to previous disasters. Dass-Brailsford (2009) explores practical, medical, social, and psychological responses to Hurricane Katrina and other disasters in the USA. However, there is hardly any discussion of traditional counselling boundaries in those accounts.

In another study, Cooper et al. (2018) comment on how, following a disaster, normal arrangements become fragmented. They conclude that boundary issues during disasters are more complex, with privacy being a major difficulty—just like with Hestia’s Overnight Hotel Counselling Service.

Similar complexities were reported by Dale (2016) who pioneered a counselling and listening service in Machynlleth, Wales. It was set up in response to 5-year-old April Jones’ abduction, later presumed murdered by a local man. Dale shares some similarities with my experiences as part of Hestia’s Overnight Hotel Counselling Service, such as inaccessibility to and/or unsuitability of available statutory services.

Hospitality was key for Dales’ Listening Point, raising ethical dilemmas around boundaries. She explains that it was a different experience from traditional counselling, with an emphasis on visibility, which was experienced as being therapeutic for those who did not engage directly with the service—another similarity with the Overnight Hotel Counselling Service.

In summary

The counselling and psychotherapy literature contains abundant comments on boundaries which focus on traditional settings. There is some literature on counselling as a response to disasters, although with very limited UK experience.

Missing from the available literature are accounts exploring counsellors’ experiences of working within unconventional boundaries in a traumatogenic environment, leaving a gap I hope to fill. I hope this study will contribute to the training of counsellors and psychotherapists in preparing for disaster counselling. Additionally, I hope it might raise some interesting questions for counselling practice generally.

METHODOLOGY

For this study, I assumed the ontological stance of a critical realist. Describing this position, Braun and Clarke (2013, citing Madill et al., 2000) offer that a real and knowable world sits 'behind' the subjective and socially located knowledge a researcher can access. They suggest that this standpoint lays claim to the existence of some 'authentic' reality to produce knowledge that can make a difference (Stainton Rogers & Stainton Rogers, 1997, in Braun & Clarke, 2013). It is this 'knowledge that can make a difference' that I hope will be a product of this study.

Epistemologically, I assumed the position of contextualism, described as 'the human act' in context (Tebes, 2005, in Braun & Clarke 2013, p. 30). To obtain some useful understanding of the human experience in this context, I interviewed counsellors for their unique personal experiences of working on Hestia's Overnight Hotel Counselling Service. Therefore, this study is underpinned by a phenomenological philosophy.

This type of inquiry lends itself to a qualitative approach which is not focused on numbers of respondents but on the quality of information they express, using open-ended or semi-structured interviews and their subsequent analysis (McLeod, 2015).

I chose thematic analysis (TA) as a method because of its theoretical and procedural flexibility. McLeod (2011, p. 146) describes it as 'flexible, straightforward and accessible.' Additionally, TA is a good fit because, as gathered from several sources, it allows the phenomenological world view of participants to be heard empathically and used constructively while giving room for the researcher-participant's own experiences, reflections, and interpretations.

Participants

Nine counsellor-participants who had worked at least four months in the Hotel Counselling Service took part in the study. Interviews lasted between 45 to 75 minutes each. Six of the interviews were conducted in person while three were done through Zoom online videoconferencing. The tool of choice was a semi-structured questionnaire because of its flexibility—fully structured might limit the richness of participants' experiences whilst unstructured could risk missing the point. Ethical approval had been sought and received from the University of East London (UEL). Consent to participate was sought and received from participants and no significant risks were identified.

Process

On completion of all interviews, they were transcribed and read repeatedly for familiarisation. There were no pre-existing frames of reference as an inductive system was adopted involving a 'bottom-up' approach to the analysis. Therefore, whilst reading, I made notes of significant ideas and repeated motifs on the margins of the transcripts. These helped generate codes from the dataset on subsequent readings. From these codes an initial set of themes was developed. The codes were critically reviewed against the dataset in order to ensure that they did not merely describe what had been said, but captured the essence and underlying meanings that were being communicated—a latent approach to thematic analysis.

After several iterations, a final set of themes was settled upon, of which the four most important were selected for this study.

Researcher

I was a counsellor on the Overnight Hotel Counselling Service. My attitude to boundaries is more fluid than some colleagues'. I acknowledge the inevitability of my own philosophy influencing the interpretation of the data. Ongoing reflections in my research journal helped me monitor my responses to the process and supported my attempts to bracket my biases. Vitally, I maintained my own personal counselling and supervision, using those processes to work through difficulties that arose.

FINDINGS

The research identified eight themes. For this article, I have chosen to present the four which I believe offer the most important learnings from the project. These themes are captured in the words of participants:

'It was challenging'

'It worked!'

'Grenfell happened because people weren't heard'

'I owe the way I practise now to that experience'

These responses were split into subthemes as shown in Table 1.

Table 1. Subthemes of responses

<i>'It was really challenging'</i>	<i>'It worked!'</i>	<i>'Grenfell happened because people weren't heard'</i>	<i>'I owe the way I practice now to that experience'</i>
Boundaries? What boundaries?	Questioning rules and assumptions	...A parallel process?	'I loved the experience'
The broader environment	What is counselling /psychotherapy?	...Or an existential touchstone?	Personal growth and professional development
Counsellor vulnerability		'People were grateful'	
		'This was therapeutic'	

The following section explores these themes and subthemes. Pseudonyms have been adopted for each participant, who were all counsellors on the project. Where I have paraphrased parts of a lengthy quote, this is shown within a pair of square brackets. 'Clients', 'residents', and 'survivors' have been used interchangeably.

'It was challenging'

Predictably, participants reported finding the experience challenging. Mae spoke for many when she said, 'I found that very challenging where therapists were actually used to working in a very traditional way'. Participants seemed to agree that the greatest challenge related to the nature of boundaries.

Boundaries? What boundaries?

Participants experienced conventional boundaries being crossed routinely. With the only clear boundary being the starting and finishing times of shifts, every other 'usual' counselling boundary was 'non-existent'. Hope said, 'boundaries were crossed, many, many times' from being asked very personal questions by clients (which many counsellors felt obliged to answer directly) to being invited by clients to their bedrooms (a request which some counsellors found challenging to navigate).

Inappropriate space for the work was considered a major difficulty. Words like ‘terrible’, ‘exposed’, and ‘unsafe’ were used to describe it. Many participants expressed their struggles with the environment and especially the lack of privacy, and confidentiality, that it fostered. Lorraine captured this when she said:

It was... difficult sometimes to actually practise. Sometimes you’d be talking to residents, and it’s a busy time of the year for the hotels, and it’s Christmas, and you’ve got people dressed up, and it’s all these opulence and luxury around. And people are drinking, and they’re drunk, and it’s noisy, and it’s coachload, after coachload, after coachload of people... It was challenging...

Along similar lines, Mavis said that the blurred boundary of physical space for the work prevented her from going further/deeper with clients. She said she felt like her hands were tied by it. For Sophia, a major challenge was being asked by clients to join in their celebrations. She explained:

Sometimes it’s someone’s birthday [and they invite you]... Celebrations was a difficult one, because you’re in their setting... they’re having the party right there in front of you, you know, you’re in their house, this is their home, the foyer is their space, you know, if they’re going to have a party, it’s going to be in the foyer... So that was another challenge.

The open-ended nature of the work was also a challenge where, conventionally, a session was a set 50 or 60 minutes at a pre-arranged time each week. Some counsellors expressed feeling overburdened by clients’ demands—sometimes finding it difficult to finish by the 3:00 am closing. For others, it raised their levels of anxiety and self-doubt. Charity recalled how anxious she was when she learnt what the work might entail and that there was no ‘assessment’ of clients as would have been the case in usual agency counselling work.

Some participants expressed frustration at not being able to practice counselling ‘as per norm’ while others acknowledged that the unique needs for the service necessitated a unique response. This understanding, they said, helped them get on with the work. Faith summed it up: ‘the challenge is in that sitting in not knowing what is right... [because of the absence of conventional boundaries]... but going with it at the same time’.

The broader environment

Contributing to the challenge was the broader environment which included hotel staff and guests, commissioners, other service providers, and even taxi drivers.

Some participants found hotel staff cooperative while others found them rude and judgmental—at least, initially. Common to all participants was the experience of emotionally supporting hotel staff and random hotel guests while on shift. An instance was reported where hotel staff passed off a suicidal guest as one of the Grenfell residents, leaving the counsellors feeling exploited.

Counsellors said that they found the pressure and interference from the council and commissioners difficult. According to James, they kept ‘wanting to change and refocus and reframe [the service] from week to week, from month to month and develop other things and change other things’. This seemed to have added to the sense of chaos that felt all pervasive.

Participants also expressed discomfort with the politics and rivalry with other service providers with which they sometimes had to contend. Others shared experiences of continuing the work by emotionally supporting their taxi drivers all the way home.

Counsellor vulnerability

Not surprisingly, participants reported feeling vulnerable. Arrangements were such that counsellors needed to have an open stance in a public place so that clients could approach and engage. However, this also attracted unwanted attention. Lorraine explained:

It happened a couple of times that myself and a colleague were asked what we were doing in the hotel and why we were there for so long... to be asked that question, you kind of wondering what they're inferring. Because we had seen other pairs of women sitting and looking for male company. Why am I trying to be so delicate with what I'm saying? So, we were wondering if we've been compared with that? Or if they felt like we were going to do something bad or illegal... We felt judged.

Many counsellors reported struggling with exhaustion and feeling the need to power through until they became too ill. Some reported experiencing symptoms of vicarious trauma during the work and a few others said, even a year afterwards, that they were still in the recovery process and sometimes were still severely triggered.

'It worked!'

Participants were eager to point out that despite the challenges, the service worked—many residents engaged with it. Some who did not directly use it signposted others. Some residents communicated to the agency that they slept better knowing that the service was there every night.

Questioning rules and assumptions

The fact that the service worked despite its challenges seemed to have caused participants to question many rules and assumptions they held about counselling and psychotherapy. James said:

It was really challenging of boundaries, and it was challenging in a very positive way of existing boundaries within therapy. It makes us ask... [whose purpose is the boundary serving?] And the challenges in boundaries, like that of contact, were really useful to reflect on as a therapist... the meaningfulness of these boundaries, and why we make them...

For Sophia, hugging clients was okay provided the relationship remained professional. The challenge, she said, was in ensuring that clients recognised it as a professional relationship. She insisted that sometimes a boundary should be breached in order to honour the relationship, citing an example:

I did a New Year's Eve shift. And a few of the survivors were like, come on, let's have a shot for the New Year, you know, and I said, you know what, I, I wouldn't, I don't drink. But I thought to myself... if I drank, would I take a shot with them?... Yes, actually, I think I would have because there was something about the relationship that was built between us, that meant that I wanted to celebrate that too, and to take a shot and to say goodbye [to the end of that year]... And it can mark a moment of connection, it can mark a moment of, you know, a relationship there innit? There's something that we've done together, you know, we've taken a shot and we've marked a memory, and this is New Year's Eve, you know...

Receiving and giving gifts was a struggle for many participants initially. However, in exploring the phenomenology of gift giving and questioning the meaning and purpose of boundaries, many participants eventually came to view good boundaries as those flexible enough to accommodate sociocultural differences and individual preferences. Mae explained, 'they want to... give you food, they want to give you presents, but on the other hand, it's also part of their culture that they share these things'.

For Mavis, it was important to respond to clients' need for physical contact while being sensitive to cultural norms. She explained that although she was very relaxed compared with conventional counselling and psychotherapy, there were certain boundaries in place that were always upheld, for instance, she said, the offer to share a joint was always declined.

Many participants gave various instances of how they took responsibility for negotiating and communicating their personal boundaries with clients, and how well it seemed to work. Nevertheless, Charity cautioned:

I think some clients might have found it more, more helpful to have had the fixed boundaries, I think. There were certain clients that wouldn't... so, the guy that I used to share meals with probably wouldn't have found that helpful... [because he would drop in at different times on different days]... But I think there are certain clients that... might have found [conventional counselling boundaries] more helpful.

What is counselling/psychotherapy?

Questions around what actually constitutes counselling/psychotherapy rippled through the dataset. Charity explained:

Even though it wasn't always kind of counselling as we knew it... for example, the gentleman that we used to share a meal with, he would just say certain things every now and again... and he'd say it in quite a matter of fact way, but it was like he needed to get that out... But it was very much like sitting and having a chat. It wasn't necessarily traditional counselling...

Most participants shared similar anecdotes, and all confessed to questioning what they had previously assumed about boundaries and 'doing therapy'. Mae summed it up: 'was this therapy? Yes, it was therapy—just because it's not prescribed in a particular way doesn't mean it's not therapy'. Sophia said she attempted to work it out collaboratively with clients:

For me, it was important for the residents to understand counselling that was taking place was new, we had no blueprint, we'd never tried this. And I think for me, honesty was the best policy because even in terms of like, Okay, so this is counselling, what's counselling then? And, you know, I said to them... this is new for me [too]... So, we're going to work at this together, we're going to have to figure out what counselling is together... I've made it into a joint bit of work for the both of us so they felt like they were counselling themselves as much as I was...

It seemed when all was stripped back, counsellors drew on their inner resources, and, according to James, learnt that the more important boundaries were psychological, and that the healer was within. He said:

The only thing you can bring is you and the healer that is you, all the skills that you've learned you need to use them to secure this, this moment that might be five minutes or might be two hours... good therapists should be able to shed themselves of their boundaries, and of those trappings that give them the boundaries, and create them themselves psychologically...

'Grenfell happened because people weren't heard'

Participants expressed anger, hurt, and strong opinions about the Grenfell tragedy and indignation at how survivors were dealt with in the aftermath. James put it bluntly: '[The tragedy] of Grenfell happened because people weren't heard. And then their experience in the aftermath was again not being heard'.

Mae shared that initially there were trust issues from residents probably because of having encountered other organisations who seemed to continue the culture of ignoring them. Other participants flagged how clients had felt treated like numbers by statutory services and unheard by their council. Charity elaborated:

A lot of the Grenfell survivors at first, when we said we were 'counsellors', they thought 'councillors' with 'CIL', council members, and they were really untrusting, and they were like, 'we don't want to talk to you', you know? And then we'd try to explain, 'Well, no, we're not that sort of... we're counsellors who could listen to you... we're just here for you to be heard...

