

ISSN: 1556- 9195

# **Psychotherapy and Politics International**

**THE BAATN JOURNAL**



**BAATN**

# PSYCHOTHERAPY AND POLITICS INTERNATIONAL

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*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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# Psychotherapy and Politics International

2025, VOL. 23, NO. 1, 1–3  
<https://doi.org/10.24135/ppi.v23i1.02>

Online ISSN: 1556-9195 Journal homepage: <https://ojs.aut.ac.nz/psychotherapy-politics-international>

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## EDITORIAL

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## INTRODUCTION

This is the first issue of *Psychotherapy and Politics International (PPI)* to be published since the second inauguration of Donald Trump as President of the USA. Many of us might be scratching our heads wondering how such a result could be possible. Others may have sceptical theories, and some might even feel triumphant and jubilant. No doubt there will be a normative swing to the right whilst those on the left look on aghast and are pushed further into the margins.

It can be expected that the attack on consciousness will be a concern to many authors, practitioners, and readers. The validation of emotive rhetoric, shocking and oppressive to many, is reality we may all have to face for some time yet as two of the most powerful men in the world continue to conduct their business in resetting the geopolitical stage. The spectres of Nazism and white supremacy are looming as the imperialist war in Ukraine continues, and Trump and Netanyahu conceive a final solution that would consummate the Palestinian genocide. The possible effects of all this on culture, on human lives, and on the subjective sphere are still unpredictable, but they will surely pose unprecedented challenges to psychologists, psychotherapists, and psychoanalysts.

## CONTROVERSIAL DISCUSSION

The rise of new forms of imperialism, conservatism, and fascism in the world become the backdrop to our leading articles in this issue of *PPI*. These articles are part of a controversial discussion about psychotherapy in the UK. By reading this discussion, we can get a glimpse of some of the ideas and political forces that are currently clashing around the world.

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Colin Feltham, a sceptic of 'woke' mindsets, challenges the assumptions of a 'woke ideology', claiming it makes democratic discourse difficult, if not impossible. His article was submitted to us some time ago and posed us with various ethical and political dilemmas. We felt that Feltham's ideas were so revealing and so worrying, so representative of what is happening in the world, that we could not risk declining publication. So, we made the decision to accept the text, but accompany it with a responsive dialogue.

We thought it was important that Feltham's ideas could be published without censorship, alongside an open discussion and counter-argument. To that end we are grateful to Keith Tudor, another senior white Western man, for his initial peer-reviewed analysis and critique, and his further dialogue with Feltham, as a colleague with opposing views. We offer these to the reader and hope that it helps to facilitate our capacity to think and mentalise now and in times to come.

### **PEER-REVIEWED ARTICLES**

After the impetuous controversial discussion between Feltham and Tudor, we offer three peer-reviewed articles, the first on experiences of racism in the UK and the next two with practical proposals, one on psychotherapy for people with HIV and the other on community psychology for Palestine. The first peer-reviewed article is by Vahishta Bomi Pardiwalla and Ohemaa Nkansa-Dwamena who use a phenomenological approach to explore racial microaggression experiences of British Asians. Pardiwalla and Nkansa-Dwamena present research with eight participants, each of them interviewed with semi-structured interviews, which reveal how racial microaggressions impact participants emotionally, personally, professionally, and socially.

Moving from research to practical proposals, Ka Ka Chong introduces a social justice informed psychotherapy for people living with HIV. The author explores how social justice principles can be integrated into psychotherapy to address experiences shaped by factors such as race, gender, sexuality, and socioeconomic status. Chong's article advocates for the use of intersectionality as a tool for conceptualising, critically reflecting, and mitigating the relational dynamics.

Chong's proposal is still psychotherapeutic, while Pedro Henrique Antunes da Costa and Kíssila Teixeira Mendes, in the following article, seek to overcome what they describe as the political limits of psychotherapy by drawing on past experiences of Palestinian community psychology. These experiences, as interpreted by Antunes da Costa and Mendes, demonstrate the need to go beyond psychology, academia, and institutionalisation through a political praxis linked to liberation and anti-colonial struggle. The authors defend both solidarity with Palestine and the production of knowledge that engages with Palestinian resistance, especially from the perspective of Palestinians.

## NOTES FROM THE FRONT LINE

In addition to the three controversial discussion pieces and the three peer-reviewed articles, this issue of *PPI* includes two Notes from the Front Line. The first of these is a reflection by Ceri Lyck-Bowen on the Israel–Palestine conflict. Unlike the article by Antunes da Costa and Mendes, which calls for engagement and solidarity with Palestine, Lyck-Bowen’s note seems to lean more towards neutrality, highlighting reasons why all nations need to remain as neutral as possible in the conflict. The main thing here is a ceasefire, respect for civilian lives, and long-term solutions such as the two-state solution.

The second Note from the Front Line is a reflection by Hannah Charlton on the consequences of colonial childcare. Charlton narrates and examines in detail the story of Marjorie, who spent her early years in India under British rule, and who felt torn between her British-born mother and her Indian ayah. This childhood experience was reconstructed and treated psychotherapeutically many years later, revealing significant aspects of the British empire and colonial life.

## LOOKING FORWARD

The next issue of *PPI* is a special issue on the theme of the African diaspora. Focusing on the personal, social, and professional experiences of British African counsellors, psychotherapists, and trainees, the issue features Rotimi Akinsete as guest editor. This looks to be an exciting and vibrant edition, continuing the identity of this journal that supports the principles of intellectual and emotional literacy, creative thinking and deconstruction, and of social and political context in the quest of expanding consciousness.

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## ARTICLE

### Psychotherapy in the UK: Multicultural, Eurocentric, and Americentric influences on a complex field in a troubled time

Colin Feltham\* Sheffield Hallam University, UK

#### ABSTRACT

It is now typical to assert that the UK, USA, and other Western nations are systemically oppressive towards minoritised groups, and that their psychotherapy traditions are in the same mould and in need of overhaul. Mass immigration and multiculturalism are uncritically endorsed by a powerful progressive left-wing. The putative evils of Brexit, Eurocentrism, and Americentrism are constantly pointed out. This article reminds us that psychotherapy in Britain has in fact largely been imported from continental Europe and the USA, and Britain is not especially resistant to knowledge coming from elsewhere. Evolutionary and historical phenomena are presented here to suggest that a valid counter-narrative to the currently dominant leftist-progressive view is available.

**KEYWORDS:** multiculturalism; Eurocentric; Americentric; Brexit; antiracism; epistemic justice

I recently found myself writing critically of the Eurocentric and Americentric assumptions underlying psychotherapy. It is fashionable, perhaps even *de rigeur*, to display one's awareness of 'epistemic injustice' (Fricker, 2009). This is the charge that the Western intellectual tradition has privileged its own thinkers and ideas, and downgraded comparable traditions in the non-Anglosphere, or 'Global South'. 'Little Englanders' in particular assume that England is, or should be, the centre of the world and all its values. To the contrary, it is now all of a piece with the decolonising and antiracist movements to despise and belittle the UK and USA and their psychotherapy traditions (Farooq et al., 2023; Mullan, 2023). In plain English, this may be rendered 'Look how stupid, smug and aggressive the Anglocentric tradition is'. In '21<sup>st</sup> century multicultural Britain', it is deemed anathema to value, protect, or hark back to 'Great Britain's' intellectual, scientific, and industrial traditions and achievements. Dabashi (2015) has satirised such Anglocentric arrogance in a pungent critique.

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A rare counter-objection to this attitude is found in Richardson and Salter (2023), who focus particularly on Anglophobia in Australia.

There need be no objection to texts and movements seeking to explore, honour, and revive indigenous cultures. Kira Celeste's (2023) is a Canadian account of pre-settler life and psyche that commands some respect, for example. It is of scholarly interest and advances First-Nations' rights to keep alive their narratives. However, white readers have their rights too, which may include dislike and rejection of this book's central theses. These include a Jungian retrofit interpretation embracing psychological alchemy, critique of Christianity, 'European sexual repression', the induced 'trauma of white supremacy' across the past 500 years, anti-capitalism, scepticism about science, and the well-known call to own and work through white racial identity. Celeste and others appear to suggest that the best way forward for Western civilisation is to turn to the supposed wisdom of a mythological past and its spiritual intelligence. There may be three ways of responding to this: (1) to accept the narrative fully or partially, and enact the massive atonement it suggests; (2) to reject it as impractical and doomed nostalgia based on fetishising indigeneity; (3) to accept it ironically as part of the tragedy of uneven human evolution. I gravitate towards the last of these, seeing we eight billion humans as greatly dispersed geographically and culturally but inspired by Western standards of knowledge, comfort, health, and safety, with pockets of anti-Western sentiment. Response No. 1 resonates somewhat with the critique of McGilchrist (2023), the claim that our brain's hemispheric asymmetry is leading us towards disaster and must be rebalanced.

It is an appealing claim that we should 'repent' in the direction of greater intuition, creativity, empathy, and fellow-feeling, and it is supported by the ethos of much psychotherapy (Thomas, 2024). However, just as we hear common dismissive critiques of nostalgia for the British Empire, perhaps we should also be wary of nostalgic 'romantic remedies' like Celeste's. I suspect that any effective forward path for human survival and flourishing has yet to evolve or be devised and none will ever be consensual. For all our travel, vaunted intellectual ambitions, and fragments of therapeutic insight, we remain fundamentally local creatures of habit and a long way from knowing how to truly harness our alleged neuroplasticity.

A little reflection reminds us that psychotherapy in Britain has been hugely influenced by, if not largely imported from, other parts of the world. Psychoanalysis is of Austrian, German, and Swiss origin. Sigmund Freud lived in London as a refugee for the last year of his life (1938–1939). Over 30,000 Austrian Jews emigrated to Britain in the 1930s (Shapira & Finzi, 2020). Melanie Klein had moved from Vienna to Budapest, to Berlin, and finally to London in 1926. However, most modern theoretical developments come from the USA, not only in therapy but in psychiatric diagnosis (Watters, 2011). Although the European *ICD* (*International Classification of Diseases*) and American *DSM* (*Diagnostic and Statistical Manual of Mental Disorders*) cover much of the same classificatory ground, the *DSM* retains an edge (Tyrer, 2018). These professional movements intersected with major wars, and with the Western

cultural revolution that began in the 1960s (Feltham, 2014). Threaded through all this was the critical theory intellectual movement known as the Frankfurt School commencing in Germany in the 1920s, spreading forcefully to the USA by the 1960s, and mushrooming into critical psychology at the turn of the millennium. This 'critical psychology-plus' is known by its critics as Cultural Marxism, which is said to be behind the crypto-revolutionary 'long march through the institutions'.

In France there is little of any counselling tradition like that in the UK or USA, but of course a great fascination with postmodern ideas and authors. Although France is little over twenty miles from the UK, its culture and thought is quite distinct (Hazareesingh, 2016). The psychoanalysis of Lacan and others is admired in ways most Britons cannot fathom, and many find ridiculous (Scruton, 2019). Foucault is still revered in higher education in the UK by postgraduate psychotherapy tutors and student researchers. Continental Europe is understandably wary of a return of fascism (Fleury, 2022), and yet Eastern European countries display a defence of nationalism based on their precarious freedom from USSR tyranny. Although a 'long peace' underpins EU nations, tribal and ethnic turmoil and terrorism erupt among disaffected Muslim communities in France, Sweden, Denmark, Belgium, and Holland in particular. No amount of therapy is likely to transform immigrant resentment into contentment, or indigenous objections into post-racial acceptance. Muted mutual suspicions between old Christian Europe, widespread atheism, and new Muslim communities, are not being addressed. Deep evolutionary identities and historical-tribal antagonisms do not readily disappear. Nisbett (2003) shows how ancient Greek and Chinese thought patterns and philosophies diverged and remain distinctly different today, affecting ongoing geopolitical tensions.

A chronically overlooked aspect of therapy is its founding fathers. Long after the birth of feminist therapy models in the 1970s, the patriarchal principle continues. The vast majority of founders have been white, but with a certain caveat: most have been ethnically Jewish. Freud was Jewish, although denying any stake in religious Judaism. However, so were Alfred Adler (founder of Individual Psychology), Otto Rank (Will Therapy), Melanie Klein (Object Relations), Wilhelm Reich (Orgone/Body Therapy), Eric Berne (Transactional Analysis), Fritz Perls (Gestalt Therapy), Jacob Moreno (Psychodrama), Roberto Assagioli (Psychosynthesis), Viktor Frankl (Logotherapy), Arthur Janov (Primal Therapy), Albert Ellis (Rational Emotive Behaviour Therapy), Aaron Beck (Cognitive Therapy), Francine Shapiro (Eye Movement Desensitisation and Reprocessing), among others. Does this matter or not? Referring to 'Jewish psychological evangelism', Heinze (2004), himself Jewish, candidly explores the 'over-representation' of Jewish contributors to psychology and psychotherapy. Yet this epistemic imbalance remains strangely ignored in the world of therapy. However, in the light of the Holocaust and ongoing antisemitism (recently exacerbated by events in Israel and Gaza in 2023–2024), we might have expected demands for gentile therapists to examine their

unconscious antisemitism. However, no such movement, on a par with critical race theory, is in evidence.

Prominent modern therapists of Jewish ethnicity in Britain have included Anna Freud, Michael Balint, Herbert Rosenfeld, Joseph Berke, Morton Schatzman, Peter Fonagy, Susie Orbach, Andrew Samuels, Windy Dryden, Del Loewenthal, Adam Phillips, Robin Shohet, and Mick Cooper, among others. Modern therapy in Britain demonstrates a powerful European and international influence. The largest psychotherapy training centre Metanoia Institute was established in London in 1984 by Petruska Clarkson, Sue Fish, and Brian Dobson, all from South Africa, who brought humanistic therapy principles. Emmy van Deurzen moved from Holland to France, then to England in 1977, greatly expanding existential therapy training here. Ernesto Spinelli, an Italian, is another prominent existential figure in the UK. The Minster Centre pioneered integrative training in Britain and was launched by Helen Davis, a Jewish émigré from South Africa, along with Hymie Wyse. What drives so many immigrants or their descendants to become therapists (not to mention politicians)? What attitudes might they unconsciously bring with them and propagate?

Although a psychotherapy tradition stemmed from Freud, particularly the Independent or Middle Group of British analysts, and voluntary sector groups created the Samaritans, Relate, and other Christian organisations like the Westminster Pastoral Foundation, most training models in Britain have been imported from the USA. Client-centred or person-centred therapy training was imported in the 1970s, as well as other humanistic therapies, and a little later the early cognitive therapies of Ellis and Beck came to the UK. Apart from the British School, which was a modification of psychoanalysis, very few psychotherapy models have been home-grown. Cognitive-Analytic Therapy and Compassion-Focused Therapy are two of these. Frank Lake's home-grown Clinical Theology, however, is barely known today.

Most therapy models are founded on secular-humanist principles. Some Jungian, psychosynthesis, and other spiritually informed therapies have bucked this trend. However, a not inconsiderable cultural influence on the UK since the 1960s came from India in the form of Transcendental Meditation, the teachings of Jiddu Krishnamurti, and Bhagwan Shree Rajneesh (Osho), among others. Zen Buddhism came to the UK via the writings of Alan Watts (1961/2017), and Perls' integration of Japanese Zen into Gestalt therapy. We might say that the origins of psychological healing lie with the origins of world religions from about 4,000 years ago, especially Hinduism and Buddhism in South Asia, and Judaism in the Middle East. Latterly, mindfulness and compassion have been integrated into some therapeutic models from Japanese Buddhism. Reiki, based on traditional Chinese notions of *Qi* or energetic force, enjoys a degree of support in the West while also being dubbed by some a pseudoscience. Such imports stem from their affective and introspective appeal and the efforts of teachers, sometimes aided by their perceived exotic nature, and few signs of xenophobic resistance are obvious. Loizzo et al. (2023) outline the contributions of Tibetan Buddhism to an emerging

form of contemplative psychotherapy based in New York that also incorporates 'social transformation' of the leftist-progressive kind.

Rational Emotive Behaviour Therapy (REBT), which drew on ancient Greek philosophy, might well have not featured at all in the British context, had it not been for the singular efforts of Windy Dryden. Existential therapy also traces back to ancient Greece as an applied philosophy but it is not regarded as a mainstream therapy. Compassion-Focused Therapy partly draws on Buddhism but its endurance is not yet guaranteed. Person-Centred Therapy was first launched in the UK in the 1970s by virtue of the efforts of a handful of British enthusiasts but its fortunes have waxed and waned in the USA. Therapies are always somewhat subject to epistemic and clinical fashions.

Psychotherapy is little more than a hundred years old and largely a Euro-American (or at root a Jewish-Germanic) enterprise, but Celtic mythology, the Judeo-Christian tradition of 2,000 years, and ancient Greek-derived philosophy from 2,500 years ago have had a steady impact on Britain. Our island character has separated us from the romantic languages and cultures, so that even until recently Franco-German 'continental philosophy' has had an experiential-emotional character while British philosophy has been decidedly logical-analytical and British Christianity has been shaped by a distinct morality and monarchical pragmatism. Not for nothing were Californian therapies suspected of being too 'touchy-feely' for the rather stoical, 'stiff upper lip' Britons. The philosopher Alasdair MacIntyre's critique of Herbert Marcuse, chief Freudo-Marxist revolutionary of the 1960s, demonstrates this clearly (MacIntyre, 1970). Early puritanical American culture benefited to a degree from its renegade groups from Europe and Africa (Russell, 2010) and foreign influences have, to a degree, probably altered Britain somewhat for the better. However, a country that had limited immigration from the Romans, Danes, and Normans across centuries, and only significant mass immigration from Africa, the Middle East, Asia, and Eastern Europe from the mid-20<sup>th</sup> century, arguably has its limits of cultural elasticity.

The formerly vigorous character of indigenous white Britons was enabled by geographical separateness. Surprisingly little interest has been shown in our island character. Some trot out Donne's 'no man is an island' as if densely populated multiculturalism is indisputably the healthiest way forward. However, as Kelman (2022) puts it, 'too much solitude or too much collectiveness impacts our mental health' (para. 3). It has been suggested that as descendants of distant small-group hunter-gatherers, human beings cannot cope well with very large groups. None of us thrives in overcrowded conditions, and an overcrowded multiculturalism is an unprecedented experiment. By one reckoning, Britain's optimum population, or carrying capacity in terms of resources, self-sustaining lifestyle, and wellbeing, is around 16 million (Ferguson, 2009). Our current population is about 70 million and constantly rising due to immigration. Former claims that 'small is beautiful' have been recklessly abandoned in favour of irresponsible mass immigration and loss of self-sustaining industries. We passed the 16 million mark in the 19<sup>th</sup> century, partly due to better medical care that virtually ended infant

mortality. Small Scandinavian countries have been perennially noted as the happiest, with small homogenous, high trust populations until recently.

The drive to explore and the need to trade, however, made for the industrial revolution of 1750 to 1900, and was also propelled by peak British genius in science and engineering. British colonialism is now regarded by many as a wholly evil endeavour but, as Biggar (2023) argues, it also brought many benefits to others, and the British navy played a significant role in ending slavery. Gilley (2022, 2023) has taken pro-colonialism scholarship further still. It has been standard leftist fare, however, to insist that British wealth is underpinned by colonialism and transatlantic slavery, in other words that modern Britons are guilty beneficiaries and should be compelled to recognise this and compensate for it by reparations and DEI (diversity, equity, and inclusion). Texts like Eric Williams' (1944/2022) and Berg and Hudson (2023) continue to drive these beliefs. However, this narrative is being challenged by Niemietz (2024) and others. The point here is that mechanisms like motivated reasoning, confirmation bias, and affect heuristic push an anti-Western narrative, and patient scholarly analysis is required to tease out all nuances. A further point is that psychotherapists are rarely trained historians, economists, political scientists, or philosophers, and are probably not well equipped to make sound political judgements, even if they are often impassioned by a strong emotional social justice drive.

I found myself ambivalent in the early 2000s about my role as an external examiner for counselling courses in Kenya that were validated by a British university. In a country with many dire material needs and an HIV crisis, I was not convinced that British-endorsed, essentially American Person-Centred Therapy was the best way forward. However, the Kenyan perception locked it into that colonial belief. Many Asians now demonstrate that Western psychotherapy is unsuitable for them (Jolly, 2024). However, in Britain we have also uncritically imported American therapy models instead of creating our own. On meeting some Russian psychologists visiting Britain in the 2010s, who were fans of Gestalt therapy, I was puzzled by their enthusiasm but told that emotional expression was increasingly valued after decades of political repression. Britain was certainly affected by both Soviet communism and German fascist strains of politics, but managed to remain highly sceptical of both. Despite importing American therapies, we have retained some beneficial sceptical pragmatism and (what is often derided as) commonsense.

Kenya still has a significant level of threat from HIV/AIDS and some of its healers are not wholly convinced by Western medicine. The same is true in South Africa, where those facing HIV/AIDS are sometimes torn between the Western medical worldview and traditional witchcraft (Ndou-Mammbona, 2022). However, we in the West are asked to consider traditional healing methods as serious contenders (e.g., Moodley & West, 2005) rather than unthinkingly lauding it over the clinical epistemologies of the Global South. In an arena of political imprecision, ideologies of all hues can freely compete but in a medical arena, where life and death are often at stake, precision is extremely important. Whether 'epistemic justice'

or sentimental views of indigenous remedies are at play, questions of efficacy cannot be dismissed. Franz Fanon, Fred Newman, Shoma Morita, Michael White, Insoo Kim Berg, Gabor Maté, all these and many more are separated geographically, historically, and reputationally, and must vie for validity in the evolving global marketplace of psychotherapeutic appeal and effectiveness.

The work of Jerome Frank (1974) remains highly significant in comparing Western therapies with those from elsewhere (he used the now anachronistic terminology of ‘the shaman in primitive societies’). He inferred that contextual placebo factors probably underpin the effectiveness of all psychotherapy, yet it remains true that therapy is not always effective. In fact, Frank gives an example of a Kikuyu Kenyan man who, at death’s door, was apparently cured by the sacrifice of a goat: it may be that within our own epistemic worlds we are best helped by what we believe in. The World Health Organization’s (WHO) Global Centre for Traditional Medicine aims to investigate and integrate such claims but the WHO, like the American Medical Association, also stands accused of a lurch towards ‘wokeness’.

Easy travel and free-flowing internet information have encouraged worldwide migration in the past few decades, most of it from poorer to richer and from unstable to stable countries. Some see this as a justified karmic reaction to colonialism and Western capitalism, and some believe that all borders are unjustified. Dramatic incidents like the death of George Floyd in 2020 are immediately televised across the world, bringing riots, protest marches, and demands that are African-American in nature but have a disproportionate impact on the UK and other countries. Most psychotherapy professional bodies (American Psychological Association [APA], United Kingdom Council for Psychotherapy [UKCP], British Association for Counselling & Psychotherapy [BACP], British Psychological Society [BPS], British Association for Behavioural and Cognitive Psychotherapies [BABCP]) hurriedly issued antiracist policy statements in 2020 that had an abrupt politicising effect on the therapy professions. Critical race theory was pushed by Black Lives Matter (BLM), and many organisations donated money and changed policies to support BLM. Meanwhile, grave doubts continue to surround the legal process by which Derek Chauvin was hastily convicted (Collin, 2022). The black academic John McWhorter has even called the Floyd case ‘a massive web of bullshit’ (Loury, 2023), if subsequently with some partial retractions. Once proudly referred to as being ‘woke’, the African-American notion of racial justice came to be mocked as merely politically correct wokeness. Nevertheless, this seriously undermined psychotherapy, as whiteness was vilified and ‘white therapy’ was demeaned (Satel, 2022; Thomas, 2023).

Before this, the Brexit referendum result in 2016 had upset so many that free counselling was offered to those who had voted to remain (Kinder, 2019). Loewenthal (2016) spoke for many therapists when he declared Brexit to be ‘encouraging racism’ and ‘individualism at the expense of the common good’ (p. 203). Balanced analyses of the oikophilic and oikophobic views of opposed British tribes were completely disregarded (Goodhart, 2017). As a supposedly bigoted Brexit voter myself, I learned to keep my mouth shut around colleagues

but as the awful truth leaked out, I found friends dropping away and pieces of paid work disappearing. Even as I wrote this, I hesitated before disclosing it, since being hated does not enhance one's wellbeing. Domestic and foreign politics have assuredly encroached on the field of therapy. Most people I know who seek therapy are not, however, especially interested in politics as such, only needing direct help for acute personal misery. However, counselling and psychotherapy are now known to be disproportionately in the hands of decidedly left-wing practitioners across the West (Redding, 2023), just as Western academia is overwhelmingly leftist (Carl, 2017). Farrar and Hanley (2023) attempt an even-handed overview of politics and culture wars in therapy but play down the problems of leftist bias. American recognition of this leftist bias has spawned a movement of conservative therapists (Daum, 2022). Typically dismissed out of hand are any claims of a positive correlation between political leftism (hatred of the status quo and insistence on an idealistic egalitarian future) and mental illness (Kirkegaard, 2020). If this statement appears to be highly tendentious, consider that when aetiological connections are made between capitalism, mental illness, and neurodiversity, very little objection is heard (e.g., Chapman, 2023).

We might claim that therapy is borderless or international. We can say that the national or ethnic origins of therapists have no significance at all but I don't think this is credible. Those migrating from other countries have mixed cultural influences and sometimes English is not their first language. Metanoia Institute, Regent's College, and The Existential Academy in London all recruit internationally. When we consider the degree to which intimate client revelations depend on nuances of English language (as yet by far the most commonly spoken language in the UK) and culture-specific references, it might seem that having less than fluent English is not optimal for a therapist. Modern Britain is multicultural and multi-ethnic, with over 300 languages being spoken, and many regional dialects exist which are not always readily understood. London is by far the most multicultural, and also the most densely populated by therapists and training institutes. Yet there is a slim to non-existent chance of matching all potential clients with therapists who readily understand all cultural and linguistic nuances. Bilingual psychotherapy has been hailed but has its upsides and downsides, bringing both enrichment and complications (Diakonova-Curtis, 2016). The ideology of a harmonious multiculturalism in a small overcrowded island is a fantasy, I believe, based on culpable naivety. As Moffett (2019) shows, different animal species fail to observe territorial boundaries at their peril, and human beings are probably not so dissimilarly troubled across different ethnicities.

I believe it is untrue and unfair to caricature England, and the wider UK, as excessively inward-looking, insular, and systemically racist. Small waves of refugees and émigrés have been welcomed, including some of the greatest intellectuals like Karl Marx, who lived in North London from 1849 to 1883. Others include Jacob Bronowski, Karl Popper, Eric Hobsbawm, Ludwig Wittgenstein, Arthur Koestler, David Bohm, and Ernest Gellner. The UK is of course an island nation and has historically punched well above its weight. One of the reasons it has

attracted migrants from all over the world is its once vibrant intellectual culture, as well as its culture of security, liberalism, and welfare, its artistic traditions, and hedonistic offerings. Paradoxically, many incoming and second-generation migrants complain bitterly about the country they once found so attractive.

Britain currently faces an onslaught of recriminations and in the field of psychotherapy a slew of 'leftist-progressive' activism that threatens altogether to change its norms (Charura & Lago, 2021). We are tacitly compared with Americans who enslaved blacks and had separatist Jim Crow laws (Neiman, 2020) and with Germans who allowed Nazism to rule for twelve years, plunging the country into shame and guilt, and silencing its previous magnificence (Watson, 2011). Activists insist that Westerners—so-called white, heteronormative, patriarchal capitalists—have deliberately marginalised and humiliated everyone in the Global South. However, to claim that non-Westerners have been subject to epistemic injustice for a prolonged period, it is necessary to suggest that they might have contributed far more to material progress had transatlantic slavery, colonialism, and Nazism not existed. The topic of genocidal Marxist regimes must never be permitted to dent the idealised leftist narrative. Unfortunately, it proves extremely difficult to demonstrate achievements that have benefited or would benefit humanity were comprehensive epistemic justice or equality permitted to flourish. The large *political shadow* of leftist-progressivism is yet to be fully exposed and investigated.

Murray (2004) uses a historiometric methodology to attempt just this calculation but finds that outstanding achievements over the last three millennia have overwhelmingly come from Europe, America, and (less so) from East Asia. Of great significance, Jews have contributed vastly more than would be expected of an ethnic group that has been perennially persecuted and that today represents just 0.2% of total world population (Lebrecht, 2019). The ideology of equality brooks no such facts, however, glued as it is to a dogma that promotes the underdog as waiting for imminent financial equity and epistemic reparations. In the process, as with Marxism, the successful must be brought low, whether by relentless propaganda or any other means necessary.

Darwin argued that evolution works extremely slowly and competitively, and mainstream Darwinian thought makes the notion of naturally occurring equality very unlikely indeed. Two pillars of evolutionary tradition, kinship and territoriality, are often vilified by progressives as blood and soil Nazism. Freud (1895/2004) rather pessimistically suggested that 'much has been gained if we succeed in turning your hysterical misery into common unhappiness'. Today's largely American-origin therapy activists promote a programme of imperative liberal progress for both individuals and civilisation. This programme is Marxism-inspired, dogmatic, and not open to reciprocal dialogue. We are told there is no truth, only truths, yet only the truths of the 'oppressed' should now be heard and acted upon. Foucault's *parrhesia*—'speaking truth to power'—is an over-used and disingenuous meme. Britain, and Europe, is a very old civilisation compared with the USA, yet America is succumbing to the populous,



vigorous, aggrieved emotional forces of African-Americans and other groups self-styled as oppressed. These have little or no patience with Darwinian gradualism or Freudian pessimism, with objectivity, science, or commonsense (Marks, 2017). Leftist activist therapists do not see the fatal contradictions they create between mainstream psychotherapy and politics.

White Britons are entreated to feel bad about ourselves: we are racists, colonialists, capitalists, and *psychotic* (Andrews, 2023). Barham (2023) cites sources linking the transatlantic slave trade and dehumanisation of black people with the emergence of European psychiatry, all being part of the alleged collective psychosis of whites which remains entrenched to this day. Barham focuses on the transatlantic ship Zong from which in 1781 about 140 African slaves were thrown overboard as defective cargo. This barbaric event and the ensuing transgenerational trauma underpin the colonial exercise of dehumanisation, and explains the appalling psychiatric practices at the Kingston Lunatic Asylum in Jamaica at the end of the 18<sup>th</sup> century, according to Barham. Yet at the same time, King George III of England famously underwent several episodes of psychotic madness, for which he received treatments that included a straitjacket, burning his skin, putting him in freezing water, and administering emetics, mostly in a private asylum. My point here is that psychiatric treatment must be viewed retrospectively as barbaric, not only towards African slaves but sometimes towards the most privileged white people. Also, no-one today would condone slavery, and certainly not the callous drowning of human beings regarded as dispensable. Yet the six million Jews killed in Nazi Germany, the 800,000 killed in the Rwandan genocide in 1994, the 2,996 New York office workers killed in 9/11, or the 12,000 killed in Gaza very recently suggest that mass murder rationalised by ethnic conflict and religion is ongoing and geographically distributed. Smaller scale but terrible mass shootings and bombings in France (2015), Norway (2011), New Zealand (2020) and elsewhere will also have transgenerational traumatic effects. We can call this evil or madness and argue that it perpetuates psychotic suffering, but this brings us no closer to any real explanation or remedy. Europeans are far from having acted in a uniquely barbaric manner. I have referred to perennial human violence and its many associations as *anthropathology* (Feltham, 2017). I am happy to concede that we have no consensual account of our human past and how culpability should be apportioned (see Graeber & Wengrow, 2022, for a counter thesis), yet there is a clear rush today to consign blame overwhelmingly to the West instead of pausing to reflect on our epistemic impasse.