For Lorraine, working in that setting brought up issues of social injustices and their impact on individuals and communities.

...A parallel process?

Participants seemed reluctant to share their own experiences of feeling unheard during the project. This reticence arose probably through their appreciation of the constraints on the agency and so did not want to appear critical of it. Nevertheless, with an assurance of anonymity and the prospects of providing a learning experience for the profession, many eventually lifted their self-imposed censorship.

When they opened up, it became apparent that some counsellors sometimes felt unheard, unseen, and unwanted/excluded. Some felt disrespected, distrusted, and disempowered by the disorganisation and chaos that seemed to pervade the service. These feelings seemed to mirror clients' own experiences.

Mavis shared that certain issues that happened on shifts never made it to group supervision, probably because of the mutual distrust between counsellors and the agency: an apparent parallel to the experience of Grenfell residents and the London Borough of Kensington and Chelsea. Faith explained:

[It was almost like] we lived without a supervisor. And then you don't even know whether, whatever you bring there is a safe enough... because there were people who used to work, and they end up not coming for whatever reason, we don't know what is that?... So, it was stressful, like not to know what decision has been made and why... So, the treatment wasn't respectful...

...Or an existential touchstone?

Did such a parallel process facilitate in counsellors a greater empathy for their clients? Most participants recognised something in clients' experiences that resonated with theirs. For instance, Mae had experienced a fire at night while living in a tower block, and, just a few months prior to Grenfell, Hope had moved into temporary accommodation because of a fire in her flat. Sophia elaborated on her own existential touchstone as she worked with a group of clients:

They were young, they were angry. They were pissed the fuck off. They were, sorry, excuse my language... But they were angry, angry, angry young people... I needed them to be open to the idea of talking... I think there was something about me... just welcoming the anger.... I needed them to know that their anger isn't scary, and that, that anger had a place... and allowing our voices to be heard... for me, that was important. I wasn't there to judge them on their anger. I was there to hear their anger. I was here, I was there to provide and create a safe space for their anger...

Sophia went on to explain that her motivation was the support she had received when she had battled rage as a young person due to her own traumatic experience.

Most other participants also shared how they personally identified with clients' experiences, worked the human connection with them, and by the end had come to feel integrated in the community. Grace said, 'This is my community'. Sophia went further: 'These

were my people; they are my people. *They are me; I am them*. That could have been me in that building. That could have been my family in that building’.

This deep and personal connection to the material and clients, probably accelerated by an absence of conventional boundaries, seemed to work for clients, despite the ‘chaos’. Counsellors seemed to have been working consistently with advanced empathy, engendering relational depth, and proving the common factors’ view on the importance of the relationship for successful therapeutic outcomes (Duncan et al., 2004).

‘People were grateful’

Participants offered their experience that client feedback typically was of appreciation. Grace said:

They were grateful. Once they accepted who we were, and once they felt they could trust... there was a lot of expression of gratitude... that at a very, very difficult time in their lives, they found complete strangers who would sit with them in the middle of the night, sometimes in very awkward places, not to undo what has been done, but to be present in the aftermath...

James said that clients not only appreciated being heard when they needed to speak but also that they valued the effort counsellors made to try to understand.

‘This was therapeutic’

In parallel, participants expressed appreciation for this study. Some said that a ‘debrief’ at the end of work would have been validating. Faith said that she found the reflective process instigated by this research was therapeutic.

Many expressed the view that it was useful to have a shared space in order to reflect on the work and process some of their experiences. In some cases, participants’ views on certain aspects of the work changed during the course of the interview. For example, as the process went on, Mae’s initial criticism of counsellors giving gifts to clients softened as she began to recognise the probable benefits to clients. Similarly, her position with regards to counsellors floating from one hotel to another changed in the interview process as she recognised the strengths of that model.

Lorraine said reflecting on the work for this research brought to her awareness just how involving it was, and its immense impact on her personally and professionally.

‘I owe the way I practise now to that experience’

Participants said the experience was painful in many ways, and probably for the same reasons, stimulated growth. Lorraine said she owes the way she practises now to that

experience, which, she said, shaped her as a professional, boosted her confidence, and enhanced her desire to make counselling as accessible as possible.

Sophia said she has taken the flexibility she experienced on the project into introducing new ways of working that enhance client autonomy, not just in private practice but also as an employee. She said:

[I've learnt that]... counselling is not bound to one room, it's not bound to 50 minutes, yeah, it's not bound to weekly-weekly sessions... [in my present employee role] my work with Grenfell has enabled me... to introduce ... single session therapy... and in a model which allows us to now see patients in a one-off session for 90 minutes [and] gets us to work with them in a way that allows them to really focus on the current issue...

She explained that in this model, after the initial stand-alone session focusing on the here-and-now issue(s), clients were given two weeks to consider what they wanted thereafter. Her experience has been that some report back that the single session was sufficient while others choose to take up the offer of additional sessions. She explained that this model was 'allowing people to exercise their autonomy in a conscious way... Grenfell gave me the idea... working in the hotels and being so fluid'.

'I loved the experience'

Lorraine said being part of the project filled her with pride in her professional choice. Mae said she felt humbled by the experience and that it was the most meaningful job she had ever done. Faith said she found it gratifying. James said he felt proud of and tremendously inspired by the clients and the work with them. For Grace:

It was... an absolute honour to work with the women and the men who stepped forward... that will be something I'll take with me to my grave... It was a special time, it was difficult, it was cold, it was uncontained, it was puzzling, bewildering, tragic, sad, unbelievably sad. But it was an honour... It was an honour to be called upon and to be in the position to say, Oh, I can do this... I can try... I don't know what we're doing. Freud didn't talk about a hotel. Melanie Klein didn't talk about a hotel for seven hours. I can try. We can try...

The sense of having responded to an important call was very present. Mavis said: 'You know, the thing is, as far as I'm concerned, the call went out. We responded; we did the best we possibly could under the circumstances'. However, Charity wished more could have been done:

I found myself disappointed... because I really wanted to help, and I feel like... even now I feel like... I did what I could because I did... I worked with the people that I was presented with, but I feel disappointed that I couldn't help more...

Nevertheless, that sense of gratification seemed undiminished for she added, '[But] there's a certain level of pride that I was able to help some... I felt really proud that I could be a part of [the project]'.

Personal growth and professional development

Participants reflected on how they have grown through this experience. Charity said that working on the project boosted her confidence as a person and as a therapist, and that it was the beginning of her developing a better relationship with uncertainty.

She said her relationship with boundaries has evolved such that she has learnt to tighten boundaries and be relaxed with them. This sentiment was expressed by many, including Hope, who, having accepted and committed herself to the idea of ‘some flexibility in boundaries can be beneficial’, reported struggling with the tension of implementation in her private practice.

Additionally, Hope said she has grown to appreciate her own uniqueness and has developed an improved confidence in her ability to work with a diverse range of people. For James, growth has resulted in a change in professional direction towards teaching, training, and active collaboration with professional bodies.

DISCUSSION

This section seeks to critically compare the available literature reviewed with some of the experiences of counsellors on Hestia’s Overnight Hotel Counselling Service.

How it worked

Two counsellors were assigned to each participating hotel every night. They would typically set up in the hotel lobby/bar/restaurant and engage with residents who approached them. Most counsellors floated between hotels as opposed to being assigned to specific ones. Each counsellor had a scarf—a symbol of the service by which residents could recognise a member of the team. Appointments were not made for residents in advance with the counsellors. Rather, residents approached the counsellor(s) when they wanted to engage with the service.

Sometimes both counsellors listened to and interacted with a group of residents—in family groups and/or friendship/community groups. At other times, individual residents would ask for a one-to-one with one of the counsellors. Some hotels offered the service a separate space (for instance, a boardroom) for such encounters. In those hotels that could not offer the separate more private space, the counsellor and resident would go find a relatively quiet space to meet for a little while, with the other counsellor attending to any other resident/group of residents. It was all very informal.

Working towards a fit

Counsellors complimented the agency’s efforts to create a service that strove to fit the clients, and so were forgiving of the difficulties encountered with the unconventional boundaries. They seemed to understand that effective counselling following a disaster may challenge the

received wisdom of a static therapeutic frame. This mindset is underscored by Fritz and Williams (1957) who assert that many problems of disaster management result from a lack of 'fit' between the conceptions of need of the victim population and of the agencies trying to help them.

Hestia's Overnight Hotel Counselling Service worked towards a 'fit' with the needs of the Grenfell survivors and towards offering a therapeutic presence (Geller, 2013). It was that presence which helped towards *Working at Relational Depth* (Mearns and Cooper, 2005) with individual survivors and the community. Feedback received during the service's operation suggested that working outside conventional counselling boundaries enhanced the quality of the therapeutic relationship. A good therapeutic relationship, apart from clients' own resources, is regarded as the most common factor in successful outcomes in counselling and psychotherapy (Duncan et al., 2004).

Understandably, working in this way was challenging for practitioners. In their study of postdisaster counselling following the 2011 earthquakes in New Zealand, Cooper et al. (2018, p. 433) presented many examples of 'boundary crossing including accepting gifts from clients, hugs and kisses at the beginning and end of sessions... and disclosure of personal information to the client'. Participants echoed encountering such dilemmas during the Overnight Hotel Counselling Service.

Diversity

Linked with working towards a fit was the recruitment of diverse practitioners to serve a diverse client community. Feedback from clients was that they liked that the service was resourced with a diversity of counsellors. It probably helped with their perceived accessibility of the service.

Participants also said that they found the diversity beneficial. Grace said that it enhanced her empathy with clients' issues and frames of reference. For Hope, working in that diverse environment was positive because of the opportunity it gave her to work with a diverse range of clients and alongside a diverse range of therapists, which all helped her grow in her confidence in working with 'non-traditional' counselling clients. Most participants agreed with Hope that they learnt a lot about diversity issues from this experience.

If there had been opportunities for metacommunication in the team around diversity and difference and what peculiar challenges it fostered for some counsellors, it might have been even more effective.

Counselling as a part of, rather than apart from, community

Many participants said they blossomed from being in community, although one said she sometimes struggled with feeling left out.

Traditionally, counselling prides itself in confidentiality, and privacy, with most practitioners working on a one-to-one basis with clients in 'protected' times and place. The Hotel Counselling Project was markedly different: a community of counsellors worked with a community of clients in public spaces, and, for a season, their lives were intertwined. Lorraine explained:

Being with [the clients and your colleagues] on New Year's Eve... and Eid and sharing those times with them, you're never going to get that with a client [in traditional counselling where]... you [might] bring your personality into it... you might share a bit of your life, you will share emotions in the therapy space... but you're in this kind of *siloed existence* with your client. You're in, it's that room, it's that hour. At most, you might have some other contact like the odd phone call, or email... But with these [Grenfell] clients, we got to know their lives, *being in their lives... woven* into it ... *enveloped* in this process...

Carrick (2014) explains how a crisis provokes dissonance, where the client's self-concept or life-picture is so severely threatened that their view of the world is shattered and needs rebuilding. Is there something about a community space that can bring an added dimension to healing and rebuilding? Zielinska (2020) explores the value of 'casual chats' in community settings, suggesting that a promotion of connection within communities would help 'combat the tide of human misery and disconnection in the Western world'.

For 'counselling as a part of community' to work, the counselling and psychotherapy profession will have to rethink its 'rules' on boundaries, and begin to see them as 'fences' and not as 'shields.' Sophia explained:

I [used to view] boundaries more of as a shield to keep the world away whereas now I see them as fences... not so much to keep the rest of the world away but to be... integrated in the world and what's around us... I described them as a fence because when you have your fence, you can see between, you know, you're still integrated with the world, you can still see, the world can still see you, the world can even hear you, but they can choose not to listen, you know, and vice versa. So, there's something about being integrated, so integrating counselling with the world itself in the world around us, rather than it being in a box ... a shield, hiding...

One significance of having a community counselling space is that it is a healing presence not only for those who directly engage with it, but also for those who know of its presence. For instance, Dale (2016, p.78) shares this feedback from somebody who, although never actually accessing her Listening Service, said: 'I am so glad you are there. Knowing that you are there, and that I can come or ring, means everything'. This comment echoes some of the feedback received from individuals who did not use Hestia's Overnight Hotel Counselling Service directly but communicated the comfort they felt simply by knowing it was present. Furthermore, they sometimes referred others to it. Zielinska (2020) shares a similar experience on her 'Talking Booth' project.

Preparedness for disaster counselling

The question of how unprepared the profession is for counselling during disasters was raised by many participants. None had received specific training for disaster counselling/psychotherapy during their initial training. As well as this lack of training, there is a dearth of literature on the subject.

A consequence of this lack was that many counsellors struggled with cognitive dissonance. For instance, Faith shared how she struggled with a lack of assurance, a dissonance between her training/previous practice and working on the project, 'not knowing what is right and what is wrong'. Hope elaborated:

It would be nice to have clear protocol that the residents will know, that the residents [clients] will know, in place. But it was what, I know, it was what it was, it was so unique... [but I wish they knew]... about like, not to offer food for us, you know, or, like, I came earlier, I think twice I... consciously came earlier before the shift, so I can have my food, and then start the shift, and twice, the resident, the resident approached me and said, you know, 'The bill is taken care of'. And I couldn't, and I was like, 'No!', like, I was thinking everything in me was going like, 'Oh, my God, this is no!'... it's lovely, but you know, but it's just created... [inner conflict]... I was thinking, 'Oh God, is this okay? I'm working... [I'm supposed to be working, not being fed by my client]'...

She subsequently made alternative arrangements for her pre-shift dinner.

The lack of clear-cut policies and procedures was experienced as irritating and conflict-inducing within and between counsellors. In this respect, practitioner training and prior experience seemed somewhat of a hindrance in an ever-evolving situation where no blueprint existed. It would appear that many counsellors had so internalised the rigour of their training manuals especially around boundaries and one-to-one time-limited sessions that working in open-ended community counselling and in tandem with another counsellor was like learning a new language post-haste.

Participants expressed a wish that they had been offered short specialist training while working on the project. Nevertheless, they agreed that their prior practitioner training was useful, however inadequate it was specifically for disaster counselling. James said it was important to learn how to be critical in using training as a tool rather than letting it be a hindrance, while Lorraine shared a principle of the learning of the rules (boundaries) being necessary in order to know how to break them safely. Grace said that having prior training and experience meant counsellors were better able to look after themselves, even as they muddled their way through uncharted territory.