Today, Britain is expected to welcome many thousands of immigrants from the Indian subcontinent and Africa, and the Philippines to staff our NHS (National Health Service), and we must provide translation services for patients with poor English. Where there is any communication difficulty, whites must endure it. Meanwhile, immigrants are given 'equity' (another term for affirmative action). Immigrants and their descendants complain of being 'othered' but indigenous whites who feel alienated ('strangers in our own land') are expected to remain silent. France has six million Muslim immigrants, many from the former colony of Algeria, while France is 126% larger than the UK, whose Muslim population is around four

million. The UK has millions of Middle Eastern and Pakistani Muslims, Indians, Caribbeans, Africans, Hong Kongers, and others from former colonies, refugees from everywhere, and many Eastern Europeans. Branded as 'vibrancy', this vast influx is experienced as bewildering, unmanageable, and alienating by a silent majority of indigenous Britons. While immigrants are encouraged to complain about racism, to have their 'minority stress' recognised, and their mental health needs specifically catered for, white citizens must endure accusations of colonial aggression and must pay for the sins of their ancestors. Andrew Hartz (2024) writes about the real experiences of clinically neglected white American men who suffer from the consequences of the demeaning of whiteness.

Gilman and Thomas (2018) note the tension between white 'racists' as mentally ill versus evil, and mention the attempt to create a psychiatric category of 'intolerant personality disorder' (p. 247). This is at the same time that many therapists decry psychiatric labelling altogether. These instances of doublethink are expected not to mess with white minds. Presenting whiteness as a scourge or part of an analysis of morally axiomatic terrible white supremacy should not go unchallenged. Yet falling into a tit-for-tat game is unhelpful. The Gilman and Thomas argument is that it is clear who racists are and they must be held accountable, not absolved for being mentally ill. The unintelligent game we can then play is to retort that knee-jerk leftists suffer from 'pathological altruism' and the like, instead of being held accountable for their dogmatic anti-capitalist, antiracist rhetoric propagated through language games. A far more intelligent, rounded, psychologically deep analysis and dialogue is needed that therapists should enter into but do not.

The term 'racism' is poorly defined but often conflated with even the mildest rational objections to mass immigration. It is important to clarify the difference between visceral racism (intense hatred of those of another race or ethnicity) and valid concerns about sheer numbers of immigrants from cultures that may not be readily compatible with the host culture. One can like and welcome individual immigrants but be disturbed by significantly changing demographics that represent an upheaval in cultural values, norms, and resources. Conflation of rational concern with genocidal Nazism is a mischievous tactic employed by Antifa activists. The magnification of alleged racism and linked grievances around the 2020 Floyd case has been dubbed a 'collective psychosis' by ex-*New York Times* journalist Nellie Bowles (2024). Epistemic distortions of this kind are calculated to make whites doubt and muzzle themselves, and this doubt undermines resilience and mental health.

In November 2023, the BBC Radio 5 Live presenter Nihal Arthanayake said that an 'overwhelmingly white' working environment was affecting his mental health. His speech was part of a conference on diversity in the media (Johnson, 2023). Arthanayake is British but his parents had migrated from Sri Lanka. His BBC salary in 2022 was £154,999. He complained that 'It's really affecting me that I walk in and all I see is white people' (para. 2). He further commented that no senior Muslim staff were evident in his workplace (he comes from a Buddhist family). Exactly how his mental health was affected was not specified. Such cases

are always presented as instances of systemic racism and the touted remedy is said to be equity, or shoehorning more non-white people into senior roles. Never discussed are claims from white people that their mental health is affected by being 'the only white person on the bus', or by struggling to understand the broken English of an African-origin nurse or Asian doctor. Even for me to point this out puts me at high risk of being labelled a racist, or guilty of white supremacy or white fragility. The terms shoehorning, non-white, and broken English are probably signs of my alleged racism. Yet this is the typically fraught multicultural milieu in which we in Britain now live. The 'lived experience' of Arthanayake takes precedence over the lived experience of white people, who are still 82% of the UK population (Gov.uk, 2023). 'Mental health' has become a vague but strong tool for the 'oppressed' to accuse the 'oppressor'.

One of the alleged components of racism is the microaggression, a supposedly small but hurtful word, gesture, or piece of body language (or its omission) that reinforces racist attitudes. In order to combat these microaggressions, whites who are allies of non-whites and who wish to work on their racism should undergo unconscious bias training. The psychologist Scott Lilienfeld (2017) has argued that so-called microaggressions are poorly defined, subjectively reported, and incapable of due analysis and rectification. Anyone accused of microaggressions may suffer serious consequences regardless of their protests. However, two unexamined aspects of these alleged microaggressions are (1) that they may also be felt as directed against whites, and (2) that in densely multicultural societies such *micro-misunderstandings* are sure to abound between people from very different cultures. However, since the oppressed minority groups always call the shots here (based on the assertion that racism = prejudice + power), the protests of the alleged micro-aggressing oppressors are dismissed.

However, all things must pass. England blended into the 'United Kingdom' in 1927 but calls for independence for Scotland intermittently grow today. The USA grew much larger and more powerful than its former coloniser from 1776 but it too is now losing its position in the world. European nations split from empires and then coalesced into the European Union which some have likened to the USSR, even calling it a 'prison of nations'. The USSR lasted for seventy years. Africa's troubles, for which the West is commonly blamed, have persisted before and after colonialism. Geopolitical flux over the long term is the rule. However, in the domain of the individual too, within the world's eight billion, each person struggles and dies, as Buddhist wisdom testifies. Personal suffering varies according to genetics, resilience or otherwise, happenstance, politics, and economics. However, today's leftist therapists have turned their backs on the former categories, pluralistic therapy claims aside (McLeod, 2022). Today, the personal is apparently *only* political; and what's more, the politics can only be authentic if leftist in orientation.

Persons and nations often long for a lost golden age of childhood or ethnic purity and economic prosperity. Some of this is clearly based on illusion, and the past is barely

retrievable. Older people often crave an impossible return to familiar scenes and the younger generation without adequate history or numeracy sees only idealistic futures. Many young people want a borderless multicultural Britain, and many immigrants demand increasing rights. A one-world government of equally distributed ethnicities and religious adherents is surely envisaged. However, young and black conservatives exist, and in the latter category have quite vociferously argued their corner (Hughes, 2024). Though frequently denied, there are non-whites who love the UK as it is, women who object to feminism, and gays who do not want gay marriage. Indeed, when evidence is gathered that the UK is not racist (Sewell, 2021), antiracists loudly voice their epistemic supremacy based on the morally superior category of lived experience. Craig Frisby, a black psychologist and academic, is vociferously opposed to leftist bias in psychology in the USA (Frisby et al., 2023). Konstantin Kisin (2023) writes enthusiastically about the UK and the West, following his emigration from Soviet Russia.

Migration is a core feature of homo sapiens (Cohen, 2019). Conflict has often driven migration but with it comes further conflict, especially in modern, densely multicultural societies. Migration is inevitable but also problematic. Civilisations are built over centuries and progress made, but longstanding religious, political, and ethnic resentments fester, and for good or ill even the best civilisations are eventually toppled, either from within or outside. Change is inevitable and necessary, but some changes go too far, too rapidly, and become destructive. One would think that psychotherapists, many of whom are now busying themselves on social justice causes, might have the education, insight, and foresight to see this in panoramic and historical terms. Unfortunately, too many are under the spell of an underdog hysteria and have lost sight of the stubborn, enduring reality of common unhappiness and the modest contribution that therapy can make. For a profession that rests on principles of free association (Kris, 2019) and radical honesty (Blanton, 1996), we are remarkably unwilling to engage in open dialogue about these matters and much keener on mocking, cancelling, or silencing those with whom we disagree. Freud had in the 1890s explicitly cautioned patients against suppression of disagreeable internal observations. Some transactional analysts emphasise the importance of spontaneity and 'functional fluency'. Leftist therapists nominally espouse therapeutic openness but severely limit political openness. Epistemic negotiation is necessary before any foundations of epistemic justice are agreed. The lived experience of aggrieved white, long-term indigenous Britons should be considered as well as the lived experience of immigrants claiming systemic racism. Family therapy or large group principles if applied to interethnic strife might suggest a fruitful path forward, but I am somewhat doubtful.

Let's not forget that we are living through a 'moment'. Nations and empires pass, and religions and ideologies pass. The 'culture wars' will pass too. The talking therapies may seem as if they have always been with us but this is certainly not so. We may assume psychotherapy is here to stay but this is unlikely. Therapy models come and go, therapeutic fads fade. The highly politicised therapy of today cannot last. Personal modifications by genetic engineering,

surgery, and AI, may increase. The state of universal equality in a hoped-for utopian society would presumably obviate the need for much psychotherapy. Otherwise, dystopian outcomes might include a drastic fall in reproduction, genocides, or mass suicides, which would also reduce suffering in the long run. Let's remember too that the majority of the world's population live without any psychotherapy, and millions have no real interest in politics.

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## PEER-REVIEWED ARTICLE

### The importance of methodology and method, sense and sensibility: A critical review of and response to ‘Psychotherapy in the UK: Multicultural, Eurocentric, and Americentric influences on a complex field in a troubled time’ by Colin Feltham

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#### ABSTRACT

This article is a critical review of and response to Colin Feltham’s article, ‘Psychotherapy in the UK: Multicultural, Eurocentric, and Americentric influences on a complex field in a troubled time’, also published in this issue. The article critiques the lack of method and/or underlying methodology in Feltham’s article, and, by contrast, offers a methodological basis for this critique of his article, which frames this response in terms of Feltham’s rhetoric (language), his references to tradition and to authority, and his lack of objectivity. In doing so, this article addresses and challenges Feltham’s use of unfounded generalisations and familiar tropes about multiculturalism, Anglo- and Americo-centrism, political correctness, wokeness, and all the other ills he attributes to ‘dominant leftist-progressive view[s]’ of psychotherapy and counselling in the United Kingdom—and, by implication, elsewhere. It also challenges what appears to be a certain obsession on Feltham’s part both with various forms and categories of Leftists, as well as with an idealised white indigenous Britishness.

**KEYWORDS:** critical review; methodology; method; critique of rhetoric; critique of tradition; critique of authority; critique of objectivity; post-truth psychology

#### INTRODUCTION

First of all, I am grateful to the editors for giving me the opportunity to respond to what I am fairly certain many readers will find to have been (assuming you have read it first) an

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incendiary article ‘Psychotherapy in the UK: Multicultural, Eurocentric, and Americentric influences on a complex field in a troubled time’ written by Colin Feltham (2025) and published in this issue of *Psychotherapy and Politics International (PPI)*. Of course, the fact that Feltham’s article has been accepted and published in *PPI* is the first of a number of ironies associated with his article, which is that this journal was founded and has been edited by colleagues who espouse the dominant, Leftist progressive views that Feltham so despises. Based on my experience as an editor (of over 60 issues across six different journals), I consider that many editors would have rejected Feltham’s article outright on the basis that it is a highly opinionated—and, in my view, a rather badly written—opinion piece, full of generalisations and unprocessed prejudices; and is both racist and sexist, the risk of accusations of which Feltham himself acknowledges. Of course, had the reviewers of Feltham’s article and the editors of this journal taken that course and rejected the article, the author would no doubt have used that evaluation and decision as further evidence of the power of the Leftist establishment in therapy (a term I use in this article to encompass psychotherapy, counselling and other ‘psy’ activities) to cancel dissent.

At the same time, while I acknowledge the generosity of the editors’ decision to publish Feltham’s article, along with this review and response, I was—and am—concerned about his views being given the oxygen of publicity and the distress caused especially to Black and Asian colleagues and readers by Feltham’s unsubstantiated claims and complaints. I can only hope that this critical review and response will act as something of a fire blanket to dampen and, hopefully, extinguish the fires he has set.

I should also acknowledge Feltham’s courage in being willing to submit his work for publication, knowing that it would—and, indeed, should—provoke such a response. I recognise that commentators like Feltham and others, such as Jordan Peterson (see Burston, 2019), represent certain views which still others might think but not express, which need to be addressed and countered, a point to which I return at the end of this article.

So, in this review and response, firstly I take issue with Feltham’s lack of methodology and method, and, secondly and by contrast, declare my methodology and method which offers a framework by which I have organised the material in this article, which thus forms my critical review of and response to Feltham’s article, in terms of his rhetoric or language, his references to tradition and authority, and his lack of objectivity. Following this, I conclude with some reflections on the context in which such debates take place, and on the task for progressives in any beyond the ‘psy’ disciplines and professions.

## **THE ABSENCE OF METHODOLOGY OR METHOD**

Colin Feltham is an Emeritus Professor of Critical Counselling Studies at Sheffield Hallam University in the UK (and an External Associate Professor of Humanistic Psychology at the

University of Southern Denmark, Odense), but doesn't declare or define in what way and/or on what basis he is critical. For that we have to look elsewhere. In a book he wrote that presents a critical examination of *Counselling and Counselling Psychology* (Feltham, 2013), he states that he is drawn to a kind of critique referred to as 'exuberant scepticism' (Kurtz, 2010). Although Feltham doesn't define what he or Kurtz mean by this form of scepticism, the adjective exuberant appears to be an attempt to distance scepticism from its association of being negative (Kurtz, 2010). If this is the sense of exuberance Feltham is trying to achieve in his work, I have to say that, as far as this article is concerned, it doesn't work. The article, essentially comprising a list of complaints, is almost entirely negative, and contains no solutions other than Feltham's desire to see the UK return to the optimum population of 16 million, his own version of a nostalgic, romantic remedy of which he himself complains. Perhaps unsurprisingly, Feltham doesn't offer any thoughts about how to relocate the burdensome additional 54 million residents, though given his reference(s) to 'white, long-term indigenous Britons' (p. 11), there is a clear sense of who Feltham would put first on planes to nowhere. There's another irony here in that Nigel Farage, the leading proponent of Brexit (which Feltham supported), is descended from German migrants who immigrated to the UK in the 1860s, some ten years after Britain had achieved its optimum population (according to Ferguson [2009], whom Feltham cites approvingly), a fact that conjures a strange image of Feltham père (or, rather, great great grandparent, assuming, of course, that Feltham meets his own criterion of indigeneity) standing on the white cliffs of Dover with a placard saying 'Farage(s) go home'! While I appreciate this is a little fanciful, the point is that the term 'indigenous Britons' is inherently problematic, as the Celts and Picts were supplemented by the Vikings, Bretons/Normans, Angles, Saxons, and so on, all of which goes to show that the idealised population is a migrant population. A further and more profound irony (to which I am grateful to Kris Gledhill for alerting me) is that, as Great Britain and the United Kingdom exported its population around the globe, were Feltham's solution adopted by many other countries whose populations are not 'naturally' white, then the UK is going to be much more 'crowded'! The fact is that the size of the world's population, made possible by all sorts of 'progress', much of which might be 'credited' to white British folk, means that population has to be accommodated somewhere.

It is this kind of implication, as well as the general tone of this article that reveals a more serious and worrying shadow to Feltham's advocacy of exuberant scepticism which, rather like the naïve counsellor who defends the misuse of self-disclosure on the basis that that they were only being congruent, comes across as an excuse for expressing any distrust or mistrust without responsibility. More recently (than his 2013 work), Feltham has written a book on *Depressive Realism* (Feltham, 2017) in which he argues that people with mild-to-moderate depression have a more accurate perception of reality than people who are not depressed; acknowledges that depressive realism is a worldview of human existence that is essentially negative; and declares himself to have a 'depressive outlook' (p. 5) on life and experience. I mention and source this as it appears (at least to me) that the unstated but implicit

methodology of Feltham's article is a kind of depressive realism which underpins method which, essentially, is one of complaint.

By contrast, in writing this review and response, I do acknowledge both a methodology and a method.

My methodology is based on critical theory informed by non-conformism, radical social work, radical psychiatry, feminism, revolutionary socialism, critical race theory, and disability politics (Tudor, 2018b); and, specifically, four aspects of a critical approach originally identified by Mingers (2000), i.e., the critique of rhetoric, the critique of tradition, the critique of authority, and the critique of objectivity, a taxonomy which was subsequently applied to a critical literature review by Saunders and Rojon (2011). The method I adopted in writing this article was a critical reading of Feltham's text, by which I identified a number of themes which I then organised under each of the four aspects of Mingers' critical approach, with an emphasis on the first of these, i.e., the critique of rhetoric.

## THE CRITIQUE OF RHETORIC

The critique of rhetoric refers to the appraisal or evaluation of a problem with effective use of language, and the critique of language. Thus, in this part of the article, I take issue with Feltham's unsubstantiated claims, offensive statements, and problematic relationship with whiteness.

### *Unsubstantiated claims*

Feltham's article is full of generalised, unsubstantiated statements, examples of which (from the first half of the article alone), include:

- 'It is now typical to assert that the UK, USA, and other Western nations are systemically oppressive and that their psychotherapy traditions are in the same mould and in need of overhaul.' (p. 1)
- 'Mass immigration and multiculturalism are uncritically endorsed by a powerful progressive left-wing.' (p. 1)
- 'The putative evils of Brexit, Eurocentrism, and Americentrism are constantly pointed out.' (p. 1)
- 'For all our travel, vaunted intellectual ambitions and fragments of therapeutic insight, we remain fundamentally local creatures of habit and a long way from knowing how to truly harness our alleged neuroplasticity.' (p. 2)
- 'the British navy played a significant role in ending slavery.' (p. 6)

- ‘It has been standard leftist fare, however, to insist that British wealth is underpinned by colonialism and transatlantic slavery, ... [and] that modern Britons are guilty beneficiaries and should be compelled to recognise this and compensate for it by reparations and diversity, equity, and inclusion.’ (p. 6)
- ‘psychotherapists... are probably not well equipped to make sound political judgements, even if they are often impassioned by a strong emotional social justice drive.’ (p. 6)
- ‘Dramatic incidents like the death of George Floyd in 2020 are immediately televised across the world, bringing riots, protest marches, and demands that are African-American in nature but have a disproportionate impact on the UK and other countries.’ (p. 7)

While I am tempted to refute each one of these as well as the other generalisations in Feltham’s article, that task would require another article in itself (and would run the risk of giving such statements more oxygen than they deserve). That said, I do want to pick up the example of the British Navy helping to end slavery, which, as with most arguments, needs to be understood in its—or, at least, an—historical context. Briefly, this was that, having profited from the slave trade for some 250 years, by the end of the 18<sup>th</sup> century, the British were keen to prevent colonial rivals from benefitting from the same form of trade. So, in addition to the legal and moral arguments—the Somerset case of 1772 had ruled that slavery was illegal in England—there were economic and political arguments in favour of the abolition of slavery. Nonetheless, the profit had been made—one estimate this as between £2 billion and £108 billion (at current prices) (Heblich et al., 2023)—and continued to be made on the back of trade routes from the west coast ports of Glasgow, Liverpool, and Bristol to Africa and America. The economic inflows from colonial times were huge and also involved benefits to British industry, for instance, the Lancashire cotton mills were able to export cotton to India because the British had closed down that industry in India.

However, for the purposes of this present article and argument, I am simply pointing out the nature of such statements and their rhetoric which confuses—and attempts to conflate opinions with facts. This, in turn, contributes to the problem of fake news, the promotion of what I would call post-truth psychology—and, notwithstanding Feltham’s own references to motivated reasoning and confirmation bias—the fact that his article is open to the accusation that it represents precisely such reasoning and bias.

### *Offensive language*

At one point in his article, Feltham acknowledges that ‘Even for me to point [these things] out puts me at high risk of being labelled a racist, or guilty of white supremacy or white fragility’ (p. 12), speculating that the ‘terms shoehorning, non-white, and broken English are probably signs of my alleged racism.’ (p. 12). These sentences represent another irony: that the author appears unaware that they are prime examples of white fragility. They are also offensive,

though in stating that, I am aware that, when I or anyone else asserts that something is offensive, this raises the issue of free speech and, from street corners to academies and parliaments, the defence of the right to free speech and expression. At the same time, there are serious consequences to hate speech, not least in undermining social cohesion and shared values, and in impacting negatively on people, for instance, on students' psychological state (Saha et al., 2019). In response to countering hate speech, the United Nations' Secretary-General António Guterres said: 'Addressing hate speech does not mean limiting or prohibiting freedom of speech. It means keeping hate speech from escalating into something more dangerous, particularly incitement to discrimination, hostility and violence, which is prohibited under international law.' (United Nations, 2019, para. 4). In this context, I would say that Feltham's views as expressed in his article, while not meeting the threshold for incitement, are biased, and expressed in ways that are unnecessarily provocative and likely to cause offence and hurt. To be clear, I am all for conscientious objection, being argumentative (Tudor, 2016), and critical (Tudor, 2017, 2018b), but with awareness that such objection, argument, criticality, and free speech itself are not absolute rights but rather—and especially in the Western civilisation and context Feltham that extols—come with relational responsibilities (see Cornell et al., 2006). (Feltham's article contains a number of references to Western—nations, intellectual tradition, civilisation, standards of knowledge, cultural revolution, psychotherapy, medicine, medical worldview, therapies, etc.—but none to Eastern or Southern traditions, or to the fact that what he refers as Western is also a Northern tradition, for a critique of which see Connell [2008] and Tudor [2012]). Somewhat predictably, Feltham invokes political correctness and wokeness, and 'politically correct wokeness' (p. 7). Whenever I see or hear this particular language game, I am reminded of the following exchange between a heckler and the Irish comic, Dara Ó Briain:

Heckler: Fuck PC [political correctness]; let's go for it.

Dara Ó Briain: Yeah, let's fuck the PC brigade... all those bastards with their manners and good courtesy... [but] good to have you here, my friend [and] nice to know that you're ready to get involved at a moment's notice with any kind of easy political rant that you'd like to throw out. (Ó Briain, 2016)

In another problematic passage, Feltham equates the killing of 140 African slaves in 1781 (which he acknowledges was barbaric), the ensuing transgenerational trauma underpinning the colonial exercise of dehumanisation, and the appalling psychiatric practices at the Kingston Lunatic Asylum in Jamaica at the end of the 18<sup>th</sup> century with the barbaric psychiatric treatment of King George III. Feltham writes: 'My point here is that psychiatric treatment must be viewed retrospectively as barbaric, not only towards African slaves but sometimes towards the most privileged white people.' (p. 10). This is an astonishing—and, yes, offensive—equation which reveals Feltham's lack of analysis of power, colonialism, and racism, and his misunderstanding and/or ignorance of the difference between equity (based on a critical analysis of power and oppression) and equality (based on liberal notions of

sameness). This is hugely important as such misunderstandings and/or ignorance lie at the heart of many current political debates and antagonisms in the world and, not least, the fuelling of hate (see Alschuler, 2013; Clarkson, 2003).

The third area in which Feltham's rhetoric is problematic is with regard to whiteness.

### *Problematic relationship with whiteness*

Feltham appears obsessed with uncritical whiteness, in particular, with white Britishness, as evidenced by the following:

- 'white readers have their rights too' (p. 2)
- 'The formerly vigorous character of indigenous white Britons' (p. 5)
- 'White Britons are entreated to feel bad about ourselves: we are racists, colonialists, capitalists, and *psychotic*.' (p. 10)
- 'Where there is any communication difficulty, whites must endure it.' (p. 10)
- 'While immigrants are encouraged to complain about racism, to have their "minority stress" recognised and their mental health needs specifically catered for, white citizens must endure accusations of colonial aggression and must pay for the sins of their ancestors.' (p. 11)
- 'Never discussed are claims from white people that their mental health is affected by being "the only white person on the bus", or by struggling to understand the broken English of an African-origin nurse or Asian doctor.' (p. 12)
- 'The lived experience of aggrieved white, long-term indigenous Britons should be considered as well as the lived experience of immigrants claiming systemic racism.' (p. 13)

Again, these are astonishing statements, each of which warrants refuting and deconstructing, and all of which are based on the assumption of equality, with no analysis or appreciation of power or privilege, let alone white privilege or colonisation. This reminds me of an experience I had when participating in a Black Lives Matter demonstration in Auckland, which was large, inspiring, and, while expressing anger, was inclusive and good-natured. There was, however, one person—an older white man—standing slightly apart, and with a significant space around him, with a placard that read 'White lives matter, too'. As another older white man, I went up to him and said, "Of course white lives matter. All lives matter, but that's not the focus of this demonstration. This demonstration is acknowledging the *fact(s)* [and, I might have said, statistical evidence] that Black lives appear to matter less." Clearly, he didn't agree, but at least he gradually drifted away from the demonstration.

In his article, Feltham makes no reference to the extensive literature on critical whiteness (e.g., Giroux [1997], Green [2003], Willer-Kherbaoui [2019]), or to any of a number of articles



published in this journal on the subject, i.e., Altman (2003), Smith et al. (2021a), Denyer (2022), Smith et al. (2021b), Hunt (2022), Brown and Mousa (2023), George (2024), Hook (2024), and Whitney et al. (2024)—which I recommend to Feltham and other readers, together with my own modest contribution to this literature (Naughton & Tudor [2006], Tudor et al. [2022]). This is based on the idea of being culturally intentional (Shweder, 1990), that is, that everyone has a culture, that white is not neutral and the other ‘cultural’ and, therefore, demonised or exoticised; and that there is a critical approach to whiteness (Applebaum, 2016; Giroux, 1997) that acknowledges the social construction of whiteness against certain polarities, and that interrogates that particular construction as well as the privileges that go with it.

## THE CRITIQUE OF TRADITION

This critique refers to the use of evidence and ideas in the literature to help question (the) conventional wisdom. As I have commented elsewhere (Tudor, 2018b), the history of psychotherapy has many examples of this. Indeed, I argue,

the development of psychotherapy over the last 200 years has been based on critique of what was then (previously) the tradition. Notable examples include Otto Gross’s work; Wilhelm Reich’s Sexpol movement; Karen Horney’s challenge of Freud’s theory of penis envy; the challenge to heterosexism in psychotherapy practice and theory from gay therapists and queer theory, and similar challenges from black and indigenous practitioners and theorists of racism in psychotherapy. (Tudor, 2018b, p. 15)

Feltham does offer a critique of tradition in his paragraphs on the influence on psychotherapy in Britain/the UK of traditions ‘largely imported from, other parts of the world’ (p. 2), though he doesn’t link this to any ideas about epistemology and, specifically, local knowledge (Totton, 1999; van der Ploeg, 1993; Wynne, 1995), a concept and perspective that has been discussed in this journal by Tudor (2012) and Fay (2013). Also, and somewhat surprisingly, given his own references to indigeneity—‘indigenous whites’ (p. 10), and ‘indigenous Britons’ (pp. 11 and 13)—neither does he refer to the articles in a special section in one of the issues of this journal on ‘Indigeneity in Europe’, i.e., Bagge & Berliner (2021), Sisalli (2021), and Van Werde (2021), with commentaries by Hargaden (2021) and Kohu-Morgan (2021). (In fact, in his article, Feltham refers to only one article published in this journal.)

In introducing his argument about the founding father of models or schools of therapy being white but Jewish (an argument I found somewhat strange and confused, not helped by the lack of structure and signposting in his article), Feltham notes that ‘the patriarchal principle continues’ (p. 3)—and then, ironically, perpetuates this principle (a) by including

Melanie Klein as one of the founding fathers, and (b) by omitting notable women psychotherapists and founders such as:

- Karen Horney, who critiqued Freud's notion of penis envy (see Horney, 1926) and, later, established the Association for the Advancement of Psychoanalysis, and its affiliated teaching centre, the American Institute for Psychoanalysis.
- Jessie Taft, who was arguably the founder of the relational approach in psychotherapy (see Taft 1933/1973).
- Charlotte Bühler, who was one of the founders of humanistic psychology and the co-author of the first book on the subject (Bühler, 1935; Bühler & Melanie, 1972).
- Lore (Laura) Perls, who is now widely acknowledged as the co-founder of Gestalt therapy (Serlin & Shane, 1999; Stevens, 2024). (Several chapters of the book *Ego, Hunger and Aggression: A Revision of Freud's Theory and Method*, which was originally published in 1942 with Fritz Perls credited as the sole author [Perls, 1942/1947] were, in fact, written almost exclusively by Laura Perls.)
- ... as well as many women psychologists who were, in different ways, founders, pioneers, and/or firsts, including: Mary Whiton Calkins, Anna Freud, Tsuruko Haraguchi, Ruth Howard, Marie Jahoda, Mary Ainsworth, Virginia Satir, Mamie Philips Clark, Martha Bernal, and E. Kitch Childs.

These omissions are examples of what Connell (2008), writing about assumptions of Northernness, refers to as the grand erasure of knowledge and experience from the metropole, but which, in this context catches something of the misanthropic and, more problematically, misogynistic flavour of Feltham's text and its erasure of women's knowledge and experience in the field of therapy.

## THE CRITIQUE OF AUTHORITY

This critique refers to the questioning of the dominant view(s) in a particular field. While Feltham's article clearly represents a critique of authority, the various authorities about which he complains, but regarding which he rarely offers any citations or evidence, include:

- Multiculturalism.
- 'A powerful progressive left-wing' (p. 1), 'dominant leftist-progressive view' (p. 1), 'standard leftist fare' (p. 6), 'left-wing practitioners' (p. 8), "'leftist-progressive" activism' (p. 9; which Feltham does attribute to Charura & Lago, 2021), 'idealised leftist narrative' (p. 9), 'The large *political shadow* of leftist-progressivism' (p. 9), 'Leftist activist therapists' (p. 10), and 'leftist therapists' (p. 12).

- ‘The decolonising and antiracist movements’ (p. 1), ‘an anti-western narrative’ (p. 6), and ‘Antifa [anti-fascist] activists’ (p. 11).
- ‘A Jungian retrofit interpretation’ (p. 2), including ‘romantic remedies’ (p. 2) (regarding which Feltham does cite Celeste, 2023).
- ‘Critical psychology’ (p. 3), the encroachment of ‘Domestic and foreign politics... on the field of therapy’ (p. 8), and ‘highly politicised therapy’ (p. 13).
- ‘Postmodern ideas’ (p. 3).
- ‘The ideology of equality [sic]’ (p. 9), which is ironic as it is Feltham who is promoting the ideology of an idealised, horizontal equality between all differences and diversities.
- ‘Imperative liberal progress’ (p. 9).
- Psychotherapists, ‘many of whom are now busying themselves on social justice causes [but who] are under the spell of an underdog hysteria’ (p. 13).

This list exposes a basic flaw in Feltham’s article which, in effect, comprises the setting up of a series of straw man arguments, a logical fallacy which attacks a distorted argument in order to prove the point the author wants to make. Moreover, given the number of unsubstantiated references to these authorities, especially leftists, anti-racists, and critical psychologists/therapists, Feltham appears to be under the spell of the very underdog hysteria about which he complains.