Bottomline

Hestia's Overnight Hotel Counselling Service shows what is possible: this novel project was largely experienced as successful essentially because it privileged working towards a fit with clients over enforcing conventional rules of boundaries. In so doing, it was able to develop a therapeutic relationship and community that was experienced as beneficial by clients.

Furthermore, although it was infinitely challenging, it nevertheless resulted in exponential growth and development for many practitioners.

How much more effective could it have been had counsellors received training for disaster counselling? With adequate training and preparation prior to disasters, and suitable support and (refresher/continuous professional development) training during disaster counselling, practitioners would probably have felt more assured while doing the work, and better able to keep themselves safer in it.

Additionally, it could benefit society if, even in ordinary times, counselling and psychotherapy practice strives to work towards becoming a part of, rather than apart from, regular human community in all its 'messy' diversity.

Implications for training and practice

A significant implication of this study is that it would be beneficial for training providers to make disaster counselling a key element in their course curriculum. Additionally, counselling professional bodies could develop resources that members could draw on should they choose to engage in disaster counselling.

Furthermore, as a result of this research, it seems worthy of consideration for statutory provision, counselling agencies, and private practitioners to be more open to the benefits of flexible boundaries.

Limitations and implications for further research

One limitation of this study is the dearth of literature on the subject. This also means there is scope for further research.

Another possible limitation is that I was a colleague on the project. This fact could have attracted certain colleagues and not others, and therefore inadvertently affected the content, but not necessarily the quality, of data that was gathered. However, this same fact may have made it easier for participants to trust me with their experiences. Additionally, in a fully qualitative thematic analysis such as this, researcher subjectivity is considered a resource (Clarke & Braun, 2018).

Nine practitioners out of forty-six responded to the invitation to participate. This was sufficient to explore and extract some meaningful learnings from their experiences. Nevertheless, these views and the researcher's interpretations of them may not fully reflect the general experience of all practitioners on the project.

Neither is it known the extent to which the findings in this study can be replicated in other contexts without considering the specific circumstances of those situations. Therefore, further research is essential, especially:

- To gain clients' perspectives of boundaries in disaster counselling as well as their experience of boundaries in more conventional counselling.
- To develop further the concept of community counselling (by a community of counsellors with a community of clients in community settings).

Additionally, further research focussing on the residents' perspectives and experience of this Overnight Hotel Counselling Service would be invaluable to the field of counselling and psychotherapy.

CONCLUSION

This study set out to explore how counsellors experienced working with unconventional boundaries in Hestia's Overnight Hotel Counselling Service for survivors of the Grenfell fire. Counsellors found that although it was challenging as might have been expected, it worked for clients and was stimulating of growth for practitioners. It thus caused practitioners to rethink their practice and ask questions of concepts, theories, and 'rules' that had been taken for granted, especially those relating to boundaries.

The study has highlighted the importance of diversity within a counselling service which was tenacious enough to want to work with people by connecting with them as human beings, even when all the usual 'trappings' of a 'clinical' counselling environment were absent.

It has raised a question, which needs to be addressed, regarding the profession's preparedness for disaster counselling.

Finally, it has flagged the value of extending counselling from a siloed practice into unconventional community practice, although more research is necessary to develop this further.

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APPENDIX

The Scarf—a symbol of Hestia’s Overnight Hotel Counselling Service by which the counselling team was recognised by residents.



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This work is dedicated to the victims and survivors of the Grenfell Fire Tragedy—a disaster that should not have happened.

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PEER-REVIEWED ARTICLE

How practitioners perceive ethics in psychology: The pilot study

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ABSTRACT

Mental health helping practices are often regulated via ethical rules. In some countries those rules are imposed via legal regulations, in others they are imposed by professional communities and are not state enforced. Surprisingly, empirical studies of ethics are somewhat limited. Also, ethics are often defined as ‘statements from the ethical codes’. However, obviously, written rules are perceived and followed by real people. So, the question is how these real people actually perceive what was designed and written as ‘norms’. The research question of this study is: how is ethics subjectively perceived by helping professionals (psychologists)? The pilot study was conducted on a sample of 89 practicing psychologists (data were collected Feb–Jun 2021) who were asked to evaluate ethical ‘norms’ from three ethical codes using 10 criteria. This showed that, after factorization, psychologists ‘divide’ norms into two groups: those protecting the wellbeing of the professional community or protecting the wellbeing of the client.

KEYWORDS: psychological ethics; ethical rules; ethical codes; ethical values; subjective ethics; psychological society

INTRODUCTION

Sometimes among psychologists one can meet the belief that codes or rules themselves insure professionals from ethical misdeeds. However, experience shows the contrary. For example, ethical codes have been changed by people, who, by virtue of their position in the psychological community, had to 'protect' the 'ethicity' in order to receive 'benefits' from cooperation with some agencies (see, for example, Hoffman, 2015; Kryuchkov, 2021).

The literature shows that ethics in applied psychology and psychotherapy have become a crucial topic since the beginning of the 21st century—for example, the Hoffman report, its perception (see, for example, Kryuchkov, 2021), and the general discussion around ethical issues and ethical status of so-called operational psychology (see, for example, Staal & DeVries, 2020; Soldz et al., 2017; Williams & Kennedy, 2011).

The growing popularity of online psychology services and telepsychology also sets ethical questions for practitioners and researchers (see Centivany, 2016; Gavin & Rodham, 2015; Gamble et al., 2015; Stoll et al., 2020).

Generally, as noted by Hillner (2000), psychology does not exist in a political or social 'vacuum'. Both construction and application of psychological knowledge are 'morally stipulative endeavors' (p. 38). This has led to the growing number of papers dedicated to ethics in psychology, discussions, and some research. Unfortunately, though, there is not an overwhelming amount of empirical studies on the subject. For example, Linstrom (2009) explores the effectiveness of moral development and training of Master's-level counseling students on the use of an ethical decision-making model in making ethical decisions. Using ethical dilemmas and the DIT-2 test, she, unfortunately, does not satisfactorily answer the question if ethical decision-making models really work. Ieva (2010), in her dissertation, examines the links between social-cognitive development, locus of control, and ethical and legal knowledge of the school counselors. With co-authors, Ieva also examines ego development, legal and ethical knowledge, and ethical decision making of school counselors, finding associations between high ego maturity and high ethical and legal knowledge scores (Lambie et al., 2011).

Lloyd-Hazlett and co-authors explore perceptions of client referrals among student counselors. Using the semi-structured qualitative interview as a primary method, the authors discovered nuanced understandings of competence, values, referral processes, responsibilities of supervisors, and learning environments (Lloyd-Hazlett et al., 2017). Lloyd-Hazlett and Foster (2017) study the connection between professional ethical identity development and moral and intellectual development. Using the DIT-2 test, the authors found that moral development was the most significant predictor of professional ethical identity development.

Interestingly enough, Tsai (2013), in their thesis dedicated to the impact ethical education has on counseling students, demonstrates that students who received varied forms of ethics education and in different demographic information groups did not demonstrate significant differences in the degree of their moral development and sophistication of ethical reasoning. Boccio (2021), in her study exploring school psychologists' ethical decisions, finds that the use of a formal decision-making model did not result in better ethical resolutions. Perry (2020), researching the factors affecting school counselors' ethical decision making, discovered a statistically significant negative relationship between ethical decision making and a construct she called 'global belief in a just world', as well as a significantly positive relationship between ethical decision making and coursework.

Of special interest was research dedicated to ethics in its formal form—ethical codes. As noted previously, 'external' ethics are external in relation to the person (Kryuchkov, 2021). Many authors are considering different ethical codes, such as the American Psychological Association (APA) Code of Ethics, the Canadian Psychological Association (CPA) Code of Ethics, and some others. For the purpose of this study, articles dedicated to ethical codes were reviewed.

Parsonson (2020) questions the importance of teaching ethical codes to psychology graduate students. Though the response rate of her survey was low, qualitative analysis showed differences in teaching approaches between American and Canadian professors teaching ethics (especially in the issue of teaching different codes or international codes) and as a result allowed the author to pose the question if the codes should be taught 'not as absolutes, but from a philosophical as well as rule-bound perspective?' (p. 7).

Clark (2012) deconstructs the CPA Code of Ethics, discovering some biases reflected by this code and offering to drop the ranking of values offered by the code for the psychologists to base their decisions on. Hilbig et al. (2022) discuss the deception of research participants. They identify a gap in the ethical codes and offer to redesign the codes to fix this flaw. Tudor (2011, 2017) analyzes ethical codes and general regulations of psychology as a profession in New Zealand and reveals a lack of acknowledgement of people's subjectivity and internal attitudes to the formal regulations.

Generally, codes often become the subjects of theoretical proceedings, though rarely become material the empirical studies. This research employs ethical codes as the object of the study, which brings some novelty and topicality to these proceedings.

The main purpose of the present study is to explore how ethics is subjectively perceived by psychologists. In this research, the claims of Tudor (2017) are somewhat addressed, trying to explore actual subjective attitudes towards formal papers.

So, the question is, how do professionals really perceive written ethical rules? The deeper question is—what makes us behave 'ethically'? Some authors divide ethics into external (written) and internal (internal attitude), speculating that internal ethics are the real core that

define the behavior (see Kryuchkov, 2022), while others offer more value-based codes as the way to increase 'ethicity' (see Clark, 2012). Some authors believe that the hermeneutics of love could form the ground for research and practice (see McInerney, 2016; Robbins, 2016). The main purpose of this article is to explore how practitioners perceive the 'external' ethical rules 'given' to them. External means that these rules are external in relation to the perceiving subject—the practitioner does not construct this rule, they are provided (supplied) with them by some 'external' authority. Do practitioners follow the rules just because 'laws are laws' or do they specifically 'relate' to the ethical rules given to them, classifying them in certain way or 'evaluating' them?

This is especially important because, as Peter Schmid once claimed, 'Psychotherapy is political or it is not psychotherapy' (Schmid, 2012, p. 95). In other words, since psychotherapists should (according to Schmid) and actually *do* raise their voice in society, within the broader context of 'wellbeing' including the wellbeing of society as a whole, the question of 'how do therapists (psychologists, practitioners, etc.) perceive ethical rules?' becomes crucial. What makes one person behave ethically and others not? If the political culture of psychotherapists and counselors as well as the wellbeing ('saneness') of the whole society is at stake, the questions such as 'do practitioners really perceive ethical rules seriously?' and 'how do practitioners relate to ethical rules?' become critical.

The formulation of the research question is somewhat similar to the purpose of this research: how is ethics subjectively perceived by psychologists? More specifically, how are ethical rules represented in the psychological structure of practitioners? Thus, this study is exploratory research. The methods and sample are described in the following section.

METHOD

Sample

The sample was collected through social networks using the snowball method. Participants were invited via posts in the groups of professional psychologists. The sample consisted of Russian-speaking professionals, although the countries of origin and residence of participants were not controlled. It is important to note that in the country where the research was conducted, psychological practices are not regulated, as well as being not well-distinguished in terms of 'labels'. The only regulated area is medical psychotherapy, which is conducted by medical doctors. Even though non-medical 'therapeutic' practices are open as professions for people with different educational backgrounds, historically counselling, therapy, coaching, psychotherapy, and counselling psychology are considered as fields of 'applied psychology' (furthermore, the abovementioned practices are not very well distinguished between each other), and so, in this research, the sample was collected among psychologists. The level of

education, other than it being psychological (some people receive degree in psychology as their second degree), was not controlled. Also, how practitioners define their job (as psychology, counselling, coaching, etc.) was not specified, because they are mostly understood as synonyms, although approaches that the participants represented were controlled.

Data were collected through Google forms between February and June 2021. The sample consisted of 89 responses, though seven people did not sign the informed consent or left blank responses, and so the final sample consisted of 82 people.

The median age of the participants was between 36 and 55 years old. Specific ages were not asked for in the form, only the intervals. Four participants were between 18 and 24 years, three participants were 25–29 years, 11 participants were 30–35 years, 25 participants were 36–44 years, 30 participants were 45–55 years, eight participants were 56–64 years, and one participant was in the 65+ years group. Fifty-six participants identified themselves as female, 25 as male, and one participant declined to report their gender.

Most of the participants had education in the field of psychology. Twenty-two participants had a 'specialist' degree (joint 5–6 year degree, equal to a Master's degree), one participant had a bachelor degree in psychology, 21 participants had Master's degrees in psychology, seven participants completed studies in doctoral programs, five participants had a doctoral degree, 17 participants completed long-term postgraduate training programs in psychology, five participants completed short-term programs (up to one year), and four participants did not have any psychological education.

A question about practical training (not general psychology but counselling and therapy, as in the country where the research was conducted practical training is usually separate postgraduate education) allowed participants to choose 'all applicable'—long-term courses (more than a year), short-term courses, etc. Eighty participants took long-term courses, including 50 participants that took courses that were at least two years long.

Generally, participants were evenly distributed among therapy modalities. Nine participants reported that they did not follow a specific modality, while others were distributed among 19 different approaches. Thirteen participants reported belonging to psychodynamic approaches, 10 participants to gestalt therapy, nine to cognitive-behavioral (CBT) and client-centered approaches each, eight to family therapy, and seven to existential approaches. The other represented approaches included, for example, narrative therapy, body therapy, and psychodrama.

Sixty participants reported as working as private practitioners in counseling psychology, nine reported working in a state agency, four reported working in a privately owned agency (psychological center), five reported working as private psychologists but not counseling psychologists, and four reported working as psychologists in non-psychological organizations (e.g., business).

The study also controlled for the job experience of the participants. Twenty-six participants reported working for more than 15 years, 19 reported working 3–6 years, 12 reported working 1–3 years, 11 reported working 6–10 years, nine reported working 11–15 years, and five reported working for less than one year.

Sample limitations

Firstly, the sample consisted of Russian-speaking participants. National and ethnical origins of participants were not controlled. Gender identification was specified in a limited manner (female/male/do not want to report). Social and economic status (income) was not controlled for, nor was the participant's geography.