Nowhere in his article does Feltham question other forms of authority, for instance, the authority of Freud or of psychoanalysis, or recognise that psychotherapy (psyche + therapeia, meaning soul healing) dates back much further than the past 100 years; as he puts it: ‘Psychotherapy is little more than a hundred years old and largely a Euro-American (or at root a Jewish-Germanic) enterprise.’ (p. 5). This statement alone betrays Feltham’s Western—and Northern—mindset. Nowhere does Feltham mention how therapy was used in the Third Reich of Nazi Germany (1933–1945) to support propaganda, especially of the normative gender role of women (see Cocks, 1977); or how, in the McCarthy era (during the late 1940s through to the mid-1950s), American therapists were encouraged to—and did—report their communist clients to the US House of Representatives’ Un-American Activities Committee (see Schwartz, 1999). Nowhere does Feltham question the authorities in therapy who pathologised clients and trainees on the basis of their sexuality, which forced early LGBTQI+ colleagues to remain in the closet for the duration of their training, including their own analysis (see O’Connor & Ryan, 1993); or the British Christian counsellors who promoted conversion therapy until as recently as 2014 (see Strudwick, 2014). Neither does Feltham acknowledge the political decisions of a decidedly non-Leftist Labour government which, under the Layard happiness agenda based on an economic argument in favour of cognitive behavioural therapy (Layard, 2006), *reduced* rather than increased access to the range of

psychological therapies available to the British public (for a critique of see Dalal, 2018; Tudor, 2008/2018a).

Finally, on the question of authority, when critiquing Celeste's (2023) work on a Jungian investigation of settler psychology indigenous cultures, Feltham pulls no punches in advancing the option of simply rejecting Celeste's analysis as 'impractical and doomed nostalgia based on fetishising indigeneity' (p. 2). At the same time, he appears blissfully unaware of his own impractical, doomed—and problematic—nostalgia for some idea(l) of indigenous Britishness when he refers to 'indigenous objections into post-racial acceptance' (p. 3), the solution to which is some form of racial Apartheid; and 'the formerly vigorous character of indigenous white Britons' (p. 5), who, it is implied, have been weakened by integration and miscegenation. It would be interesting to know precisely to what point in British or English history Feltham traces white indigeneity as we know that two Roman Governors of Britain were Black: Quintus Lollius Urbicus, Governor of Britain (139–142 Common Era [CE]) and Septimus Severus, a Roman Emperor who was based in York for three years (who died in 211 CE). Given the number of Black Roman soldiers, I am pretty sure that we could safely assume there would be Black Britons as far back as the first century CE. Feltham also refers to 'indigenous whites who feel alienated' (p. 10); the 'silent majority of indigenous Britons' (p. 11); and 'the lived experience of aggrieved white, long-term indigenous Britons' (p. 13), all of which only polarises important debates and takes us further away from thinking together and across divides about social and political issues such as migration, immigration, population growth, the impact of climate change and war, as well as how therapy can help people(s) with their responses to these very real issues, something that this journal has been considering and promoting for over 20 years.

Unfortunately, Feltham's language represents what Connell (2008) refers to as a reading from the centre, or perceived centre, in this case, of the UK, and the Western intellectual tradition. This partiality offers an appropriate lead in to the fourth and last aspect of Mingers' critical approach, the critique of objectivity.

## **THE CRITIQUE OF OBJECTIVITY**

This critique refers to the recognition that neither the knowledge nor the information under discussion is value free, and, more broadly, that it is not possible or desirable to be objective, especially in the human sciences, of which both psychotherapy and politics are prime examples. I suggest that the nature, i.e., the partiality of Feltham's critique of authority as demonstrated in the previous part demonstrates precisely his lack of objectivity.

Feltham claims to hold the moral high ground when he associates himself with 'Darwinian gradualism... Freudian pessimism... [and] objectivity, science, [and] commonsense' (p. 10)

and, in a particularly bilious passage, complains about those who, he asserts, have little or no patience with these (his) perspectives and qualities:

Today's largely American-origin therapy activists promote a programme of imperative liberal progress for both individuals and civilisation. This programme is Marxism-inspired, dogmatic, and not open to reciprocal dialogue. We are told there is no truth, only truths, yet only the truths of the 'oppressed' should now be heard and acted upon. Foucault's *parrhesia*—'speaking truth to power'—is an over-used and disingenuous meme. Britain, and Europe, is [sic] a very old civilisation compared with the USA, yet America is succumbing to the populous, vigorous, aggrieved emotional forces of African-Americans and other groups self-styled as oppressed. (pp. 9-10)

Apart from the non sequitur ('...', yet America...') (of which there are a number in the article), the racism (the 'emotional forces of African-Americans'), and the dismissiveness ('self-styled' oppression), again, Feltham doesn't seem to recognise that his own writing in this article is dogmatic; certainly not dialogic; dismissive (of any analysis or form of oppression); and disingenuous (as he only refers to privileged oppressors who are, according to him, the real victims) of Leftism.

Of course, Feltham's promotion of Darwinian gradualism, Freudian pessimism, objectivity rather than subjectivity especially phenomenology, science rather than human science (Rogers, 1985), and commonsense or pragmatism, places him further away from the humanistic psychology he espouses, no doubt, ironically—or, more accurately, cynically.

There are other examples of Feltham's lack of objectivity, such as his dismissal of atonement without exploring what the word means, i.e., at-one-ment (see Aulén, 1970), and of microaggressions without reviewing any of the literature, both of which are also beyond the scope of this review and response, but which need to be noted and, at some point, addressed further.

At one point in his article, Feltham gets defensive about 'Little Englanders' (p. 1), but, later, in his somewhat depressive conclusion, comments: 'However, all things must pass. England blended into the "United Kingdom" in 1927' (p. 12). He then references calls for Scottish independence and claims the United States of America is losing its position in the world. Unfortunately for Feltham, his claim of blending is simply inaccurate. Historically, after the departure of the Romans (in 410 Common Era), England and Wales reverted to being separate countries. Later, first the Normans and later the English invaded Wales, and the two countries were 'united' by the *Statute of Rhuddlan* 1284 which aimed to replace Welsh law with English law. This was consolidated in the 16<sup>th</sup> century when Wales was annexed by England by means of the *Laws in Wales Acts* of 1535 and 1542 (note the preposition). So, if anyone's feeling blended—or, more accurately, annexed—it's the Welsh, not the English. Fast forward to 1603 when, following the death of Elizabeth I of England and Wales, James VI of Scotland inherited the English (and Welsh) Crown. In 1706 both parliaments agreed on a *Treaty of Union* and passed two separate Acts which created one parliament of Great Britain. So, no blending, but,

rather, union. Finally, following the independence of the Irish Free State in 1922, and its recognition in British law in the *Irish Free State Constitution Act* of 1922, in 1927 Great Britain and Northern Ireland became the United Kingdom of Great Britain and Northern Ireland. So, again, no blending, but another union. However, while that's the history, I acknowledge that Feltham and others *feel* 'blended'—and overwhelmed, overcrowded, othered, etc. (all words Feltham uses). Nevertheless, it's important to distinguish fact from feeling and for people to own the subjectivity involved rather than to project unresolved feelings as pseudo-objective realities.

In his book on depressive realism, Feltham (2017) acknowledges that 'Like most [depressive realists], my personality and outlook has always included a significantly depressive or negative component.' (p. 4). When I read that in the context of undertaking the research for this article, it made more sense of the approach Feltham takes in his present article. He then goes on to assert that he is someone with a 'depressive outlook' (p. 5) and that this should not be thought of in pathological terms. While I totally agree with Feltham's perspective on not pathologising a depressive outlook or depressive or negative views about life and experience, equally a depressive outlook shouldn't stand as an excuse for parading a litany of untheorised complaints about life and other people, based on what I would call a depressive *reactivity*.

## CONCLUSION AND REFLECTION

I agree with one point that Feltham makes in his article when referring to history, colonialism, slavery, economics, guilt, compensation, and reparation, which is 'that patient scholarly analysis is required to tease out all nuances.' (p. 6). Unfortunately, his article is neither patient or scholarly, nor nuanced or professorial. I note this not to suggest that Feltham gets cancelled but, rather, that he takes responsibility for the consequence of what he says or writes—and, indeed, for how he votes. At one point in the article, he complains that, as a result of voting for Brexit, he 'found friends dropping away and pieces of paid work disappearing.' (p. 8). So what? It's as if Feltham thinks he has the unalienable right to sound off and make personal, professional, and political choices—with no consequences.

Feltham's piece does, however, raise some important issues beyond the specific content, which reflect wider debates about the nature of truth, fake news, the confusion of feelings and facts, and the privileging of feelings over facts, free speech, and so on.

In this context, Feltham's piece is emblematic of the emergence and now trend in nationalist, right-wing, anti-woke rhetoric and writing in which speakers and authors feel free to say the most heinous things in the knowledge that it will, first and foremost, enrage progressive thinkers and force them to respond. We see this in the attitudes and arguments of men—and they are predominantly men—such as Donald Trump, Nigel Farage, Steve

Bannon, Jordan Peterson, Victor Orbán, and others. Dave Nicholls (personal communication, 10<sup>th</sup> December, 2024) offers the following analysis of this:

In the face of this provocation, the right winger knows that the progressive writer has little choice but to point out the factual, scholarly, stylistic, or substantive errors, if they're being charitable, and/or, or call out their naked bigotry. This leaves the right winger free to claim the moral high ground (once the sole privilege of the intellectual), and shout that this is just more evidence that the leftist is an elitist pedagogue, out of touch with the experience of the common people.

This, of course, is deeply ironic as left-wing political parties and movements are—or were—viewed as the natural home for the tired, the poor, the huddled masses, and the homeless, the oppressed and alienated—and of the critical thinking to right such wrongs:

Welfarism, affirmative action, social insurance, comprehensive education, and the like were meant to address... inequity, by making everyone a critical thinker. But the right is now—perhaps rightly—pointing out that this has been [the left's] own project of advantage, privileging some at the expense of many others. (Nicholls, 2024)

This is a problem that has been faced by white well-educated radical feminists, by post-colonial critics, by much of the European left, and is now being faced by the Democratic Party in the United States of America, following the recent election—and it's a problem I face(d) in responding to Feltham's piece. I am glad he wrote it, and I wish he hadn't; but, thinking more broadly, I wish the state of the world was such that people didn't think and act in terms of such rhetoric and solutions. Equally, I'm glad I've responded to it, but from a meta-critical perspective, I'm wondering if, rather than dampening the fire (as I intended), by responding in the way I have, I'm just adding fuel to it and to a bigger fire that's now burning down the progressive house? In some ways, the old left slogan "No platform for fascists—and racists" was easier.

In a lovely turn of phrase, Deleuze (1992) writes that 'There is no need to fear or hope, but only to look for new weapons.' (p. 4). If pieces like Feltham's do or provoke anything constructive, they will be to force progressive thinkers to *be* progressive and to find new 'weapons' to remind people that difference and inclusiveness *has to be* the goal for life, including psychotherapy and politics, internationally.

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## ACKNOWLEDGEMENTS

I wish to acknowledge the crucial and critical input and support of my colleagues and friends, Kris Gledhill and Dave Nicholls, and my colleague and partner Louise Embleton Tudor in writing this article—tēnā koe e hoa | thank you my friends.

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**Keith Tudor** is a qualified social worker and psychotherapist, and professor of psychotherapy at Auckland University of Technology, Auckland, Aotearoa New Zealand. He is a past editor and co-editor of *Psychotherapy and Politics International (PPI)* (2012–2022), and the author of a number of critical publications in and on psychotherapy, including *Conscience and Critic: The Selected Works of Keith Tudor* (Routledge, 2017), *Psychotherapy: A Critical Examination* (PCCS Books, 2018), and, most recently, *Transactional Analysis Proper – and Improper: Selected and New Papers* (Routledge, 2025). He is particularly keen to support open access publication and, to that end has brought three journals (including *PPI*) onto an open access platform, on which he has also published four books: Tuwhera Open Access Books (<https://tuwhera.aut.ac.nz/publications>).

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## ARTICLE

### Competing ideologies in and about psychotherapy: An exchange of views

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#### ABSTRACT

Following Colin Feltham's article in this issue (Feltham, 2025), and Keith Tudor's response (Tudor, 2025b), also published in this issue, the article comprises a series of exchanges between the two authors. It encompasses some discussion—or statements—about beliefs and values; differences of ideology; the use of language; equality and equity; and the nature of psychotherapy. The impetus for the exchange was based on the hope of some rapprochement between the two authors' views but, in this sense, the project failed. The necessary unfolding of divergent views does not reach any positive conclusions but, at least, airs significant sticking points held by practitioners in the field, about both the content and process of differences, positions, and argument. Nevertheless, and notwithstanding their profound and unresolved differences, both authors hope that, together with the two preceding articles, the whole exchange will stand as a case study regarding conflict about culture and identity in the profession and serve to stimulate further questions.

**KEYWORDS:** beliefs; values; equity; equality; misunderstanding

#### THE INVITATION

**Keith:** Well, Colin, by now the reader of this issue of the journal will, we assume, have read your article and mine, and have their own responses.

Initially, I have to say, I was going to leave it there, but then Karen (Minikin, one of the editors of the journal) forwarded an email you sent her with the draft of a

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letter you were proposing to send to the journal basically saying how awful my response was. In it, you referred to a lack of civility, misunderstandings, hurt feelings, remote misunderstandings, and name-calling. Although my initial reaction was ‘Here we go again. I’m now getting criticised for daring to respond to what appears to be acceptable to say and write these days’, for various reasons, I thought that I would break the ‘polarised stalemate’ (as you put it in your email), by reaching out and inviting you to this dialogue—or, at least, exchange of paragraphs—to which you agreed to participate, so here we go.

You will, of course, want to make an opening statement, but I’d like to begin by asking you whether you had any sense of the possible or probable responses and/or reactions to what you wrote—and whether you considered those in writing your piece, especially for this journal? I ask as, from my point of view, I read and see all the accusations you make of me and us (slurs, insults, hate speech, caricaturing, etc.) in your piece, whereas you think it’s quite neutral and reasonable. (By ‘us’, I refer to your caricaturing of me, this journal, and, no doubt, ‘fellow-travellers’, as representing ‘dominant leftist-progressive views’ (Feltham, 2025, p. 1). If only my views were dominant! In the profession, I’m actually quite marginal and peripheral.

## THE EXCHANGE

**Colin:** Well, Keith, where do I start? I’m sure our politics are very different and it’s likely we will never agree. However, your response here also confirms for me that our very perception of these matters is at odds. I had not expected my original article to be published. I thought it would be either rejected or submitted to a process of revisions. Had this journal rejected it, I would not have made much of it, since I am used to rejections and mature enough to accept them. I believed my article might rankle enough to be rejected by editors I imagined as ‘leftist-progressive’ (or similar terms) but for myself I felt I was simply trying to state a case, however challenging, that the UK and ‘the West’ is not the terribly monstrous, racist place it is increasingly painted as being.

Now, our differences of perceptions may be due to personality factors, class, ideology, geography, and so on. However, from my point of view (and not only mine but probably the majority of the UK population, and many in the psychotherapy professions) the ‘Anglosphere’ and Western Europe has been under assault since the late 1960s and has been seriously undermined for the past 20 years. I am sure you dislike the terms ‘political correctness’ and ‘woke’ but these encapsulate much of the stalemate and rancour involved. I (think I) understand that you may feel you have no dominant position but many of ‘us’ in my corner have felt under siege for years—

told what we can say and cannot say, been threatened, intimidated, and cancelled. Minorities have (in my perception and that of many) come to wield covert power which is now quite overt, and exercised by activists embedded in academia, the civil service, media, publishing, and elsewhere. As you know, this movement has been referred to as Cultural Marxism, or the 'long march through the institutions'. For some time, I have been trying to find a space for dialogue between the parties in this stalemate. I sometimes use the term 'psychology of belief' in an attempt to understand why we are so divided and unable to find common ground. I think of Martin Buber but also of psychotherapists whose mission is precisely to listen patiently to others' utterances and nuances. The polarisation facing us today is characterised by a notion that those who disagree must be misinformed, stupid, or evil (notably in the case of Brexit, for example, or closer to home in the trend towards imposing the ideology of diversity, equity, and inclusion (DEI) on psychotherapy training institutions). Does this begin to shape our dialogue or am I unwittingly causing further confusion and distress?

Keith: Thanks for this, Colin. I'd like to start my response to what you've written by acknowledging its tone, which appears much softer and more engaging than your original piece, perhaps reflecting more of the hurt than the anger that you (and other colleagues) feel.