Also, as it was mentioned above, the sample mostly consisted of psychologists, excluding medical doctors and social workers, etc. (the presence of degrees other than in psychology was not controlled for). There was not any distinction made between different 'labels' of practical psychology—such as counseling, counseling psychology, coaching, etc.—because in the country where the research was conducted, they are mostly understood as synonyms and are not regulated.

Finally, the vast majority of participants were private practitioners, and so, potentially, the sample does not represent the agency-employed psychologists well.

Methodology

The methodology was ethically approved by the author's advisor and psychology department mentors. Research was conducted using Google forms. Participants were asked to assess, via Likert scales, 19 rules or principles (the actual wording depended on the specific code from which the rules had been derived) from the ethical codes (of three 'multimodal' professional associations—associations that do not belong to a specific approach but encompass professionals from different approaches under an umbrella of 'practical psychology', 'counselling', or 'mental health'). The codes chosen belonged to the three biggest multimodal associations in the country where the research was conducted.

Examples of ethical principles offered for evaluation were:

- The provision of psychotherapeutic services must be carried out at the highest professional level. Psychotherapists accept responsibility for the possible consequences of their actions and make every effort to ensure that their services are used appropriately.

- The psychologist proceeds from respect for personal dignity, human rights and freedoms proclaimed and guaranteed by the Constitution and international documents on human rights.
- Psychotherapists develop trusting relationships with those they work with. They are aware of their professional and scientific responsibility to society and the specific communities in which they work. Psychotherapists maintain professional standards of behavior, clarify their professional roles and responsibilities, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest to avoid misuse and harm. Psychotherapists cooperate, consult, and collaborate with other professionals and institutions to the extent necessary to serve the interests of those with whom they work. They care about the ethical conformity of the scientific and professional conduct of their colleagues. Psychotherapists tend to give away part of their professional time with little or no compensation or personal gain.
- Psychotherapists seek to benefit those with whom they work and take care not to cause harm. In their professional activities, psychotherapists seek to protect the wellbeing and rights of those with whom they interact professionally and other affected individuals. When conflicts arise between the obligations or tasks of psychotherapists, they try to resolve these conflicts in a responsible way to avoid or minimize harm. Since the scientific and professional judgments and actions of psychotherapists can influence the lives of others, they are aware of this and are prepared to take action against personal, financial, social, organizational, or political factors that may lead to the abuse of their influence. Psychotherapists strive to be aware of the possible impact of their own physical and mental health on their ability to help those with whom they work.

Each principle had a title (offered as it was written in the code from where it was derived) such as 'honesty', 'online therapy', 'responsibility for client', etc.

The abovementioned principles (rules) were offered for evaluation using 10 criteria:

1. Relevance/irrelevance
2. Feasibility/non-feasibility
3. Agreement/disagreement
4. Congruence with own values/incongruence
5. Reasonableness/unreasonableness
6. Clarity/non-clarity
7. Universality/specificity
8. Justice/non-justice
9. Usefulness/unusefulness
10. Helpful at work/unhelpful at work.

The criteria were developed by a group of four experts in both scientific and practical psychology (two with PhDs, two with Master's, and all experts had additional training in practical psychology and counselling).

Statistical analysis was performed using SPSS 17.0. The 19 rules evaluated by 82 people using 10 criteria as a result produced a three-dimensional system (rules/people/criteria). So, for the purpose of factorization, 19 ethical rules evaluated by 82 people using 10 criteria were converted into 820 'cases' (rule/criteria).

Exploratory factor analysis was used for statistical analysis of the data received. Put simply, in exploratory factor analysis it is presumed that variables are parts or functions of the common 'factors', and therefore variables can be associated with factors (or 'invest into' factors) (see, for example, Coolican, 2018). In other words, variations in observed variables mainly reflect the variations in unobserved (underlying) variables—factors.

RESULTS

Primary factor analysis resulted in five factors with little statistical power. When limited to two factors using promax rotation, the results were as follows. Two factors were identified, the first of which at the extreme point included three principles related to the good of the client—'confidentiality', 'good faith', 'responsibility to the client'. It is interesting that this factor also included (not at the extreme, but with statistical significance) the principle of 'online therapy' included in one of the codes. This could be explained by the high relevance for psychologists due to the issues of ethical regulation of online work in the era of COVID-19. Since online therapy had become more widespread by the time the data were collected (February–June 2021), it seems that professional regulations related to online therapy became more relevant for practitioners than they had been previously.

Other factors include principles mainly aimed at the benefit of the psychotherapeutic community—'honesty' (but formulated through respect for the 'law' and the constitution, as per the examples above), 'responsibility to the professional community', and 'research activities'.

As a result, the general interpretation of these data are ethical rules are perceived subjectively as either protecting the wellbeing of the professional community (Factor 1) or protecting the wellbeing of the client (Factor 2).

DISCUSSION

As the general research question of this study was ‘how is ethics subjectively perceived by the helping professionals?’, the results of this study quite plainly identify the division between ethical rules directed to the protection of community wellbeing (in general, though including professional community) and rules, and directed to the protection of the wellbeing of the person (client). In other words, practitioners ‘evaluate’ the formal rules and ‘put’ them into one of the two categories. This study did not try to address the question: ‘why practitioners follow/do not follow the rules’, though the results can be useful in exploring the question of ‘how do practitioners relate to specific rules, and if they follow them, for what good?’. Whose interests is the practitioner trying to protect by following a certain rule? The results at least give some grounds for reflexivity on ‘whose wellbeing do I try to protect?’.

This division lies somewhat parallel to the division between internal and external ethics offered by some authors (see, for example, Kryuchkov, 2021). Furthermore, as some authors make the division between ‘community and society’ as community based on ‘*communitas*’, having hermeneutics of love as the fundamental position, the presupposition on which any community action could be based, and society as ‘*socius*’ based on ‘*proprius*’—appropriation and ‘owning’ the hermeneutics of suspicion (see da Frota & Fernandes, 2020; Kryuchkov, 2018; McInerney, 2016)—the division of ethics on those protecting the ‘community’ (society in this sense) and ‘person’ seems valid. Some ethical rules are designed to protect ‘*proprius*’—the formal structure and power of society—and the formalized structures, ‘prestige’, and professional image of the ‘profession’, to protect the ‘brand’ of psychology as a helping practice. At least, those norms are perceived this way. The other norms are perceived as encompassing the wellbeing of those who are the main recipients of psychological help and care—the clients. Clients are those to whom practical psychology owes its main purpose and very existence.

What seems important is that such division is an internal one—it is the difference in perception. The practitioner attributes different rules that they perceive into one of the two categories. The actual deeds of practitioners nor the decision-making process were studied, though it is valid to surmise that in ethical decision-making processes practitioners rely on such a division they made, more than on the actual ‘text’ of the rules.

The results seem fundamentally important, because they to some extent show the structure of ethics (professional ethics) in real psychologists’ perceptions. It provides a basis for future research of relationships between ethical rules and personality of psychologists, as well as with work efficacy.

This study’s results led to the inquiry of how and what for the ethical rules written in codes are being created. In other words, who are the ‘stakeholders’ that get benefits from such rules? Who and what do we, as a community of professionals, protect in designing such rules?

Furthermore, it seems that one of the potential implications of this study for practice is the ‘questioning’ of the ‘norm’. The abovementioned ‘proprius’ is constructed through the system of written and non-written rules, and it is important to ‘question’ at least written rules and one’s own disposition toward these rules. The very disposition and one’s own ‘position’ also should be questioned—justifications of one’s own ethical deeds could (should?) be put under question.

As noted previously, ‘ethical deeds are suprasituational. They rarely satisfy the “here-and-now” goal; and, even if they do (i.e., the decision not to resist an oppression in order to get benefits), still it is an action within the “larger context”, which encompasses situational conditions and the full being of a person. What is much more important, from the suprasituational point of view, is that there is a person who bears responsibility for their own ethical deeds—neither ‘code’, nor governing body, nor colleagues’ (Kryuchkov, 2021, p. 7). The results of the present research demonstrate that practitioners perceive (or evaluate) ethical rules (at least, written rules) basing such evaluation (perception) on two major factors. In other words, each rule is being ‘questioned’—is this rule for the good of the client or for the good of the society? This study did not research actual ethical decisions, although it is believed that the discovery of such factors brings some novelty and can serve as an instrument for scrutinization of one’s own ethical deeds and values (what are my values ‘good for?’).

Somewhat addressing Tudor’s (2017) inquiries, this research goes beyond formally written rules exploring real psychologists’ attitudes and perceptions. In other words, ‘codes and laws are not the panacea’ (Kryuchkov, 2021, p. 4). This seems especially important since applied psychology becomes more and more political not only in terms of involvement into social life but also since the therapeutic position itself becomes ‘politically’ manifest. However, it is useful to ‘question’ the grounds upon which values, rules, and principles (including ethical principles) are standing. It seems obvious, that as a political process, psychotherapy ‘serves’ different stakeholders. For a practitioner, it is crucial to be aware of whose wellbeing the practitioner serves when making ethical decisions.

The results do not belong to nor test a specific modality or school of psychotherapy. Although, it is believed that they are relevant and potentially useful for training in any psychotherapy school. While ethics are often being taught as a set of ‘rules and codes’, even within the more humanistic approaches, disclosure of the internal representation of formal ethics can foster future practitioners’ own reflexivity.

LIMITATIONS OF STUDY AND FUTURE DIRECTIONS

The main limitation of this study is its sample. This study is a pilot study, and so the results must be verified on a broader sample. In future studies, the number of participants should be

extended, as well as their demography, and variations that could depend on participants' demographical, gender, and/or social status. While most authors recommend at least 100 participants for exploratory factor analysis (Kyriazos, 2018), statistically significant factors were found in this pilot study. Of course, the sample needs to be extended for future explorations.

Another important limitation is that this study does not show the relationships between any approach preferred by practitioners and their ethical perception. Future studies will test the results from the sample consisting of professionals belonging to certain approaches, such as on specific samples of cognitive-behavioral (CBT) and client-centered (CCT) therapists, for example, to check the effect of the approach's philosophy on the perception of ethics.

One more direction for future studies is the phenomenological study of psychologists' perception of ethical rules through an interview, which can help to explore the inner structure of such perception, as well as connection, between ethical rules and personality.

Finally, decision-making processes could be researched using ethical cases and dilemmas in order to test if practitioners follow the division of ethical rules into rules directed at community wellbeing and rules directed at wellbeing of the clients, in a real decision-making process.

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NOTE FROM THE FRONT LINE

A conversation with Eugene Ellis and David Weaver

Eugene Ellis ^{1*}  and David Weaver

¹Director and Founder of BAATN; Honorary Fellow, United Kingdom Council for Psychotherapy; Editorial Board Member, *Psychotherapy and Politics International*

ABSTRACT

Eugene Ellis, founder and director of The Black African and Asian Therapy Network, talks with David Weaver, activist and community developer, about his time as President of the British Association for Counselling and Psychotherapy (BACP) and his role in visioning the significantly funded bursary scheme and mentoring project to support racialised communities.

KEYWORDS: race; counselling; psychology; bursaries; mentoring

Eugene Ellis: I want to start off by reflecting on when we first met a number of years back. I think you had just started your role as president of the British Association for Counselling and Psychotherapy (BACP).

David Weaver: Yes, we were at a conference, and we were introduced to each other. I remember feeling—and this is actually quite germane—if I don't forge proper relationships with you and people like you, it's just going to be a ceremonial piece of nonsense. You spoke as well, and I remembered feeling, actually, what have I taken on here? Because there's a whole history that came before me, and I wasn't navigating the level of detail and insight that I saw presented at that meeting from a range of people, including yourself, because of the organisation that you represented.

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It is really important for me just to work in alignment with what I see as my noble cause. I talk about this a lot. My noble cause being really trying to make a contribution, in whatever I do, to making a difference around the life chances of black people, all people really, but in particular, giving some specificity to black people.

Within the counselling profession, I saw a unique opportunity to do something. I didn't know what it was, but I remember feeling that I've really got to get involved in this, and I've got to be relational in the approach that I have some insight into, but not the deep dive insight that many others have. Also, feeling that whilst not having that deep dive experience brought some disadvantages, it also brought some advantages because counselling, and I say this all the time, is too important just to be left to counsellors. It's got to be part of a whole collaboration with people, ordinary people, who can inform the excellence, but can also inform people in communities as well and in particular, on the issue of race.

Eugene: In those early days when you were at the BACP, I was wondering; how he's going to fare. It can be an intense experience for anyone, especially a black man. You said you felt there was a cause which was driving you, but what brought you to this particular role?

David: I've always been, from a young age, involved in activism and community organisation. I'm originally from Nottingham, moved to London in the mid-to-late 80s and immediately got involved in some quite significant race equality movements. I was part of setting up an organisation called the National Black Caucus, which was the coming together of African, Caribbean, and Nation people, really looking at how we need to force change from the outside. We set up in the early 90s an organisation called the 1990 Trust, which I became chair of. Out of that came core co-founders of Operation Black Vote. I'm currently their vice chair. I started as a social worker, trained in Los Angeles as a social worker and became, at quite a young age, quite senior within local government. I became director of policy at the age of about 24 and 25. There was something at that time for me about the importance of leadership around making a difference.

I was also, at the same time, just becoming aware of the real impact of emotional mental health and the disproportionalities of that in relation to black people. I was involved in lots of campaigns where we were either going to be restrained or detained. I just got involved in conversations and joint activity with people who were black therapists and putting that into activism words. Jesse Jackson and his Rainbow Push was happening at that time. We were getting people not just talking about big politics but also recognising the importance of therapeutic support that changed people's lives, and that had to be particularised to the black experience. I went into consultancy after a spot as a political advisor and, as a result of that role, was invited to a conference that BACP were hosting about counselling in the workplace.

I was in a particularly bad mood that day, I remember because I was a keynote speaker, and I was hearing all this stuff, and no one was mentioning the issues around race. In my talk, I really piled it in, and there was sort of muted applause, light applause. And then, I was really

shocked to get a call from the then chief executive of the BACP and one of the vice presidents who wanted to have a conversation. Basically, they were asking whether I wanted to get involved with what BACP were doing, and I said as long as we could involve some of the community organisations that are doing therapeutic interventions within communities as well.

Anyway, I agreed and then became the vice president (VP). I don't like having a title unless I do something with it, so I was quite an active VP. I was getting to know more and more people within the membership across the board, not just black therapists, and then went onto the board. I was on the board for a few years, I don't know why, but I think I was having some impact because of the work I was doing. Then the role of president came up, and that's how it happened.

Eugene: I imagine people will be wondering about the title of president itself and the role of president versus chair, for instance. What was your understanding of that role?

David: With respect to my predecessors, who did some good work as well, I took it into a realm which was much more visible and active than many of the presidents before me. President is one of those roles. It's like an elected politician or local politician. It doesn't have a job description, really. What was clear was that it was much more external facing than internal facing. I suppose for me, I articulated it as something around externalising the relevance of counselling and psychotherapy to the outside world. That could mean the media, it could mean building on the BACP strategy and its meaningfulness within the membership, but also within society at large. So, it's something about making that relevant to ordinary people. Within that, for me, and for previous presidents, is bringing to bear something which has an alignment with what BACP is all about and to utilise the role of president to do so.

Mine was very much around social justice. So, there's something about the counsellor and the client in the room, which is really important, and doing your best through the role of president to highlight issues that have concerns there. But more so for me, it was about how do you really demonstrate that counselling saves lives? And for me, within the social change capacity, what difference can I make to those people, where there are stigmas, where there's that dissonance, as I always say, between what the profession is doing and what ordinary people and black and Asian and global majority communities need?

What can I do to be able to address that? The president is very much a convening role. So, you've got the power to actually convene and get people around the table making the decisions—often having conversations, the ingredients to which I sometimes don't understand, but learning how to ask those powerful questions for them to arrive at outcomes that can really help move things forward. So, for me, it was really about the ability to convene the people around the table, around issues that were of importance and to use the influence of the role of president, whereas the role of chair is very much, I suppose, around more direct accountability to the membership and ensuring that the strategic framework for the

organisation is formed by the membership as a professional body and ensuring proper governance. Chairs also have fiduciary responsibilities and legal responsibilities, and so forth. So, it's about the personality of the chair and the personality of the people on the board and what they see as important or not. Does that make sense? Yeah.

Eugene: The reason I ask the question is because, certainly, in communities that I'm involved with, you're quite a prominent person, and your connection with BACP is quite strong. Also, many of our BAATN (Black African and Asian Therapy Network) members are BACP members, so you represent something quite strong for them and perhaps might be something of a role model. There's something about you going in there and something happening, which is not their normal experience. Normally, there's a sense that stuff might be going on, and there might well be change happening within the organisation, but they're not aware of it.

I'm aware of you bringing various stakeholders together, including myself. There's been a range of people at these meetings with particular expertise, so you clearly are very connected with various organisations. Not all are therapists. They're not necessarily even concerned with therapy necessarily as a thing. They come with very different hats on, and that keeps things fresh. Your initial comment about therapy being too important just to be left to therapist feels very strong when I'm in those meetings, and what you've achieved has been quite strong as well.

The work itself is, of course, important, but there's also something about the visibility of what you've done. For some people, they might say, oh, okay, I could do that. I could go in there and do something as well. The role of president feels very much like a coordinator role with, obviously, the power to shape things and bring people together around a vision.

David: Yeah, I think that's it. I'm a reluctant leader in that sense and lead from the front when I have to. I just feel there is something around collaborative leadership but with a strong vision. And I have to say that a lot of the things I was saying beforehand around social justice and race equality and so forth began to really land after the murder of George Floyd. Like a lot of organisations, BACP sort of rang their necks saying this should never happen again, and lessons need to be learned and all that kind of stuff. I had a frank conversation with the organisation, and I said it is better that you say nothing at all than you give all of these promises and don't deliver. I'm not going to be part of that. So be very careful in the conversations that we're having and about what you're saying at this moment in time. Because the lessons of history are that when you have a seminal moment like George Floyd and Stephen Lawrence and Roland Adams, all those kinds of people who have been murdered by the state or die in custody or whatever, organisations say all this stuff. But the further you move away from that seminal moment, the more they revert to type. And so I just said, there's something around ethical leadership, so if we say something that we're going to do, I will externalise it, and if it becomes difficult, then it's an ethical issue for you. That was the deal that we had. As we say up north, you need to say what you mean and do what you say. So

that was it. The relational thing is really important to me because actually, I have experience, as you say, that is useful. There's stuff that I've done and so forth, but actually, what's really germane to counselling and psychotherapy comes from people like yourself, and there are white allies within there as well, and other people. It's convening and getting that together and ensuring that BACP holds to its promise. I think, yes, I did play a key role in holding the organisation to account, but actually, the power didn't come from me; it actually came from people who turned up around the table and allowing things to be minuted. So, when we go into finance meetings, and we're talking about how difficult it was, we said, no, we need to prioritise based on what we think is important and assign these issues as business critical, which means that if we don't do it, it's a critical risk to the business. I think that's what did it. But it was really around collaborating with people. I really appreciate the acknowledgements, but it was a real collaborative effort if I'm honest with you. Yeah.

Eugene: Yeah, I kind of have a sense of what you mean. In training organisations I might be involved with, I might come in and do a workshop or maybe a talk or have ongoing conversations with some of the students of colour. What I'm aware of more than anything is that actually, it's the students themselves who go into the manager's office and say, this needs to happen or that needs to happen. It's the students chipping away, writing letters. I am the catalyst, perhaps, but the students are the stakeholders. This creates something slightly different from an expert coming in, telling the organisation what to do. For the organisation, it becomes more mission critical, as you say and pressing that there needs to be change.

Organisations often talk about bursaries, but somehow it doesn't really happen at scale. You talked about making sure things were minuted and going into finance meetings and talking about these issues being mission critical. How did this very important bursary scheme at the BACP happen?

David: Yeah. Year, after year, after year, after year, you have this whole thing about the statistics in terms of the numbers of black, Asian, minority ethnic people within the profession. Then you get different levels of quality of the stats and so forth, but it doesn't matter. We know there's significant underrepresentation of our people in the profession, and then when we look outside, at what's happening out there and people that really do need therapy, they're not accessing it. And when they do access it, it's not culturally appropriate. And for those black people not in the profession, there are issues about going to training and disproportionate numbers of black people that leave the profession or don't pass the training and so forth. So, these things have been going on for years. I spoke about this as a VP on the board. I spoke about how other professions have actually structured mechanisms, such as bursaries, for really getting that entry in. And they're doing it not because it's a benevolent thing to do; they're doing it because actually, the profession needs it in terms of that lived expertise that we have and shaping the nature of frameworks around therapy, as well as the

numbers and so forth. When George Floyd died, these issues were not only moral but also a business issue as well.

So, it started from there. The chair and the chief executive at the time really worked at it and pushed it forward. I was able to, and I think this is what really worked, capitalise on the proliferation of funding bodies that wanted to fund these initiatives just after George Floyd.

I was also involved as a co-founder of another entity called the Baobab Foundation, where we made £18 million in 16/17 months and thought, well, actually, why don't we have those conversations with some of those funders for BACP?

It was a bit difficult for me as well because I just thought, well, I'd rather give this to a black organisation; we could do that. But there was just something around the legitimacy of BACP or one of the other professional bodies doing this. And that's what I think raised people's attention to this. This is something that we're supposed to do. There's no excuse now about the potential to resource it. You say this is a strategic aim, and then it's people like yourselves coming round the table and feeding in. So, the issue then was about the level of ambition that BACP has.

Between you and I, I don't think the ambition was high enough, it wasn't high enough. The level of risk aversion that BACP has sometimes works for it, but actually, sometimes it doesn't. So, if you need system change and you've got the ability to do it, of less concern should be the administration of it because you can resource the administration of it if you think differently.

The reason why I'm in there now is to just push it along the line and then to continue those conversations which need to be had about how big can we make this, given the level of interest. There are these other bodies, corporate bodies and philanthropists and so forth around issues of mental health, but black mental health in particular and the role that counselling and psychotherapy could play. So that's how it came about.

There's a mentoring programme as well, which came off the back of that debate as well. Using the role of the president, we were able to get that over the line. We started it, which means we can build on it, and we can build on it in a big way. If the profession has a high ambition, and if black counsellors and psychotherapists lean into it, really push for it, it will happen because it requires that. There have been individuals like yourselves and so forth that have turned up, but it's the same individuals, and I think there almost needs to be a kind of movement which BAATN could represent that really pushed on issues like this.

Eugene: Yeah, I think the zeitgeist in the wake of George Floyd's death has created this environment where people are more willing to have these conversations, and the energy that comes from that is a really important part of this, as you say.

David: But would you agree with me, Eugene, that the further we move away from that moment, there is a reverting to type? People are now saying, well, it's not just about race.

That's why it's a dangerous time as well. With everything else that's going on politically. For instance, with this whole thing about wokeism, where there's no such thing as facts. We really can't ignore what's going on in the wider political world.

Eugene: Yeah. You're talking about leaning into the world as it is and how political structures themselves create mental distress. It feels obvious, but it's not something that the profession really acknowledges or wants to say anything about. There is that ever-present mantra that says we don't do politics, but our whole existence is based on politics.

David: My contention is that the profession will be irrelevant unless it gets involved in the politics of it and with the whole mental health pandemic as it is. We're going into another round of austerity, and we know that increasing austerity is linked to increasing racism. Even within our communities, we turn in on each other; there's a whole host of things, psychological things, that counselling and psychotherapy need to lean into. Unless we have that debate on a systemic level or even owning up to the need to do that on a professional level, then it's not going to happen. I've been to so many conferences where people still say it's not our job to get involved in there. It's just about what happens between me and the client in the room, not even thinking about the circumstances that inform what they're seeing in the room. And there's still far too much of that defensiveness or that view that we've got to stick to a pure form of what we're about.

Eugene: To me, it's almost as if there is a sense that the outside world is going to come in and kind of infect this pure thing that's going on in the counselling room.

David: I often say that policing is too important to be left to the police. Even the police understand that because actually, we need policing by consent. I find within this profession, however, it's a case of, oh, you're attacking counsellors. No, we're not. What we're saying is society actually needs counselling, so how do we work with the wider society and communities and other organisations, the third sector, other agencies, more effectively because you're important to them? So, there's far too much defensiveness, I think, within the profession, and it pervades some of our people as well.

Eugene: Well, that's quite a strong argument and one I've heard you articulate in different ways, and it sounds like it's making an impact, at least at some level within the BACP.

David: I think this whole psychological knee-jerk reaction that comes from the profession is worrying, and it's an impediment to the progress that could be made if we aligned it differently. Also, the quality of the training and the theoretical framings and so forth, I think, are hindered by that. It's not taking away from the expertise that therapists have. The community needs therapists as well as the other way around. But I think it impedes the progress that could be made and also around the issue of race within that context. Does that make sense?

Eugene: Oh yeah, no, absolutely. I think the way you articulate it certainly, from a global majority therapist point of view, you're not saying that therapy is rubbish and that what you need is something else. You're saying, actually, therapists are very important. And that relationship with the community is a really important one. That particular take on things brings a level of respect, I think, to people. People feel like, oh yeah, they're being respected at the very least. Certainly, for black communities, respect is everything.

David: That's the fifth word that my son learned.

Eugene: You disrespecting me. Yeah, exactly. It's such a powerful thing. I mean, it is for everyone.

David: But also, Eugene, there's a lot of bad therapy taking place from people that aren't qualified therapists in our community. Because we're needing to support each other because we don't have the structural infrastructure to do that, for example, through the pandemic. A lot of good stuff is taking place, but there's a lot of stuff that is not so good taking place. And actually, that's why there needs to be that collaboration.

Eugene: So, in terms of the mentoring project and the bursaries, what's the scope of these projects now, and what hope do you have for their future?

David: Yeah, I had BACP (Suki) contact me earlier. They've reaffirmed their commitment to continuing with both the bursary and the mentoring project. The mentoring project has started. I can't remember how many people they've got, but it's actually started now. I think they've probably got 40 people. The mentors and mentees and the bursary will start in September of this year. What we're doing now is getting together the infrastructure, the right partners, and getting it going. There are strategic commitments that are actually happening, and people will hear more of these in the coming months.

Eugene: So, the bursaries haven't happened yet as such.

David: No, they haven't happened yet, but they're about to. So, you'll be contacted because they're looking for partners to help support it in different ways; for instance, getting the criteria right. There's a lot of detail within this piece. I'm hedging a little bit only because we're just about to go into that stage. There's some good feedback that's coming back from the mentoring project as well.

I think what BACP needs to do is to communicate more clearly because I still think it's apologetic in saying who these programmes are designed for. There's a level of—we'll be really clear about it with the right audiences where those people are there that have an interest in it are present—but when it's communicated out more generally... There's still a level of cautiousness and being apologetic in saying for whom this project is intended. Over the next year, you'll see it, it'll be out there.

Eugene: Whilst you were there, you brought a certain level of business acumen and many other qualities to the table. Maybe this is the wrong question to ask you at this point, but how hopeful are you about the future of these projects without your energy being there?

David: Yeah, I think for me, it's about institutionalising it because it can't be as good as the people that are in the room; it's got to carry on. So, part of making sure it goes across the line is around the ongoing conversations with the board and the chair, making sure that these things are laid out in the strategic priorities, in the priorities that the various governance committees around this are placing on their documents and the monies that follow it and the financial commitments that follow it as well. There's very much that business thing which is about institutionalising it. But then the other side of this is about just getting the right people around the table who are talking, who just constantly reminding people about why we're doing this, and also partnering with people.

How confident am I, quote unquote? To be honest with you, I think once you put it out there, it's hard to reverse it, so I think there's something about really banging on about it, and that's what I did when I was there, having these conversations do you know what I mean? I think it's just bringing it, so I think it just needs people that are doing that and then obviously, like all the vagaries of BACP and other professional bodies, you've got elections, different people coming on, are they going to be committed to it, and so forth. So, I'm confident in the sense that up until last week, when I spoke to BACP, they'd done more to confirm institutionally that it's going to happen, but I'm not there, I can't account for that, and that's where I think the membership need to ensure that they're holding them to account. I can't do that anymore in the same way.

Eugene: Yeah. As you say, the reason why we're doing this, the urgency of this, all that can fade as time goes on, so members need to say, 'What's going on?'. Why aren't you following through with this? It needs to come back again and then again and again and again.