From what you say, there's a certain irony that arises from the fact that your paper was accepted for publication. As you will have gathered, I wouldn't have accepted it as it was/is, but would have offered you the opportunity to revise and resubmit it, but then we might not be having this dialogue or exchange, so, in this sense, while I disagreed with the editors' original decision, I'm glad we're here, even though I recognise it's variously painful for all concerned. I know that one of the editors found your article so distressing that they couldn't bring themselves to read it a second time, and that I had a heartsink moment when I saw the notice that informed me that you had written your first comment—and I'm sure you've had your own moments in dealing with the threats, intimidation, and cancellations to which you refer. Nonetheless, I want to pick up on what you said about believing that your article 'might rankle enough to be rejected by [the] editors', as if you wanted to rankle them/us enough to reject it—and you. When I think about and reflect on that word—meaning to cause continued annoyance or resentment—it makes sense not only of the tone of your original paper but also of the tone of my response. As Berne (1966) observes: 'The behavioral outcome of an ulterior transaction is decided at the psychological and not at the social level' (p. 227).

I agree that our differences—and the differences we represent—are due to the factors you list (personality, class, ideology, geography) and more, but I don't agree that the 'Anglosphere' has been under 'assault' and 'seriously undermined' for the past 20 years. I would say that it's been critiqued and rightly so, but this doesn't mean you or anyone else has to discount your Anglo identity; quite the opposite. I 'discovered' my Englishness and aspects of my English identity when living in Italy in the mid-1980s; Billy Bragg (a working-class hero if ever there was one) writes beautifully and poignantly about his search for belonging in *The Progressive Patriot* (Bragg, 2007). In my view, such critiques provoke (call forth) us to be progressive and to join in levelling the playing field (Figure 1) rather than regressive and reactive. You're right, I don't like the accusations of 'political correctness' and 'wokeness' as I think they're easy ways of dismissing progressive ideas and practice and only contribute to the stalemate and rancour you mention.

**Figure 1. An Uneven Playing Field**



I do want to say something about diversity, equity, and inclusion values—but am aware that I have already written about the same amount as you, and, as I don't want to create an unevenness in our exchange(s), I'll leave it there for now.

**Colin:** Yes, I've certainly had my moments of cancellation and so on. On my rankling, I'm afraid you attribute greater malice to me than anything that went through my mind, and your reference to Berne has the quality of a remote diagnosis, or psychiatric



name-calling at one remove. My long-dead father, a plasterer and Labour supporter, would not have aligned with Billy Bragg any more than I do. I hesitate to say this but the most likely hero for today's working-class is Tommy Robinson. As for the Anglosphere, my Englishness, my 'regressive and reactive' response, this has the same flavour of rancour from you, in my estimation. I don't think we will get far in this way. Can we try another way?

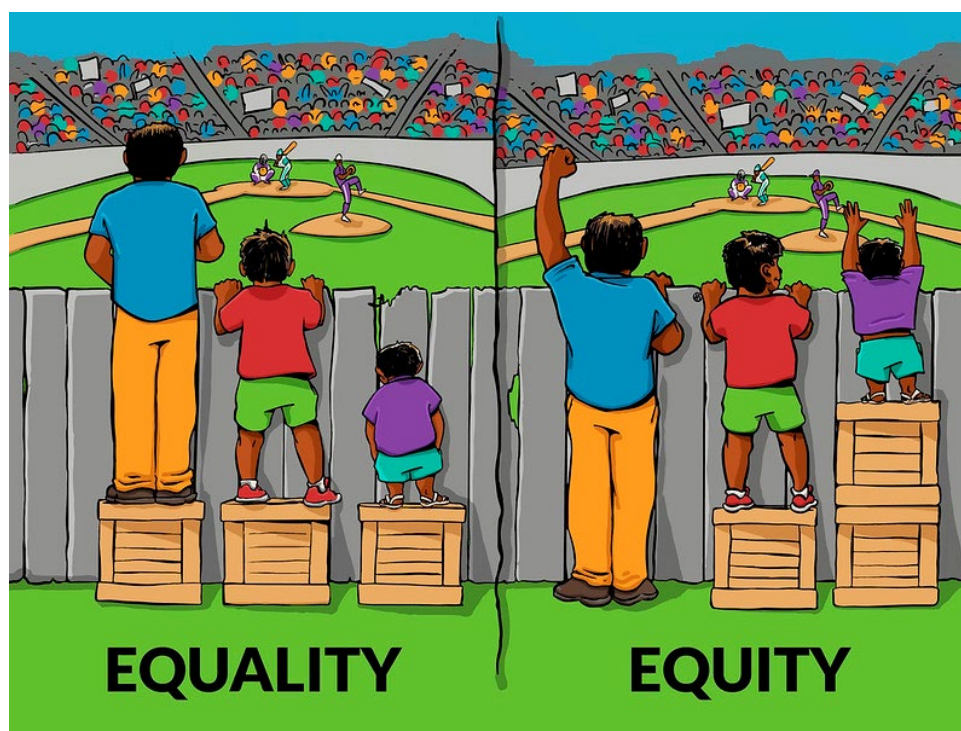
These are complex matters we're discussing in a highly condensed way. I suspect there are problems of assumptions and miscommunication beneath the surface. There isn't time to drill down into depth and nuance on many issues and instead we may fill communication lacunae with our own projections based on affect heuristics. We might too readily erect traffic stop signs in our discussion, based on linguistic objections instead of accepting provisional meanings. We are trying to be reasonable but isn't it possible we both harbour only dimly recognised emotional and visceral reactions within ourselves? We might instead try to lay out our grand but tacit, divided ideologies. Would you agree that we have a polarised choice between these two positions, which in principle are open to democratic endorsement or rejection?

- (1) *A 'conservative' interpretation of human history roughly based on a Darwinian notion of 'nature red in tooth and claw' (as Tennyson [1850/2024] puts it), in which the animal world is plainly unequal and full of suffering. We are evolved animals containing both primitive reactions and sophisticated reasoning. Some countries, groups, and individuals do better than others. The winners have produced great civilisations, advanced industry and technology, life-saving medicine, and magnificent architecture. Meritocracy underpins this movement. The accompanying predatory patriarchy, racism, and capitalism are consequences of human evolution and can gradually be modified but too rapid, revolutionary changes are unwise and counterproductive, leading to totalitarian regimes that are worse than the original problem.*
- (2) *A 'progressive' interpretation of the human world that regards inequality as an anathema to be urgently overturned by any means necessary, in which the past is the past. We have known since Marx the mechanisms of the advantaged, oppressive classes and how these are perpetuated by economic self-interest, labour exploitation, property control, environmental degradation, free markets, slavery and colonialism, police and military control, and propaganda. It is immoral and damaging to passively accept this scenario—in which the chronically poor, dispossessed, and victimised are ignored or further impoverished—when correct political analysis and humanitarian decency indicate what needs to be done. Not to act is to be complicit.*

If you agree with this condensed summary (and of course you may well not agree), the next compelling question (for me) is why most of us gravitate towards one or the other narrative. Obviously, many of us belong somewhere in the middle of this. However, why we believe what we believe is an unanswered question, and indeed rarely addressed. Most psychotherapists probably lean towards 'ideology' 2, especially since the advent of DEI in the wake of George Floyd's 2020 death. However, I have spoken with trainees who say they are intimidated into compliance. Psychotherapy had a predominantly intrapsychic focus until a few years ago but has now turned into a form of 'critical social justice' (Thomas, 2023). Would you agree? I am trying to identify the most significant differences between us and to bring the focus to psychotherapy.

**Keith:** Ouch! How you misunderstand and/or misconstrue my intention(s). Far from attributing any malicious intent on your part, my picking up on the word rankling was an attempt to connect with something you had said, and to reflect on what had been co-created, including my annoyance or resentment. Similarly, my reference to Berne was not intended to diagnose you but, rather, an attempt to acknowledge that what happens in communication (it's one of Berne's three rules of communication) is decided at the psychological level by both parties. With regard to the Anglosphere, and Englishness (not specifically yours), again I feel that you simply throw back/reject my attempts to connect and to generalise rather than personalise the challenge—and then you raise the idea that the most likely hero for today's working-class is Tommy Robinson... (I'm sure that, if readers of the journal don't know who Tommy Robinson is, they can look him up.) As you've referred to him, I want to understand whether you're seeing him as a hero for disenfranchised, white working-class men (particularly), or aligning yourself with his views, or both? I ask this as I think it relates to the wider, polarised positions you summarise, with which I broadly agree, although, rather than '*an anathema to be urgently overturned by any means necessary*' (which appears more extreme than your summary of the first position), I'd probably frame it more in terms of '*an injustice to be corrected*', which also allows me to share another picture that illustrates the difference between equality and equity in the face of inequity (Figure 2).

**Figure 2. Images Representing the Difference Between Equality and Equity**



*Note.* From *Community Eye Health* [Image], by Angus Maguire, 2016, Flickr (<https://www.flickr.com/photos/communityeyehealth/27755848262>). CC BY-NC 2.0

The question *why* we believe what we believe is an interesting one and, I agree, is rarely addressed, but I think a logically prior question (in the sense of it being easier to access) is ‘*What* do we—or I—believe?’ This also provides the basis for the question, ‘How do my beliefs impact on my practice as a psychotherapist?’ which, in turn, leads me to focusing on values. As Rogers’ (1957) puts it: ‘One cannot engage in psychotherapy without giving operational evidence of an underlying value orientation and view of human nature’ (p. 199)—which is why I think your outline of the two positions is useful. Interestingly, Rogers goes on to state that ‘It is definitely preferable, in my estimation, that such underlying views be open and explicit, rather than covert and implicit’ (p. 199). Would you agree that this is desirable?

I don’t agree with you when you state that ‘Psychotherapy had a predominantly intrapsychic focus until a few years ago’ as I think the history of psychotherapy reveals a long and strong sense of its concern and engagement with the social world. As Aron and Starr (2013) acknowledge: ‘for a long time psychoanalysis was as much a social movement, a movement for reform in education, social policy, and culture as it was a treatment method’ (p. 28). I think that this is an important point for our discussion as, if you see psychotherapy as essentially about the intrapsychic world, then I can understand your concern about it being turned into any particular social

form. However, if you see psychotherapy (as I do) as, in Western terms, an Enlightenment project, then you (one) would be fine with it being a form of liberation (as did the early radical psychiatrists), and/or anti-oppressive practice (see, for example, Lago & Smith, 2003), with an analysis of social injustice. In one piece of research, I and a colleague identified some 15 categories of radical therapy, the earliest of which dated back to the 1920s (Tudor & Begg, 2016).

**Colin:** About misunderstanding, generalising, and personalising—yes, it seems I have misunderstood some of your motives and phrasing here, Keith, and your explanation is helpful. I'm afraid I disagree with your analysis of (mainstream) psychotherapy as having always been concerned with social conditions. Yes, it has had components of and advocates for a sociopolitical focus (notably Adler, Horney, feminist therapy, a wave of US-based multicultural counselling, and, later, critical psychologists such as Ian Parker). I'm sure too that you are more aware of 'non-Western' models of psychotherapy than I am, such as Franz Fanon's. Of course, there have been *some* politically active person-centred therapists, for example, but in my years of practice, training, and supervision, these components have always been subservient (or marginal) to individual and intrapsychic concerns, *and rightly so*. BACP (British Association for Counselling and Psychotherapy) always regarded as inappropriate, indeed unethical, the intrusion of the Christian counsellor's beliefs into sessions with clients. Today we have some therapists advocating that antiracist themes be brought into work with white clients even when clients have expressed no such concerns (Drustrup, 2021).

On our beliefs being prior to why we believe them—this is complicated. Rogers is not an authority figure for me, by the way. I suspect that our beliefs (whether religious, political, psychotherapeutic, or otherwise) are inchoately formulated prior to attempts to make them explicit. It looks to me as if such strong beliefs have unconscious, visceral, and emotional roots and this may be why we (all of us) find it so hard to change or surrender them, as well as presenting blocks to dialogue. Two-party democracy is a conundrum, for example, when we pretend to respect the other party's politics but believe them to be not only wrong in terms of their sociopolitical analysis, but dangerous, unintelligent, or evil. In many current political debates, each side often accuses the other of hateful motives, and political opponents are portrayed as extremists: typically, anyone right of centre is said to be 'far-right' or neo-Nazi, and those left of centre are caricatured as 'far-left' or Stalinist. Your figures are superficially compelling, in my view, only because images, like emotions, are generally more compelling and simplistic than logical argument, evidence, and nuanced discourse. Equity might demand reparations for African Americans, for example, but that is an extremely complex and fractious debate, not at all a

straightforward ‘injustice to be corrected’. Tommy Robinson is a British working-class activist opposed to indiscriminate mass immigration. He has actively highlighted the so-called grooming gangs scandal involving the proven mass rape of white girls by Pakistani Muslim men in the UK. He is described by his supporters as a patriot and by his enemies as a far-right peddler of hateful racism. Brenton Tarrant is a sickening mass murderer who was motivated by anti-Muslim hatred, but Robinson is non-violent and currently imprisoned for ‘contempt of court’. These should not be conflated. I admire Robinson’s raw passion and bravery, and, like him, I believe the UK is being damaged by unmanageable mass immigration and a feuding-oriented multiculturalism, but I am too much of a snob to be an overt supporter of his. One person’s terrorist is another person’s freedom fighter, as they say. Nelson Mandela had a mixed reputation on violence, and Gandhi was reported to be racist against black South Africans. Things are not black and white.

On our dialogue—as we progress in our dialogue here, I am somewhat frustrated by the format and its limits, which for obvious reasons cannot facilitate exploration of nuances and is likely to stimulate unintentional misunderstandings. Even as I commit certain phrases to ‘paper’, I sense that you will want to add your correction, grammatical preference, or nuance! Me too! I over-use apostrophes because I am aware of the dangers of being taken too literally, for example. I wonder if I should omit the Robinson and Tarrant bit in case I am misunderstood or thought insensitive. Like some theologians, we are probably bound to an exercise akin to counting how many angels can dance on the head of a pin; or something like Jonathan Swift’s satirical debate about the correct way to cut a boiled egg. I ask myself ‘should that be African American or African-American?’ I know it’s no longer Afro-American! Linguistic fashions change rapidly, some of them fuelled by the ‘culture wars’ (a phrase I imagine you might reject).

Serious issues face us, but our dialogue is probably distorted by our own psychobiographies, journal constraints, and many other layers of complexity that limit our ability to arrive at meaningful rapprochement. For me, the most enduring crucial issue is the deep impasse in psychologies of belief. This impasse can feed into my ‘depressive realism’ (Feltham, 2017), the feeling that we (you and me but also all feuding human beings) will always remain at loggerheads; or it can feed into a rather quixotic contrarian challenge on my part (Feltham, 2008). I suspect that some ‘neuropolitics’ is involved but even in this probing domain, knee-jerk Marxism inserts itself (Yu, 2022), and humanistic psychologists tend to dismiss all arguments that smack of determinism. Note that all efforts to ‘bring politics into psychotherapy’ are leftist in nature, arguments for the legitimacy of any conservative views being scarce among therapists and academics who do not seriously believe in democracy. The attempt by some to create a pluralistic model of psychotherapy that honours many

theoretical orientations, and includes cultural and political components, is probably doomed by its overcomplexity. Or to put it differently, it taxes average human intelligence.

I think I am generally friendly and polite to everyone I encounter as an individual. My best friend is a vicar who belongs to a group called Sacramental Socialists. After decades on the left, I am a right-wing atheist. I do not welcome the influx of millions of assertive Muslims into Europe, but neither do I hate them. Living as I do in densely populated, multicultural London, I feel increasingly alienated. Being vilified as a white Englishman further alienates me. I do not agree that we are facing a return to the fascism of the 1930s; rather, we are seeing a necessary pendulum swing from the undemocratic leftism of Cultural Marxism towards the right. Governments should never go too far, for too long, in either political direction. Insofar as psychotherapy is helpful, I don't think it should be politicised. I'm sorry I have taken too much space here, but our dialogue is probably, like psychoanalysis, interminable.