Regardless, what you have done is still quite significant, really, isn't it? That vision of the outside world impacting therapy and therapy addressing social conditioning and then backing that up with cash. It's a massive effort. There are seeds of real hope there, but there is, as always, a cautionary helping of scepticism.

David: I'd go to these meetings, just after a haircut and a shave and feeling all bright and everything, and then minutes into the conversation, I'm just looking at them thinking, 'he'll learn'. We have to have the hope thing. Yeah, but we've got to also hold BACP to account. If you have an election and the next executive board are people that, at best, think that it's not just about race, it's about other things and other things. As important as that is, if that's the best you're going to get, then it's going to be difficult. If worse still, it's about having to lock down and focus on issues around regulation and so forth and don't bring these things into it, then we've lost it. But it goes on to the other thing as well, because I think as president I was able to sort of forge quite meaningful relationships with quite a lot of therapists in the

membership, black and white. And I think with all of the black members, once you reach that point where you'll know this because of the work you do, where people will talk to you, you find quite a lot of uncertainty, impostor syndrome, experiencing racism from the profession itself. There's a lot going on there that I think can't be ignored. We can't just talk about this as what you need to do as black therapists in terms of the politics of it; there's something about the support that they should receive and need to receive because they do experience racism, direct or indirect or otherwise, within the profession itself.

Eugene: Yeah. We certainly do need to be very mindful of that swing between hope and despair that is the hallmark of this type of work.

David, thank you for sharing your thoughts and experiences around your time as president of the BACP. That sense of vision, leadership, and expertise that you brought to the table, I'm sure, is going to be missed, but as you say, it's now time for others to continue to push these very important projects through because, as you say very poignantly, it will save lives.

David: Thank you.

AUTHOR BIOGRAPHIES



Eugene Ellis is a psychotherapist, writer, and public speaker on issues of race, difference, and intersectionality. He is also an honorary fellow of the United Kingdom Council for Psychotherapy. For the past 20 years, Eugene has been the director and founder of the Black, African and Asian Therapy Network, the UK's largest independent organisation to specialise in working therapeutically with Black, African, Caribbean, and South Asian people. His book, *The Race Conversation: An Essential Guide to Creating Life-Changing Dialogue* (Confer/Karnac, 2021), explores the race construct both through its cognitive and historical development and also, more crucially, on the intergenerational, non-verbal communication of race, both as a means of social control and as an essential part of navigating oppressive patterns.



David Weaver is past president of the British Association for Counselling and Psychotherapy (2017 to 2022). Prior to that, he served as a governor/trustee (2012 to 2016) and vice president (2004 to 2009). A former social worker, university lecturer, local authority senior manager, and political advisor, David leads a leadership change organisation that works with individuals, organisations, and communities to help them achieve their full potential. He offers significant expertise as a coach and mediator and is utilised for his expertise in the area of

strategic leadership in the UK and abroad. Most of David's work is focused on leadership. A significant aspect of this is his work with the NHS, local government, and several professional bodies on strategies for embedding and ensuring that equality, diversity, and inclusion are viewed as business-critical and a central feature of their leadership and change agenda. This was a much-recognised and important part of David's work as president of BACP and his ongoing leadership role within the counselling and mental health field. A former political advisor to home office ministers, including the deputy home secretary and home secretary in the late 1990s, David represented the UK government on a council of a European body (European Monitoring Centre on Racism and Xenophobia) based in Vienna. He is passionate about social justice, human rights, and anti-racism and is regularly featured in the media.

COMMENTARY

On ‘Southern Psychotherapies’: Are they psychotherapies at all?

Nick Totton*, Psychotherapist in private practice, UK

This commentary is based on Keith’s article, ‘Southern Psychotherapies’, published originally in 2012, which can be found here: <https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/379>.

When Keith agreed to take over from me as editor of *Psychotherapy and Politics International* (*PPI*), I was delighted: first of all because I knew that he would be able to make a go of it, but secondly, and very importantly, because it meant a transfer of the journal’s centre of gravity from North to South, from the Atlantic to the Pacific. I always took the word ‘International’ in the title very seriously, but I also always struggled to make it a reality: mainly through my lack of contacts, *PPI* was very light on material outside the Anglo-American sphere, and material about other parts of the world was often written by Anglos who knew what was happening there. There were some exceptions—getting Augustine Nwoye on board, for instance, was a great boon—but we seemed to have hit a wall.

Keith’s editorship almost immediately changed this situation; and the paper I have been asked to discuss demonstrates why and how. Certainly, it was important that Keith was *there*, living and working in Aotearoa New Zealand and networking across the whole Pacific region; but even more significant was his attitude towards his new location, and his immediate commitment to forming a relationship with the indigenous Māori nation and its culture.

Reading the paper, one immediately comes up against his adoption of the Māori form of self-introduction, the pepeha. ‘Against’ is in some ways the right word: I was surprised and quite doubtful about what in many contexts would be seen as an appropriation of indigenous culture, a form of colonialism. So far as I can tell this is not how things are understood in Aotearoa New Zealand: the power relationship between Europeans and Māori was sufficiently more balanced than in most colonial situations for the Treaty between the two to be a living reality, and for the adoption of Māori terms and customs to be understood as

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respectful rather than appropriative. There is a great distance to go in most colonised countries before this could be at all possible.

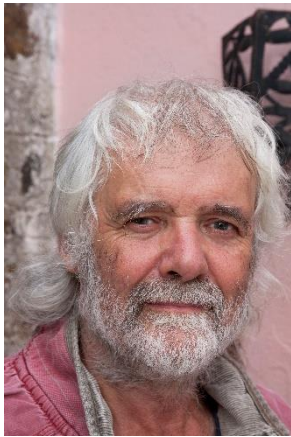
I have a deeper issue with the topic of the paper, though, which is harder to put to rest. Keith's central question can be expressed as: What would constitute a Southern psychotherapy? But posing the question in this way seems to me to re-install the colonialist model which he is trying to challenge. 'Psychotherapy' is a Western/Northern term (a complex and much contested one, as the paper acknowledges), and wholly embedded in Western/Northern culture; it neither translates readily into indigenous languages and cultures, nor makes a good translation of parallel terms from those languages and cultures into our own. Rather than invoking the notion of 'Southern psychotherapies', would it not be better to think in terms of a conversation between psychotherapy and various Southern approaches to emotional distress? There is something particularly colonising, it seems to me, about the suggestion of including Māori philosophy 'as a research methodology in courses or papers' in academic institutions, which would surely mean turning it into an interesting variation on Northern academic thinking rather than an outright challenge to it.

One of the strongest points Keith makes, I think, is in his suggestion (following Raewyn Connell) that a distinctive element of Northern theory, including psychological theory, is its *universalism*, its one-size-fits-all assumption which leads to Procrustean measures. But even this idea requires some complication: on the one hand, the dismantling of universalism is well underway on Western/Northern intellectual culture—while on the other hand, surely some indigenous cultures are universalist, in the very simple sense that they are unaware (pre-contact) of the possibility of alternative theories?

Keith mentions in this paper but does not fully discuss another crucial characteristic of Northern psychotherapy: its fervent *individualism*, the assumption that the object of study is the single person who presents themselves in the consulting room—or at the most, the two single persons of client and practitioner. Indigenous approaches tend strongly towards the opposite assumption—that an individual's distress is the expression of a disturbance in the collective field. Again, Northern psychotherapy is starting to catch up with this viewpoint, especially through ecosystemic approaches.

I have a strong feeling that reading this now, Keith will have little or no disagreement with my comments. The paper dates from 2012, and his thinking, together with general Northern thinking about both psychotherapy and colonialism, has developed a good deal since then. So, I am certainly not aiming to start an argument!—but rather to celebrate Keith's pioneering work in connecting psychotherapy, politics, and Southern perspectives, both through his own writing and through the masterly way in which he has steered *Psychotherapy and Politics International*. Thank you, Keith, and have a good rest.

AUTHOR BIOGRAPHY



Nick Totton is a body psychotherapist, ecotherapist, trainer, and supervisor in private practice in the UK. He has published twelve books, including *Psychotherapy and Politics* (Sage, 2000), *Wild Therapy: Rewilding Inner and Outer Worlds* (2nd ed., PCCS Books, 2021), *Embodied Relating: The Ground of Psychotherapy* (Karnac, 2015), and *Sailing to Bohemia: The Vision of Freedom from Work-Discipline* (independently published, 2023), and edited several more. He was the founding editor and later consulting editor of *Psychotherapy and Politics International*, and is a past chair of Psychotherapists and Counsellors for Social Responsibility and the

Psychotherapy and Counselling Union. Nick has a daughter and two grandchildren. He lives in Sheffield with his partner and grows flowers and vegetables.

COMMENTARY

Commentary on Keith Tudor's (2018) 'In(ter)dependence Day'

Jeffrey H. D. Cornelius-White,  Missouri State University, USA

This commentary is based on Keith's article, 'In(ter)dependence Day: Lives mattering, freedom with responsibility, and social well-being', published originally in 2018, which can be found here: <https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/547>.

For over 10 years, Keith Tudor has been a leader of *Psychotherapy and Politics International (PPI)*, not only serving as its editor, but also providing engaging analysis and advocacy as an author. This commentary provides a look at his critique of the American Declaration of Independence (Tudor, 2018) that used a catchy rephrasing of the July 4th holiday known as Independence Day. In addition to summarizing the article, this commentary provides a perspective on the themes and style that Tudor employs and concludes with a discussion of a new national holiday that provides a (partial) counterpoint to Independence Day.

The coverup from national holidays

Tudor's (2018) introduction highlights the genocide of Native Americans and slavery of African Americans on which the USA was founded. He draws a comparison between Independence Day and Thanksgiving Day (the fourth Thursday of November). Many groups of people were not independent with rights to life, liberty, or the pursuit of happiness when the USA was declared independent, and many people were not thankful for having their land taken and being controlled and killed by colonizers. Tudor reveals for his readers, what many may have suspected or known, but often do not want to pay attention to: Many national holidays celebrate only a relatively recent event and an ideal from a specific perspective that often denies other perspectives in its establishment and practice. Independence Day, Thanksgiving Day, and similar holidays throughout the world might aptly each be named by

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first peoples as an 'Invasion Day'. His introduction lands on the purpose of the article, to point to the 'fundamental individualism inherent in the framing of the Declaration of Independence' and articulate 'perspectives that support interdependence' (pp. 2–3).

Interdependent alternatives to life, liberty, and the pursuit of happiness

Tudor (2018) contrasts an emphasis on the value of the common good with the autonomy of the self. Among other points, he discusses the Second Amendment to the US Constitution: a right usually interpreted as an individual right to have and shoot guns. Ironically, the more this right to life is employed, the less life is actually achieved. According to the BBC (2023), as of the writing of this commentary on April 16, 2023, there have been at least 160 mass shootings in the USA so far in 2023, a trend that follows the pattern of the last 3 years in which approximately two mass shootings happen each day in the USA. About 50 people a day die from gun violence in the USA, over half of which are death by suicide. The Harvard T. H. Chan School of Public Health (2023) presents a summary of findings with references on firearms and death (the opposite of the right to life), showing where there are more guns in homes, cities, states, and countries, there is more homicide and suicide. Tudor concludes this first section referencing ideas that challenges individualism and/or balances the interests of self and others, such as connectedness, belonging, mutual recognition, and social actualization, each with appropriate references. Connectedness, belonging, and mutuality are often healing factors in psychotherapy even if psychotherapy is usually viewed to have its primary purpose as the remediation of individual symptoms and disorders.

Tudor (2018) continues with an alternative to American liberty, a notion of freedom with responsibility, not an individualistic concept of freedom *to*, but a freedom *for* and *with* others. He advocates for inclusion of notions that are in contrast to typical psychotherapy concerns:

- oversight, not just insight;
- action, not just adaptation;
- healing, not just cure; and
- social actualization, not just self-actualization.

Tudor (2018) also advocates for social well-being as an alternative to individual happiness. Individual happiness is often linked towards personal safety, such as the in the US Constitution and Second Amendment, and linked towards materialism, especially possessing goods and using services. In contrast, Tudor elucidates alternatives with three meanings of two Greek words (i.e., hedonia and eudaimonia), summarized in English as emotional well-being (or pleasure), psychological well-being (or flow and immediacy in context), and social well-being (affiliation, belonging, and social good). Before concluding with further ideas on interdependence, Tudor posits the importance of group work as a default setting rather than individual work. It does make one wonder if group therapy were 95%, instead of 5%, of

psychotherapy treatment (Pappas, 2023), how much more social well-being might be emphasized, not just by us as psychotherapists and counselors, but by all peoples?

Quintessentially Tudor

The themes in 'In(ter)dependence Day' ring backward and forward to the rest of Tudor's work, not unlike the liberty bell that American abolitionists adopted as a symbol. For example, from early in his tenure with *PPI*, Tudor (2012) proposed four counterpoints to European-American psychotherapies drawn from Southern psychotherapies. These were:

1. Focus on the specific and the context over generalities and universalities;
2. Read the center from the periphery, that is begin with a pluralistic perspective, honoring marginalized perspectives of the mainstream;
3. Include ideas from the periphery, such as mind–body concepts rather than mind–body splits, and client conceptualizations; and
4. Reverse the grand erasure of the experience of oppressed peoples, by reclaiming and reintegrating that which has been hidden, both in each client and collectively. This may include the experience of colonization and how it has affected all peoples, and the need to acknowledge, make amends, repair, repent, seek forgiveness, and offer reparations.

I expect each reader can hear a clear resonance of these ideas of with those in 'In(ter)dependence Day'. In a new work published online, Tudor and Rogers (2023) deconstruct psychotherapy put forth in the classic question, 'How can I be of help?' In turn, looking at the implications in each word, they repropose the question as, 'Can we be of help?' They (a) problematize the privileging of the 'I' of the helper, (b) challenge the assumption of help with an attitude of service and possibility, and (c) put the relationship and the other first.

To me, there is a call throughout Keith's work for cultural and personal humility given the intrinsic importance of other people. There is also a level-headedness, a concern to look at fundamental questions first, not in a strident way, but also not shying away from naming what needs to be named. I have loved 'listening' to Keith as I expect to be surprised, surprised by something I knew but was drawn to forget, should have seen but did not see, or saw but could not so unflinchingly name.

A (not so) new holiday

In 2021, Juneteenth National Independence Day finally became a national holiday in the USA even though it had been celebrated by many for 156 years (Juneteenth, 2023; Juneteenth.com, n.d.). Juneteenth has been considered the second independence day, Black

independence day, and a multicultural holiday, even if it remains little known to much of the world, or even to many in the USA. Juneteenth commemorates the emancipation of a quarter of a million enslaved African Americans in Texas on June 19, 1865, according to the posting of General Order No. 3. However, this was not the first or the last date in which slavery was outlawed in the USA. General Order No. 3 came after the preliminary Emancipation Proclamation occurred on September 22, 1962, and the final Emancipation Proclamation came on January 1, 1963, which declared persons free in Confederate States. Likewise, it was not until the ratification of the 13th Amendment of the Constitution of the United States on December 6, 1965 that most forms of slavery were outlawed in all of the USA, not just in Confederate States. Today, slavery is still allowed in the USA according to the 13th Amendment as a punishment for crime, a reality cuttingly revealed in the film *13th* (DuVernay, 2016). I wonder when or if slavery will become fully illegal in the USA, and for that matter everywhere.

Undoubtedly, Juneteenth will help reduce the collective amnesia that I, as a White American male, and others are tempted towards, whether in American individualistic society or around the world (International Institute for Genocide and Human Rights Studies, 2021). How much so is an open question. I only hope that we will each find our own way to surprise ourselves and others with the humility I have been encouraged to by Keith. I hope this humility leads to revelations for perspectives we should remember, perspectives we can see when we seek them, and perspectives we must maintain in our awareness and advocacy.

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COMMENTARY

Review and tribute to Keith Tudor

Julia Ioane^{1*}  and Catherine Knibbs² 

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This commentary is based on Julia, Catherine, and Keith’s article, ‘The challenge of security and accessibility: Critical perspectives on the rapid move to online therapies in the age of COVID-19’, published originally in 2021, which can be found here: <https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/643>.

There is a Samoan proverb—O le ala i le pule, o le tautua. In order to lead, one must serve. Professor Keith Tudor is the epitome of servitude leadership, and we are grateful to contribute to this special edition of *PPI* and explain why. We both jumped at the opportunity to provide insights to our working relationship with Keith, and in particular with this article. This article was borne out of an idea by Keith to address the rapid movement to online therapies in response to the COVID-19 pandemic. He contacted the both of us to see if we were interested on the idea given our own respective expertise and areas of interest... (of course we were!) and the rest is history!

It was important that this article highlighted first the information, misinformation, and guidance of online therapies that was continuing to circulate online at that time. There were clear gaps in the knowledge field across our disciplines primarily in relation to (a) practitioner wellbeing with online therapy, (b) lack of training and understanding regarding data protection and data security, (c) potential for increased professional regulation in this area, and (d) an assumption that online therapy was going to be accessible amongst all communities and a preferred mode of therapy between clients and therapists. We wanted to ensure we highlighted key points for therapists and professional bodies to consider and

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develop responses to improve equity, respond to digital disparity, security, and, expectedly, ethical issues. Improving equity has been a key area of advocacy by all of us authors in our respected roles. We wanted to highlight the economic and social disparities that exist with online therapy and how that inadvertently increases the marginalisation and accessibility to services by those who often need it most. In particular, we wanted to provide academic understanding and knowledge into a key area of online therapy that we believed was not well understood amongst our disciplines. That is, security and ethics. Generally, and with our own experiences, digital security is not well understood amongst our professions and as result, there is a risk of complacency and increased opportunities for cyber-attacks and breach of confidentiality. We hope that we highlighted this appropriately and that it has led to discussions and the implementation of safety online in the workplace. It was also crucial for us to undertake a deep dive into ethics, drawing on the *Code of Ethics* from the New Zealand Psychologists Board as an example. Whilst ethics should be well-known amongst our professions, to what extent did we utterly understand its context within online settings? We hope that this invoked reflections and conversations amongst practitioners.

As a result of our article, we provided a conceptual framework for the security and accessibility of online platforms for online therapy. In closing, we highlighted the challenges of online therapy, though equally important (as we cannot control a pandemic!) it is important that we, as therapists, train to become competent to deliver therapy online to ensure we provide opportunities to our clients that suit their needs, rather than our own.

Keith was the leader and instigator in this project. He produced the idea, and as he knew us both, he homed in on our areas of expertise for our contribution whilst always seeking our views and direction. He designed the conceptual framework and whilst contributing across the article, he brought the article together. Despite his leadership, he was adamant to assign himself as the third author. This is an accurate reflection of Keith's leadership of leading with humility, grace, and servitude. He has always been one to prioritise 'all' rather than 'self'. He also looks out and cares for those coming in after him, rather than it being all about him. He continues to share openly and frankly his knowledge, wisdom, and expertise. Values are seen and embedded in his practice and interactions with you. Whilst the academic world can be seen by communities as hierarchical, sterile, and competitive, Keith quickly dispels these when you first engage with him. Your motivation to collaborate with him is not because he is a well-known and respected figure in the academic community or has a Professor title with loads of publications... it is because he is genuinely and truly a nice person, with a really good soul! We thank you and we honour you, Keith.

Julia & Cath

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Julia Ioane is of Pacific descent, born and raised in Aotearoa New Zealand. She is an associate professor of clinical psychology at Massey University, Auckland, Aotearoa New Zealand, and a registered clinical psychologist working primarily with disadvantaged communities that include Indigenous and Pasifika (Pacific) communities in the health and justice sectors.



Catherine Knibbs is a human behaviour technologist, clinical doctoral researcher, online harms consultant, public speaker (including TEDx), author, educator, and child/adult trauma psychotherapist. She writes about and works with cybertrauma, which is any trauma that occurs through an internet-ready device. Cath is a tech geek and trauma psychotherapist using biofeedback/tech and gaming to elicit post-traumatic growth, healing, and flow. She has a number of books with Routledge Psychology discussing online harm, cybersecurity, and child development with and around technology. She is a disruptor and advocates for children's rights, privacy, and digital explorations online. She also educates therapists via her company Privacy4 about data protection/privacy/cybersecurity issues in relation to their practice. She is also the mental health advisor for Gamers Beat Cancer charity.

COMMENTARY

In praise of my friend and co-writer Keith Tudor

Helena Hargaden, * UKCP, ITAA, IARTA, IARPP

This commentary is based on Helena and Keith's article, 'The Irish Uprising of Easter 1916: A Psychopolitical Dialogue', published originally in 2016, which can be found here: <https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/497>.

It is over thirty years since I first met Keith Tudor when he joined the third year of training in transactional analysis psychotherapy at the Metanoia Institute in London, where we were tutored by Charlotte Sills. At the beginning of each weekend, the group began with each person checking in about how they were feeling and sharing their reflections. I recall sharing my ongoing anxieties and sorrows about the troubles in Northern Ireland and linking it to my own trans-generational trauma as the daughter of an Irish immigrant, as explained in the article 'The Irish Uprising of Easter 1916: A Psychopolitical Dialogue'. I was surprised by Keith's attuned and knowledgeable response about the history and complexity of Ireland because it was unusual in psychological circles to make political links with psychological trauma at that time. As I got to know Keith, we realised that we shared a background of involvement in left-wing politics. He was in Big Flame, a revolutionary socialist feminist organisation in which he was actively involved from 1979 to 1985. I had always admired Big Flame because they seemed so creative and fun! Following on from this he had spent two years in Italy where he was influenced by Democrazia Proletaria (Proletarian Democracy) but was more actively involved in disability politics. I had been involved in the International Marxist Group (IMG). Although Keith and I shared this youthful involvement with left-wing groups, we came from different perspectives. Keith's political knowledge was factual and theoretical, coming from a skilled intellectual understanding but was also with warmth and compassion. I was more emotionally disturbed by the troubles in Ireland at that time.

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I later traversed through a tricky, painful psychological journey with my Jungian analyst who was also a rabbi. This intense, journey changed my political views as I began to metabolise my sorrows into a more philosophically dialectical place. As time went on Keith and I found lots to disagree about but throughout we kept a strong bond that had begun during that long ago weekend when we met apparently from a similar political perspective. We have been connected and bonded ever since, in spite of Keith moving to the other side of the world—New Zealand—keeping up monthly Zoom meetings, even managing to see each other sometimes, and still discussing political perspectives that were becoming less meaningful for me. Nevertheless, when Keith suggested we write our article in 2016 to commemorate the 100 years since the Irish Revolution (Hargaden & Tudor, 2016), it was as though we returned to the beginning of our initial connection. Through Keith's warm and intellectual curiosity, I was enabled to return, yet again, to the psychological and political terrain of Ireland. It was through this process that I came to the paradoxical understanding of how 'independence' had not released the Irish into freedom, as promised by the revolutionaries, but instead into a dictatorship, presided over by the Taoichchóg Eamon De Valera. It was under his rule that the Catholic Church exercised an iron grip over the population. So, far from independence, it seemed to me, the Irish were delivered into the hands of a Catholic fascist regime that was essentially misogynistic and homophobic; a type of existential hatred of personal liberty that spawned a nation riddled with domestic abuse, parochial concerns, a deep-seated bitterness towards the English, and most dreadful of all, the separation of single mothers from their babies, often leading to many infant deaths. What price so-called 'independence'. When writing together I discovered Keith's ancestral connections with Ireland and realised that our bond had been linked to the unconscious—what I would now understand as a right-brain-right-brain connection (McGilchrist, 2019); that we had had an unconscious mental connection with the trials and tribulations of the Irish. Perhaps Annie Burns (2018) in her Nobel Prize-winning book, *Milkman*, reveals something of the type of unconscious connection we both had when she writes her excoriating critique of every organisation concerned with the troubles, referring to them all as Mr. McSomebody. She outed the virulently misogynistic attitudes shared by all sides, whether they be Catholics, Protestants, Republicans, Loyalists, or the British army. From this perspective Keith and I were on the same side!

Keith always held a 'political' perspective in transactional analysis (TA), supporting and developing the theory of radical psychiatry. In the special issue on TA and Politics he created the 'sixth driver' calling it 'Take It', which accounts, both in developmental and social terms, for the introjection by the child of Parental messages to take and own objects in an inappropriate, exploitative, and unsustainable way.

Despite our differences, or maybe because of them, Keith and I have had a very close bond over the years through our love of writing, talking, and politics. For many years we formed a vibrant intellectual group with Charlotte Sills and Graeme Summers, meeting several times a year to think about transactional analysis and how we could be part of contemporaneous changes. It was from this process that two books were eventually published: *Transactional*

Analysis: A Relational Perspective (Hargaden & Sills, 2002) and *Co-Creative Transactional Analysis* (Summers & Tudor, 2014). Keith is a passionate and devoted writer encouraging us to get our thoughts and ideas down on paper. Keith has always been so generous, knowledgeable, active, and determined in his way of being. I am eternally grateful for his wonderfulness, knowledgeable, determination, hard work, and generosity.

Sláinte Keith!

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Helena Hargaden, MSc, D.Psych, TSTA (P), works in Sussex where she has her private practice. Drawing on her experience in Jungian analysis and various psychoanalytic supervisions she developed relational perspectives in transactional analysis in collaboration with others. Co-editor and author of a variety of papers, she has been widely published and translated into a number of languages including Japanese, French, Italian, Spanish, and Croatian. She was awarded the Eric Berne Memorial Award in 2007 for her work with Charlotte Sills on the 'domains of transference'. She is one of the original founders of the International Association of Relational Transactional Analysis and is an international speaker on relational psychotherapy and supervision. Her latest books are entitled *The Evolution of a Relational Perspective in Transactional Analysis: What's the Relationship got to do with it?* (with William F. Cornell; Routledge, 2019) and *Beyond Language in Relational Psychotherapy* (Routledge, 2023), which includes a reprise of articles and talks she has given over the last two decades, to be published in June 2023 (initially in hardback and ebook, with paperback to follow in 2024).

COMMENTARY

Keith Tudor, ‘conscientious objector’: On transactional analysis and politics, 2020

Karen Minikin,  Principal, Insights—South West; Leadership Team, Black, African and Asian Therapy Network, UK

This commentary is based on Keith’s article, ‘Transactional analysis and politics: A critical review’, published originally in 2020, which can be found here: <https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/55>.

INTRODUCING TRANSACTIONAL ANALYSIS AND POLITICS

Keith Tudor has been persistent and tenacious in moving the theme of politics and social justice from the margins in transactional analysis to the centre. He has written several papers both in *Psychotherapy and Politics International (PPI)* and the *Transactional Analysis Journal (TAJ)* that has kept the tradition alive and contributed to the canon of socially and politically relevant thinking. This has been personally and professionally meaningful and transformational for me. In many ways, Keith provided a bridge between my younger activist self and the woman/psychotherapist I became.

Tudor, the academic critic

Tudor’s review of transactional analysis (TA) and politics provides a thorough chronology of the TA literature concerning social responsibility, power, and politics and highlights the ambivalent feelings our founder, Eric Berne, had towards the place of politics in psychotherapy. He shows how bold some of Berne’s original writing was and acknowledges the threat Berne faced personally as an immigrant, a victim of anti-semitism, and also

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professionally in the era of the red scare under Joseph McCarthy, when a number of artists and public figures were questioned and threatened for their political views. To be at the receiving end of state paranoia must have been terrifying for a number of people, no doubt raising realistic concerns of being ostracised personally and professionally. Tudor describes how the subsequent years of developing transactional analysis meant politics were side-lined in the main, and how Berne spoke about the Nazis in his 1963 book, *The Structure and Dynamics of Organizations and Groups*—but radical politics was largely picked up and made use of by his colleague and friend, Claude Steiner. However, there was no escaping the presence of politics in TA, which was one of the draws for Tudor in choosing it as his preferred modality. The birth of TA itself was a political act, motivated by a commitment to making the methodology far more egalitarian. Tudor was personally drawn to TA because of this promise as he looked to integrate his personal strivings, leanings, and values with the discipline he had committed to study.