**Keith:** Wow, that's a lot to respond to! I have many responses which, for here and now, I organise into four areas and paragraphs.

Firstly, with regard to history—I wrote that 'the history of psychotherapy reveals a long and strong sense of its concern and engagement with the social world' (p. 7); I didn't say that mainstream psychotherapy has always been concerned with social conditions. That's the point: the (conservative) *mainstream* of psychotherapy has only been concerned with the intrapsychic (and, in my view, ever more obscure speculations on the geological layers of the unconscious and their consequent influence on intrapsychic dynamics), which has tended to exclude the impact of the social world and extra-therapeutic factors, and to pathologise those who do attend to the impact of the social/political and cultural. In one way, I think we're each complaining about the mainstream and who has power. You complain about the dominance in psychotherapy of the left and I of the conservative and/or right-wing; and, no matter what arguments or references we bring to bear on the subject, and how many words we expend on this (and I suggest that we don't expend too many more), it seems unlikely that we're going to convince each other of another view or way forward. Perhaps the only—and best—outcome of this (i.e., the publication of your original article, my review and response, and this article, all in the same issue)—is that we're being explicit about what we think, believe, and value, and that we let the reader, and especially the next generation of psychotherapists, decide for themselves. Before I return to values, I do want to make one other point about history, which is to say that while you and other right-wing colleagues complain about political correctness and wokeness, I haven't ever heard or read anything from

or by you and like-minded colleagues acknowledging or commenting on the historical cancellation of gay people in psychoanalysis; the role of psychotherapy under fascism, which was, amongst other things, designed to maintain traditional gender roles, especially for women (see Cocks, 1997); or the conservative therapists who colluded with the United States House of Representatives' Committee on Un-American Activities by reporting their communist clients to the Committee (see Schwartz, 1999); or, until comparatively recently, the exclusion of people of colour, disabled people, and neurodiverse people from training in the 'psy' professions; and so on. Again, I appreciate that the best we might hope for is that all our history—or, perhaps more accurately, histories and herstories—are made available to this and the next generation.

So (and secondly), this brings me (back) to the point I was trying to make about values. It seems to me that one of the contributions that humanistic psychology originally made as a 'third force' in response to psychoanalysis and behaviourism, was to put values on the agenda. Much of the writing of the early humanists was framed in terms of the values of humanism applied to therapy, for instance, in terms of love, creativity, self-actualisation, autonomy, freedom, and so on—see Sutich (1962), the (UK's) Association of Humanistic Psychology Practitioners (1998/2025), and The (US-based) Association for Humanistic Psychology (2025). In this sense, I suggest that humanistic psychology is much more open and explicit about its underlying value orientation, including its view of human nature than most psychoanalysts or behaviourists (for further discussion of which, see Tudor, 2010, 2013/2018, 2015)—and one doesn't have to hold Rogers as an authority figure (which I know you don't) to agree with or simply to appreciate his point about values. If we think about this philosophically, he's pointing to axiology, just as in defining the two positions (p. 5), you're pointing to ideologies (about history and society). I have long argued that psychotherapists need to be more explicit about their personal philosophy, more knowledgeable about the philosophy that underpins their espoused theoretical model and/or orientation, and, therefore, clearer about the practice that follows from that (Tudor & Worrall, 2006). So, I don't have a problem with Christian counsellors (or counsellors who are Christian) as long as they are open and explicit about how their faith impacts on their practice, and I wouldn't have an issue with a therapist who's a fascist as long as they, too, were explicit about it and, therefore, wasn't a member of a professional organisation whose aims, objectives, codes, and frameworks didn't support fascism. Obviously, I have fewer issues with colleagues who state that they are feminist, anti-racist, intersectional, and so on, not only because they are on the side of the angels (I am being humorous), but because, in my experience, they are generally more open and explicit about their identity—and their values align more with the values of psychotherapy (see also my fourth and last point below). By the way, I looked up the article by Drustrup (2021) you cited

and found (a) that the author clearly states that ‘A model is offered for how psychotherapists *can* bring up and work with the topics of race and racism during the course of therapy’ (p. 63, my emphasis); (b) that one of the steps of the model states that ‘*therapists must create a holding environment that validates their client’s experience, improves the relationship, and prepares the dyad to explore the racialized (and often unconscious) nature of their topics in therapy*’ (p. 66, my emphasis); and (c) that nowhere in the article does Drustrup (2021) suggest what you attribute to him. Moreover, the clinical vignette of ‘Geoff’ that Drustrup offers is full of references to the impact of the uprisings around racial injustice on him as a white man; race is of concern to the client and in the consulting room. You probably won’t be surprised about—and won’t want to read—a recent chapter of mine which takes a similar, though more theoretical perspective about working with settlers about their/our relationship with being a settler (Tudor, 2025a). Of course, as a psychotherapist, I am interested in the unconscious as well as the conscious, and, as you say, ‘emotional and visceral reactions’, but these cut both ways (McCann & Tudor, 2024); I want to help people understand, for instance, the origins of their internalised racism, and to think about this in relation to the social unconscious (McCann & Tudor, 2022). Also, a similar fact-check on your comments on Tommy Robinson reveals that he has been convicted of assault twice (for one of which offences he served a 12-month prison term)—and has also been convicted of using threatening, abusive, or insulting behaviour.

This brings me to a third point about language. As you know, one of my criticisms of your original paper was about your use of rhetoric, and it appears here, too in the reference to and image and spectre you raise of ‘millions of assertive Muslims’ (p. 10), as distinct from, say, writing ‘millions of Muslims, some of whom are assertive’. As we’re corresponding directly, I’m genuinely curious about whether, when you write that statement (and make other such comments as you did in your initial paper) whether you consider their accuracy and/or impact?

Finally, some of what we’re disagreeing about is connected to one of the broader issues of our times, that is, of identity politics, which I want to touch upon very briefly, keeping the focus on psychotherapy. Rightly or wrongly, most psychotherapists still undertake training in a specific therapeutic orientation (a term which, for present purposes, I use synonymously with modality or ‘school’) and, therefore, identify, at least initially, with their chosen orientation. So, I am puzzled that, on the one hand, you identify as a humanist—and, therefore, presumably hold humanistic values—and, on the other hand, you say what you do and write in the way that you do. You’ll be familiar with what you wrote seven years ago:

Probably some of my opposition to Humanistic Psychology—and all things bright and beautiful—results from deep incurable attitudinal pathologies of my own, as well as



my aging process. Not for nothing have I been attracted to writers such as Schopenhauer, Camus, Cioran, Becket and Houellebecq. Temperamentally I am somewhat more Freudian (pessimistic) than Rogerian. I do not accept Rogers' concept of an actualizing tendency... Neither can I accept Yalom's warm, American, optimistic portrayal of therapy as an answer to Schopenhauerian pessimism. (Feltham, 2018, p. 47)

I appreciate your openness in writing this, especially in declaring your opposition to humanistic psychology, but am again puzzled (and especially as you're not a pluralist) that you place yourself outside and opposed to humanistic psychology and, at the same time, as an Associate Professor of Humanistic Psychology at the University of Southern Denmark, Odense, still identify with this force of psychology. Surely this is an example of philosophical incongruence? Just as you have acknowledged your shift from 'the left' (which I didn't realise) to being 'right-wing', I wonder whether you would also describe moving away from humanistic psychology to something else—or do you consider your right-wing views as consistent with the values of humanistic psychology?

**Colin:** So many accusations and so little space! My immediate reaction is that I don't know whether to think of you as a pantomime angel or prosecution lawyer (I tend to think the latter). Am I conscious of the words I use? Yes, very much so, but it feels to me that you take things very literally, pretending that there aren't implicit, humorous, innocent nuances and half-spent beliefs beneath explicit current or seven-year-old statements. Fascists like me (this is humour but bring Freudian defences into this if you wish) have used the term 'offence archaeology' for the common woke practice of digging up anything from a person's past they can use as ammunition. Robinson is no more violent or racist than Mandela or Gandhi respectively. I could respond with many 'gotcha' courtroom tactics like your own, but want to focus on more salient issues.

Keith, you challenged me to address various historical injustices, and this is daunting because (a) we don't have anything like enough space for this large topic here, and (b) it seems you want to hold me (and my phantom 'right-wing colleagues', whoever they may be) responsible for historical injustices. Perhaps I can best (if inadequately) respond as follows. I believe deep evolutionary trends explain why men, 'Westerners', heterosexuals, and able-bodied and neurotypical people have held most power until relatively recently. We can argue about history being written by the 'victors', about the 'erasure' of women, gay, and lesbian contributors, and so on, but I am not responsible for the past, just as you dislike geological-psychoanalytic theorising.

You want to portray these oppressed groups as uniform, I think, when you must know that they are politically diverse. Many women do not identify as feminists beyond the second wave of equal pay feminism. Some radical queer theorists reject bourgeois marriage and monogamy, not to mention some transgender claims, and there are a few right-wing gay people. The current British Parliament contains about 10% of LGBT Members, which is an *over*-representation of power and influence. There are many black conservatives who oppose DEI, reparations, and other leftist demands. The Nazi mass murder of gays alongside Jews, like the ongoing Islamist hatred and persecution of gays and Jews, also brings another perspective. Your progressive colleague protesters are scarce in present-day oppressive, patriarchal regimes where extreme homophobia, flagrant misogyny, human trafficking, and myriad human rights violations are rife.

You do not mention ageism among your oppressed groups. Perhaps like the white working-class, old (and often partly disabled-by-age) people are regarded as marginal anachronisms, and often unpalatably conservative? Some bitter 'Remainers' after the 2016 referendum commented that at least old Brexit voters would soon be dead (thank God!). Despite expressed fears that, with Trump and many European populist politicians, we are marching back to the 1930s, there is every chance that crypto-Marxists will continue to assert themselves. If so, while you might welcome a form of Maoist levelling of the playing fields, many of my contemporaries meanwhile express gratitude that they won't be alive to see it. You can call this my paranoid fantasy or depressive realism if you like!

I dislike your conflation of 'humanist' with 'humanistic', the former always having referred to religious non-believers. You have a need for 'putting things in neat boxes' when life is far from neat in most domains. Linguistic uptightness and correct labelling do not advance this dialogue. It doesn't really matter to me, or to most clients in therapy, which terms are used. What matters is the flawed but well-meaning, struggling human being within the outward encounter.

**Keith:** I guess I should have expected a final barrage but, as we agreed that we will end this exchange at this point, I will honour that agreement and won't respond to it, but simply ask you to write a final reflective statement that focuses on the whole process and is directed both inwards (to ourselves) and outwards to the reader (rather than to each other), and will follow that with one of my own.

## FINAL REFLECTIONS

**Colin:** I thought this would be an interesting and possibly fruitful exercise, but it has mostly felt unpleasant. At least it has aired some of the salient points. I don't expect to come out of this with any benefit personally. If anything, I may be further demonised and cancelled. It confirms for me that, contrary to its own blurb, *Psychotherapy and Politics International* doesn't really welcome views from across the political spectrum! Rather than any rapprochement between Keith and me, I think the gulf has deepened. Rather than two representatives of empathic therapeutic values, we have been like two schoolboys fighting in the playground. The inauguration of Trump occurred while we were doing this, which also deepens rancour, heightens mistrust, and prolongs the cold war between left and right.

At my lowest moments, I can start to think I am a terrible person. However, I remind myself that 'the poor will always be with you' (Jesus). I think of Freud's famous downbeat lines about psychoanalysis moving patients from hysterical misery to common unhappiness. Let's recall the Dalai Lama's statement in Sweden in 2018 that Europe should welcome refugees, but they should return to their countries of origin when it is safe to do so, because Europe belongs to Europeans. If I am a bad person, perhaps so are they! I think of all the clever, knock-out things I could have said, but at the same time I sigh at our shared human folly. We are about 10,000 miles apart geographically and perhaps a similar distance ideologically. *C'est la vie*. Words from the 1964 song (by Benjamin et al.), popularised by Nina Simone pop into my mind:

I'm just a soul whose intentions are good

Oh Lord, please don't let me be misunderstood.

**Keith:** For myself, I am left frustrated, angry, disappointed; also feeling the unpleasantness to which Colin refers; and sad. I have not enjoyed this and have only hung in with it because of my positionality as an ally, informed by identity politics (see Big Flame, 2025; Farrar & McDonald, 2025), and because of the support of some good colleagues and friends, one of whom wrote that my original response was 'proportionate, fair... [and expressed] in... a detailed, reasoned, structured, forceful and convincing way', an assessment that supported me during the week it took to write this article—and, as Colin acknowledges, the week in which the 57<sup>th</sup> president of the United States of America has been inaugurated.

Clearly, Colin and I have been fighting (which I don't mind), though my image is less of the playground but more of two old (or elderly) men locking horns, and also fighting about who started the fight. I think this is not insignificant as the intellectual

fighting in which we've engaged is representative of the disagreements we and others have at the political level with regard to culture, identity, nationality, migration, invasion/war, the climate crisis, and so on; the debates and disputes about the status of the experience, knowledge, and facts on which we draw; and the language we use in talking with—or past—each other, and in having such fights or arguments. I make little apology for my attention to language and rhetoric as, like sticks and stones, I think that words can not only hurt people, but also lead to broken bones and worse.

I genuinely hoped that we might get somewhere in terms of accepting and/or understanding something about each other's arguments, but it appears from the exchange that there was too much in the way; too little of addressing each other's points or questions—maybe because they felt like points or (closed) questions; and too many misinterpretations. Of course, I think that Colin did more of this, and, no doubt, he thinks that about me. In any case, I think this was epitomised in the shift in tone from what we hope would be dialogue to what quickly became an exchange. Reflecting on this, I am reminded of stories one hears from peace talks of breakthroughs coming as a result of the protagonists sharing details about their respective families, including showing pictures of children and grandchildren—significantly, the next generation. Perhaps we should have done this—and perhaps one lesson I (and maybe others) can learn from this exchange, is that simply reaching out with good intentions isn't good enough or sufficient, and that what's necessary is that any and all participants in such an encounter need to set clear ground rules—or, in terms of Berne's (1966) definition of a contract, to make 'an explicit bilateral commitment to a well-defined course of action' (p. 362)—before embarking on this kind of engagement. That might just be the way forward.

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## PEER-REVIEWED ARTICLE

### Understanding the impacts of racial microaggressions on British Asians

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#### ABSTRACT

Using a phenomenological approach this research explored racial microaggression experiences of British Asians. Eight participants were interviewed using semi-structured interviews. By employing the interpretative phenomenological approach (IPA), three superordinate themes were identified. This article focuses on the superordinate theme of ‘impact of racial microaggressions’ which encompasses four subthemes. Racial microaggressions were found to impact participants emotionally, personally, professionally, and socially.

**KEYWORDS:** racial microaggressions; covert racism; British Asians; identity; impact

There is a debate that an illusion of a ‘post-racial’ society within liberal democracies such as the UK exists, which is perpetuated by the portrayal of ethnic minority individuals in positions of power (Patel & Connelly, 2019). However, racism has not been eradicated, rather contemporary covert racism based on culture may be rising which aides this illusion (Patel & Connelly, 2019). ‘Racial microaggressions’ which fall under the contemporary racism umbrella have garnered significant attention within American literature. Meanwhile, in the UK contemporary racism literature is developing (e.g., Estacio & Saidy-Khan, 2014; West, 2019), and research on racial microaggressions specifically seems limited.

The term ‘racial microaggressions’ was originally defined as ‘subtle, stunning, often automatic, and non-verbal exchanges which are “put downs”’ (Pierce et al., 1978, p. 66). The term was later re-established by Sue et al. (2007) to mean ‘brief and commonplace daily verbal, behavioral, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults’ (p. 271). Such

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exchanges encase demeaning racial messages which are transferred verbally, behaviourally, and environmentally by generally well-intentioned individuals. Sue et al. (2007) proposed a taxonomy of microaggressions which includes three distinct types of microaggressions: microassaults, microinsults, and microinvalidations.