Politics within psychotherapy/psychotherapy and politics

Tudor reinforces the identity that has lived on. That is, TA is and was always a social psychology—he shows how we have kept that identity alive and vital. In addition to dissecting the history of TA, Tudor also highlights the place of internal politics, whether that be via the structures and the procedures, the activities of the international bodies, including the long list of social and political events that supported the development of a theoretical canon in this field. For instance, many conferences ran with the themes of power and politics, such as ‘Restorative processes’, ‘Massey’s work on Freedom with Responsibility, Co-operation and Power’, and many more (Tudor, 2020). All of these developed and maintained the identity of TA as a social psychology.

Tudor does not sit still in his writing but points out the tensions and mixed feelings that continue to stir collectively. The lifelines of key political activities are linked to articles from 1976 to 2018. This is helpful in highlighting the flurry of activities, as well as the quieter years, during the 1990s. In contemporary times, he points to themed editions of the TAJ such as ‘gender and sexuality’ in 2017 and ‘social responsibility in a vengeful world’ in 2018.

As part of Tudor’s critique of the TA community is the observation that we are more comfortable with the word *social* than *political*—perhaps this is a hangover of the original fear and threats of holding a political mindset and/or perhaps this is the inevitable influence of mainstream thinking within a psychological paradigm that is already marginalised, given that few nations champion psychotherapy and its contribution to alleviating suffering. In the review of the special edition of *PPI* that this article comes from, Cornell and Tudor discuss this, with Cornell stating: ‘At its heart psychotherapy (and its definitions of ‘health’) serves to reinforce and maintain social and economic norms.’ (Cornell & Tudor, 2020, p. 5).

He even goes further than this in conversation with his colleague Bill Cornell, to state:

Psychotherapy and other forms of therapy have not only encouraged adaptation but been positively oppressive and even abusive. I am wary of what you describe accurately of colleagues' 'shocked awareness' as I think it represents something of a wilful ignorance that we (in transactional analysis) would understand as a discount at the level of the existence of the stimulus (i.e., poverty, injustice, racism, etc.) (Cornell & Tudor, 2020, p. 6)

So, this article (Tudor, 2020) examines and challenges ambivalence with regard to politics within TA. Tudor picks up the earlier Bernian mantle, which, no doubt, had been influenced by the rise of Nazi Germany compelling the world to risk getting involved, and to risk being criticised given that as Berne had previously said: 'it is no longer wise for scientists to refrain from expressing strong opinions and bringing strong influence to bear in a vigorous attempt to change the trend of history' (Berne, 1947, p. 292).

As Tudor (2020) states, these words 'written over 70 years ago, are still all too relevant today. The struggle—for necessary, healthy ambivalence as well as civic activism—continues' (p. 17).

Keith as conscientious objector

Taking a position can evoke anxiety given the risks of being accused of bias, reactivity, or even being 'unethical'. Perhaps these anxieties come from the original intent of providing a blank screen and offering the client a free and open space. However, critical thinking, such as the kind Keith offers, reveals that not taking a position—sitting on the fence so to speak—is also a political act, given, as he argues, that bystanding supports the norm in the face of injustice and oppression.

Critical thinking and radical ideas about society started with Freud and has continued intergenerationally. Keith is one author and editor who has opened the door for people like me to also speak out and share how I make use of the political in the consulting room. He has gone before to show how it is possible to reveal the workings of the political in framing minds. Keith has lived as a conscientious objector. His values in life are clear and he stands by what he declares in writing. This shows up in his personal narratives; for example, his commitment to learning from Māori culture in New Zealand, his willingness to speak out, even when it risks rendering him unpopular, and his absolute academic scrutiny in secondary research which examines our written history and enables him to argue a case rigorously.

CONCLUSION

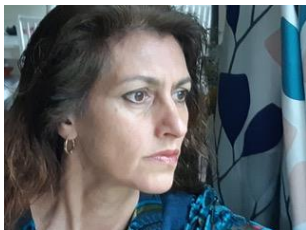
At the end of the *PPI* issue that Bill Cornell and Keith Tudor edited, the two wrote up their reflective dialogue. Keith shared his personal and professional history and how his father had been a conscientious objector during the Second World War. This modelling, along with his experience as a probation officer in 1970s UK, exposed him to social injustices. The feminist movement of that time had also encouraged him to study and specialise in radical social work (Bailey & Brake, 1975).

There are some white men who have had the humility to use their power in progressive ways; to have humility, and recognise and value their own experiences of feeling marginalised, and to use these as sources of wisdom, connection, and soulfulness. They have reached into themselves and out to others to search widely and deeply in the service of society, psychotherapy, and humanity. So, I am grateful for what Keith has committed to. He has shown that by centralising the political in psychotherapy, we can find emancipating experiences.

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COMMENTARY

Powers of two

Gottfried M. Heuer, ^{*} Association of Jungian Analysts, London, UK; Independent researcher

This commentary is based on Gottfried and Keith's article, 'On Style', published originally in 2017 (<https://ojs.aut.ac.nz/psychotherapy-politics-international/article/view/506>). The title of this commentary is in reference to John Schenk's *Powers of Two: Finding the Essence of Innovation in Creative Pairs* (2015, John Murray).



Gottfried Maria Heuer (assemblage/photograph, Iona, Scotland).

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The invitation to comment on our exchange on style exchange immediately made me associate, in the words of the popular song, 'you are the wind beneath my wings': I feel filled with gratitude for our co-operation within the framework of *PPI* for as long as you have been its editor! *Never before*, during some 60 years of publishing—I started in my teens at my school's magazine in Germany—have I received as vital and generous a support as the one that has come from you. The way I have experienced a text of mine to actually evolve and grow—I'm especially thinking of my review of the film *A Dangerous Method*—has been such a gift, as I could welcome your suggestions and your help. The same, of course, is true to our discussion on style in the above text: that you *actually* gave space to have opinions discussed some of which were opposite to yours, and to have both presented publicly, was an honour as well a privilege—so much more than a stroke of luck: it was a blessing. For me to comment any further on this would be unfair and not appropriate on this occasion, because by necessity it would remain one-sided—and I think we both had sufficient space to express our respective perspectives.

We only met once face-to-face in person, some years ago on a sun-drenched summer's evening in London by the Thames—I'm associating the old Kinks song, 'Waterloo Sunset'... What a memorable evening!

I also most gratefully remember an occasion years ago, when some information about me was leaked to you inappropriately—and you most generously simply ignored it, because its source was unethical. I shall never forget that either!

I very much hope that *PPI*, under a new editor—or editors—will continue to give space to artworks and poetry, as you so wonderfully did. A picture so often can say more than a thousand words—and poetry... Well, I have always been aware of the philosopher Adorno's statement that poetry after Auschwitz was barbaric. Yet, by contrast, I am thinking '*what else in the face of catastrophe?*' As far as dark aspects of the future are concerned, which I believe we are facing—and hopefully be able to prevent together—do we not need to muster all we can? I deeply believe that life-changing, revolutionary politics do need to include both arts and poetry—as well as spirituality.

So, in this spirit, and, as this is, of course, by no means a eulogy but instead *a celebration of both your past and future achievements*, I'd like to offer you this poem—for an ever more glorious future to you, dear Keith!

I had ideally wanted my poem to be headed by a news photograph of the white stag mentioned, which shows him trotting in between cars on a road lined by private houses. Unfortunately, for copyright reasons, this is not allowed. But the image can be found at: <https://www.gbnews.uk/news/rare-white-stag-shot-dead-by-police-in-liverpool/133682> I am aware that, synchronistically, this prohibition can be perceived as being in tune with what my poem is about. G.M.H.

'Star of Redemption'

I

'Resurrection Blues'

is almost

Arthur Miller's final play—

he worked on it

right up until his death:

It centres on a man

who has been taken prisoner,

and who may

or may not be

the Second Coming

of Our Lord.

(Oh, I am quite sure the Jewish writer

did not mean the Christ

of the Christian church—

and nor do I.)

The ruler of the un-named country,

is preparing

a second crucifixion—

no doubt, if asked,

'in order to protect the public' . . .

Almost exactly mirroring
the subject of the play
a review of its London run
concluded, 'nothing
was so disastrous
as the debacle
surrounding 'Resurrection Blues'.
Following 'horrendous reviews,
the play was forced to close'
one week earlier than planned.

I, then, in 2006,
had experienced the play
as maybe the most deeply moving
I had ever seen on stage—
raising the question,
'What would actually happen,
if the Messiah came again,
today,
into this,
our world?—

Would I be able then
to welcome Him?
The almost presence of the Holy
sent shivers down my spine—
it was if an angel had
just outside of my conscious vision,
passed by—

and touched me with its wing . . .

II

Last Sunday in September:

Autumn Equinox,

as we almost can envision

Covid to relax its grip,

'a rare white stag appeared

in full daylight

in Bootle, Merseyside',

near Liverpool—

remember, 'All you need is love, love, love'?—

'roaming the town's very centre'

for nearly one whole day.

Hearing of this

moved me close to tears,

put a lump into my throat—

and, again,

there was that angel,

touching me

with a feather of its wing . . .

The presence of the Holy.

In the end,

against advice

from the RSPCA,

'to leave the deer,

as it would make its own way home',

the deer was killed by the police—
‘to protect the public,’
a senior policeman said,
adding that he was proud
of the officers involved . . .

III

(One day, having offered
an earlier version of this poem,
a man came up to me and said,
‘There’s been another White Stag—
somewhere in the south of England;
it had been famous, locally—so
some poachers then decided
to kill and to mount and sell its head,
as a trophy. . .
So, they just shot the stag,
Yet—
it had been thus famous thereabouts
that the poachers realised
that it would be impossible
to sell the White Stag’s antlered head.
So—
a few days later,
people came across
the whole dead body
just thrown into a ditch . . .’
I imagine that the ones who found Him,
were shepherds in the fields nearby,

tending to their flock . . .)

IV

About a month before the murder

of the Bootle-White Stag,

I had a dream,

a particularly vivid one:

I am high up

on an indoor balcony

of a light and wide

serene hall,

white walls with golden ornaments.

Looking down with others,

I can see UK's Premier,

surrounded by the faithfuls,

standing

opposite a small crowd

open for questions

from the public.

He does not fare well in this—

I almost feel some pity:

He just cannot handle

the questions posed to him.

Then I see a friend of mine

calling to him from the back,

'It would be so good

if at least you'd listened

to a Bach Cantata!—

'Rejoice, redeemed crowd!'—
I've actually got one here with me!
And from one person to the next,
he passes on a tiny music-player
until it reaches the PM.

And he—
refuses
the pure and holy music!
The people close to him
try to persuade him—
but to no avail:
he is adamant,
yet does become uncertain, shifty,
and retreats on shaky legs.
The crowd, restless,
first in low murmur,
then loud and ever louder
is shouting, 'Out.
Out! OUT!'
I, in the meantime,
go downstairs
to find my friend
so that we can embrace
and I congratulate him.

V

What would it really do to me,
how would I react
if Christ, really,
were to come
a second time?
—And you???

Dare we, together,
hope
to give birth to the Christ,
another time—
resurrecting
the Divine?

VI

Or:

What if Arthur Miller's play
wants me—us—to realise
that there only, truly
is a single prison guard,
and that it's up to me
and all of us
to crucify Him
or to set Him free?—
Of course, today,
the Holy
just as likely
may be
a woman or a girl.

What if the White Stag
wanted me to know—
police or no police—

‘I am here

all the time,

in fact,

I have never been away!

Is, what my dream is telling me,

as Bach, in his Cantatas

jubilates—

‘Arise in joy:

I know where my Redeemer Lives!’—

that we all shall know,

that darkness

shies away from light

and that in each and every Messianic moment

the longed-for Divine

is right *here,*

Now!



Gottfried Maria Heuer 'Let us know, Beloved, that there is only Light' (Hafiz).

(Feathers/stones/sea snail shell; photograph; Iona, Scotland).

NOTES

The title, 'Star of Redemption', is borrowed from theologian Franz Rosenzweig (1886–1929).

Resurrection Blues, by Arthur Miller (2006, Methuen).

RSPCA: Royal Society for the Prevention of Cruelty towards Animals.

Excerpts from *Cantata No. 30, 36, and 160*, by Johann Sebastian Bach.

AUTHOR BIOGRAPHY



Dr Gottfried M. Heuer is a Jungian Training-psychoanalyst, supervisor, and teacher in London; a Neo-Reichian/Biodynamic body-psychotherapist, supervisor, and teacher; has been in clinical practice for over 45 years in London, UK; has worked all over the world, in most European countries, including Russia, North, Central, and South America, Australia, and Asia; and is an independent scholar with some 70 published papers in English, German, Finnish, French, Russian, Portuguese, and Serbo-Coat in the major analytic journals, including *Analytische Psychologie*, *Biodynamische Psychologie*, *Cuadernos de Psicología Biodinâmica*, *Energy & Character*, *Erich-Mühsam-Magazin*, *Harvest*, *International Journal of Jungian Studies*, *International Journal of Psychoanalysis*, *Journal of Analytical Psychology*, *Juni*, *La Vouivre*, *Psychotherapy and Politics International*, *Psychoanalytic Perspectives*, *Spring*, *Theory, Culture & Society*, *Transformations*, and others, as well as in a number of books. His own books include *A Translucent Turtle Ascends to the Stars*, 10 congress proceedings (LiteraturWissenschaft.de, 2000–2015) for the International Otto Gross Society (in Berlin, Dresden, Graz, Moscow, Munich, Vienna, Zurich, etc.), which he co-founded, and of which he is the past president; *Sacral Revolutions: Cutting Edges in Psychoanalysis and Jungian Analysis* (Routledge, 2010); *Sexual Revolutions: Psychoanalysis, History and the Father* (Routledge, 2011; Russian edition 2017); and *Freud's 'Outstanding' Colleague/Jung's 'Twin Brother': The Suppressed Psychoanalytic and Political Significance of Otto Gross* (Routledge, 2017). He is also a published graphic artist, sculptor, and poet (*Crow of Minerva*, *Indelible*, *Self & Society*, *The Ekphrastic Review*, *The Rose in the World*, and others, as well as in some of the journals mentioned above).

Interviews: <https://vimeo.com/196609212> and <https://youtu.be/zxEkj9SsAKw>

On beauty: <https://www.youtube.com/watch?v=wK5HSUgngQE&t=165s>

Artwork: <https://youtu.be/fha4jiiN2MI>