According to the 2011 census data, the total population of England and Wales was 56.1 million of which 4.2 million people (7.5%) were from Asian ethnic groups. Asians were identified as the largest ethnic minority group within the regions (UK Government, 2018). As they make up a significant portion of the population it is important to understand their experiences within the UK context. However, academic literature on the British Asian experiences of racial microaggressions is scarce. Grey literature indicates that racial microaggressions are an experiential reality for British Asians which can negatively impact them in various ways. Therefore, this study aims to expand the current literature base by exploring the British Asian experiences of racial microaggressions in the contemporary UK context.

This study employs a critical race theory framework as it is claimed to be a driving force in highlighting the implicit racist norms/practices which are engrained in Western democracies (Flemmen & Savage, 2017). Furthermore, it moves beyond overt racism, acknowledges the damage contemporary racism can inflict, and recognises the importance of challenging such benign manifestations of racism (Yosso et al., 2009).

## THE BRITISH CONTEXT

The daily lives of Asians in Britain changed around the early 1960s as anti-immigration campaigns, discrimination in housing and employment, and racial abuse became increasingly significant (Brah, 2006). Despite being 'cultural hybrids' who had managed to create a fusion of their Eastern and Western identity markers, British Asians were seen as victims of a 'culture clash' (Amin, 2003; Dey et al., 2017). This created a narrative where British and Asian identities were polarised and categorised as progressive and regressive (Ratna, 2014). British Asians' identities are still perceived as static, homogenous, and are considered backward and strange due to their Asian culture (Burdsey, 2007).

Asians were labelled 'model minorities' by opinion-makers in the 1960s who linked racial biology to cultural markers of identity and implied that certain aspects were inherent. Asians were perceived to be hardworking, non-threatening, and apolitical compared to African Caribbeans, who were stereotyped as lazy, criminals, and anarchists (Ratna, 2014). Such racial triangulation was said to be used to exert control over both groups as this warned Asians to remain subdued or else they would compromise their social and economic status and mobility opportunities like African Caribbeans, and it indicated to African Caribbeans that their inferiority was due to their deficiencies. This allowed those in power to have plausible

deniability about the existence of racism and promoted the idea of a colour-blind nation (Ratna, 2014).

It is important to note that everything mentioned thus far is related to South Asians. An analysis of the literature revealed that there has been a lack of acknowledgement of East Asians. Aspinall (2003) found that in the 2001 census, East Asians were not even classified under the 'Asian/Asian British' category; rather, they were classified as 'Chinese or other ethnic group'. A few studies mentioned East Asians, but even they tended to specifically focus on the British Chinese population (e.g., Yeh, 2014). This is concerning as perhaps a significant sector of the Asian community who may identify as 'British Asians' is being overlooked. Yeh (2014) suggests that perhaps the perception that British Chinese are model minorities gives the illusion that they are protected from racism, explaining their exclusion from such conversations. This explanation could apply to other East Asians too.

## **BRITISH ASIANS AND RACIAL MICROAGGRESSIONS**

The power of racial microaggressions rests within their invisibility. These exchanges can sometimes be more detrimental to recipients than overt racism as their elusiveness can distress recipients and harvest psychological dilemmas leading them to question their occurrence (Sue et al., 2007). A single racial microaggression encounter can lead to short-term distress but the accumulated impact of racial microaggressions can be detrimental (Nadal et al., 2014). Racial microaggressions are important to examine considering that they are a daily reality for minority individuals, and hence the psychological toll on them could be substantial.

Per the authors' knowledge, only one study has specifically focused on the British Asian experience of racial microaggressions. Burdsey (2011) interviewed 12 British Asian cricketers and found that racial microaggressions were an experiential reality for them as they commonly experienced microassaults and microinsults. However, Burdsey did not focus on the impact of racial microaggressions, as often participants would dismiss the effects. Their dismissal was attributed to denial and/or uncertainty that racial microaggressions had occurred and to fear regarding the consequences of reporting them. This demonstrates that racial microaggressions have deep psychological impacts on British Asians as the colour-blind rhetoric is so entrenched that they deny their racial realities.

Burdsey (2011) employs the critical race theory counter-narrative tenant to highlight the voices of British Asians. However, his findings are limited as his sample mainly contained Muslims of Pakistani descent and the study is grounded within the context of first-class cricket. To better understand British Asian experiences, it is important to have a more representative sample and examine racial microaggressions in various contexts.

There have been academic studies which do not directly mention racial microaggressions but seem to investigate concepts which reflect themes present in Sue et al.'s (2007) racial microaggressions taxonomy. For instance, Wong (2015) interviewed British Chinese and Indian students to see the impacts the 'model minority' stereotype and expectations of academic success had on them. Findings revealed that these high expectations can cause students discomfort, insecurity, and anxiety. Not meeting expectations could also impact the support received by teachers and one's social identity as it is linked to this stereotype.

There is a wealth of grey literature which illuminates the impacts of racial microaggressions on British Asians. For example, Sohal (2015) explains how racial microaggressions provoke identity struggles as being English yet not White was a basis for them: 'Microaggressions still hurt like racism and they still make you feel as though you don't truly belong'. Similarly, Tranfield (2020) shares experiences of racial microaggressions where inter-ethnic differences amongst South Asian groups were dismissed and pathologising and mocking of her culture were masked as 'banter' and subtle comments. She explained that these microaggressions led her and her Asian friends to be ashamed and insecure about their culture. Moreover, she explains that this cycle of prejudice carried on as when racial microaggressions were confronted by them, their feelings were invalidated and they would be labelled as 'overly sensitive', which prevented future confrontations.

Although they are not academic research pieces these individual accounts are valuable. Critical race theory places value on the experiential realities of minorities regardless of the form it is presented in (Yosso et al., 2009). Therefore, these findings should not be dismissed as they are the means through which British Asians have conveyed their stories.

## **IMPACT OF RACIAL MICROAGGRESSIONS**

When racial microaggression literature is explored beyond the British Asian demographic a variety of literature is found on the impacts of racial microaggressions. Studies conducted on various minority groups have found that microaggressions can have various negative implications for recipients. For example, they can make individuals feel powerless, invisible, angry, and belittled (Sue et al., 2008; Sue et al., 2009).

Additionally, a recent literature review of 138 articles published on racial microaggressions between 2007 and 2020 found various harmful psychological and physiological effects of racial microaggressions (Spanierman et al., 2021). This included general psychological distress, stress, anxiety, headaches, stomach aches, and other somatic symptoms. Racial microaggressions have also been linked to other externalised behaviours such as substance misuse. However, a meta-analysis and narrative review conducted by Lui and Quezada (2019) found that microaggressions are more strongly associated with internalising problems like anxiety and depression than externalising problems or physical symptoms.

Considerable literature also discusses the relationship between racial microaggressions and racial trauma (Comas-Díaz, 2016). Race-based traumatic stress is said to differ from post-traumatic stress—the stressors are said to be persistent, subtle, and ambiguous, such as microaggressions. Although, the two share similarities they should be considered separately as they can produce different symptoms (Miller, 2009).

Racial trauma and microaggressions are considered acculturative iterations designed to reinforce racial positionality and the expectations from recipients which cater to the needs, status, and emotions of White people. It seems that acculturation also acts as a coping mechanism (Liu et al., 2019).

The existing literature highlights the importance of studying racial microaggressions, however, it fails to provide an in-depth account of individuals' experiential realities. Considering the implications of racial microaggressions, the main aim of the research was to examine how British Asians make sense of their experiences.

## **METHOD**

### *Sample and data collection*

Eight participants were recruited through various social media platforms, using volunteer and snowball sampling.

The researchers asked participants pre-screening questions and ensured that those recruited for the study held the belief that racial discrimination exists in the UK, as this guaranteed that the phenomenon of interest was present during interviews. Participants were not excluded from the study based on their gender as their intersectional identities may influence their individual experiences of racial microaggressions, and hence this is essential to the research topic. Only participants who were consenting adults were recruited for the study.

Moreover, the label of British Asian was not assigned to a specific community. Therefore, participants were not excluded from the study based on their ethnicity. Additionally, the sample included participants who were born in the UK and those who had lived here for at least five years or longer. It was thought that perhaps those who had lived here for five years or more would have fully engaged within the UK context and would have a better understanding of it compared to someone who had lived here for a shorter amount of time.

The demographic information of participants has been summarised in Table 1 using pseudonyms.

**Table 1. Demographic Information of Participants**

Pseudonym	Gender	Age range	Ethnicity	Length of stay in the UK
Divya	Female	25–29	Indian	Born and raised in UK
Neil	Male	18–24	Chinese	9 years
Lucky	Male	30–34	Indian	Born and raised in UK
Salman	Male	50–54	Bangladeshi	Born and raised in UK
Kat	Female	35–39	Indian	Born and raised in UK
Ahmad	Male	50–54	Pakistani	Over 40 years
Josephine	Female	45–49	Filipino	9 years
Jamal	Male	40–44	Indian	Born and raised in UK

### *Procedure*

Once participants expressed their interest in the study, they were sent a participant information sheet, and informed consent was gained before participation. Data were collected through face-to-face semi-structured interviews using a refined interview schedule. Interviews lasted for 45–90 minutes.

Interview questions included: In what indirect ways do people treat you differently based on your race? How did these impact you? Could you describe an incident in which you felt uncomfortable or insulted as the exchange had racial undertones? What were your reactions and how did you manage the situation? Can you describe any instances in which you felt snubbed because of your cultural values or racial heritage?

### *Data analysis*

Interpretive phenomenological analysis (IPA) was employed following the steps laid out by Smith and Osborn (2003). These were loosely followed and modified as IPA encourages flexibility and creative thinking (Pietkiewicz & Smith, 2012).

- Step 1. Each interview was transcribed.
- Step 2. Each transcript was reviewed and annotated with exploratory comments.
- Step 3. Exploratory comments were converted into emergent themes.
- Step 4. Themes were clustered together based on conceptual similarities.
- Step 5. Each theme was given a descriptive label and placed within a table.
- Step 6. Theme tables were created for each transcript.
- Step 7. Theme tables were compared to identify master themes.

Step 8. Themes were consolidated into a master table.

Step 9. Three superordinate themes were identified each comprising of three to four subthemes.

Step 10. The main themes were written as an unfolding narrative.

### *Reflexivity*

Throughout all stages of the research, it was important for the researcher to adopt a reflexive researcher position. The researcher is a British Asian female who has experienced several racial microaggressions. Due to this, it is possible that she could have been considered an 'insider' to participants. This may have been beneficial as it amplified empathy and understanding and may have allowed participants to talk more openly. However, it may also have been problematic as the 'seduction of sameness' could have led to presumptions of shared meanings which could have led to less probing questions being asked that allow richer data to be gathered (Hurd & McIntyre, 1996). To minimise influence on the data the researcher maintained critical reflexivity throughout the study. While it was not thought to be plausible for her to completely bracket out her preconceptions, the researcher did acknowledge how her biases may influence the data collection and analysis. This was done by maintaining a reflective journal, making reflexive notes while analysing transcripts, and reverting to original transcripts during the analysis and write-up.

## **FINDINGS**

The themes explored in this article illuminate the unique experiences and impact of racial microaggressions for British Asians.

The narratives demonstrate the complexity of lived experiences of microaggressions where experiences can be negative and/or positive. It shows that individuals' sense-making processes are important in understanding the impact of exchanges, where seemingly harmless interactions can have long-term effects on one's wellbeing.

Participants described instances of direct, indirect, and environmental racial microaggressions, which tended to come from a variety of sources and within different contexts. For instance, one of the participants Kat reported encountering extreme stereotypes generalising British Asians and targeting their hygiene and physicality:

*Yeah... Stingy, dirty, smelly... erm... well... eh it's weird you say that because... Well so those... are erm I guess... the most aggressive... the most racist kind of thoughts I've had... from people that are like 'oh, you know all brown people smell of curry'. (Kat).*

While Neil described encountering direct mockery of his Chinese background during his time at school:

*There were couple of like erm people they just say 'hi' in the hallway... and before I finish the hi sentence like even the one vowel syllable they just go 'ching chong ching chong ching' [chuckles] it just is... is so frustrating to talk to you know. (Neil).*

Most commonly these experiences held an undertone of an unwelcoming environment in which participants were excluded and made to feel like outsiders. Racial microaggressions where participants were treated unequally also commonly manifested in various forms. It was observed that direct racial microaggressions seemed to be mostly levied by strangers. Salman spoke about inequality related to housing where preferential treatment was given to those with Western-sounding names. The discrimination seemed prevalent as he described people having to adopt second names:

*Yes, Mohammed? No chance. But if it's Mike. So, many of my friends have two names. (Salman).*

Participants also described frequently encountering stereotypes, especially those regarding their intelligence and abilities. For instance, while at school baseless assumptions about Neil's mathematical abilities were commonly made which made people rely on him:

*Yeah, such as, 'you must get A's in maths' [laughs] and 'you must be good at maths' and something like that, but I hate maths. I don't really like it. It's just what people think and then... people always come up to me at school er... 'eh can I do this? Can I do this?' (Neil).*

Similarly, Josephine reported that without even asking her statements assuming her occupation are made:

*We're being identified when you say, 'oh I'm from the Philippines' they conclude 'oh so you're a nurse'... without asking what I do... or they conclude that erm cause either you're a domestic... erm carer or cleaner or you're a nurse, they always conclude that... (Josephine).*

Participants also described racial microaggressions where inter-ethnic differences were dismissed. In these experiences, there were subtle implications and assumptions of homogeneity regarding British Asian groups. For instance, Divya's school teacher was unable to differentiate between her and her other South Asian friends:

*So, we all used to be in psychology together and every week we used to go around and reading you know we used to read a paragraph from this book... then when it came to us our teacher [chuckles] couldn't... she couldn't remember which one of us read last. Cause she was like 'which one of you' [laughs] 'which one of you girls?' cause we all looked the same... [laughs] so she was like 'ooo which one, whoever read last' we were like 'yeah yeah it's Neha's turn' because we didn't want to read but she couldn't tell the difference. (Divya).*

Participants also spoke to various types of environmental racial microaggressions which tended to perpetuate stereotypes, create hostile political/social environments, and produce personal and/or professional challenges.

Ahmad discussed the role of television in normalising racism previously as the content had no boundaries:

*I remember as a child watching TV and erm looking at some of these comedians and they were... blatantly racist ... I think Berding... Berding Manning or someone like I can't remember his name anyway comes to mind you know, it was very, very racist, outwardly racist about... he used to use the P word, he used to use... you know every kind of thing you could think of he used to use erm... and... it was normalised... but it's putting people down again and again, it's putting Asians down all the time. (Ahmad).*

The impact of these microaggressions on participants seemed to vary depending on the situation; hence, this superordinate theme consolidates and generalises the effects of experiences described across interviews.

### *Emotional experience*

Across the interviews, participants described experiencing a variety of emotions during racial microaggression incidences and after them. They spoke about emotions such as anger, hurt, frustration, shock, discomfort, and confusion. Emotions were not one-dimensional for all participants and some even described the range of emotions an incident could provoke. For instance, Jamal's reflections on his experiences reveal the emotional toll repeated microaggressions have had on him:

*I would say all them incidences that I spoke about really. I feel... you feel insulted every time, that's part of the feeling. There's kind of a ingredient, sorry, mixture of feelings... erm so each and every time I feel insulted because... I, I like to think I am not in anyway prejudice, probably got some prejudices maybe you know... maybe I have. I certainly try not to have... and I would like to think everybody's kind of on the same page a bit. (Jamal).*

Jamal uses tentative language which suggests an internal conflict where he is struggling with his own values and societal realities. He appears to value equality and makes a conscious effort to remain unbiased. Therefore, when he experiences microaggressions, the feelings of being insulted may be amplified as they clash with his ideals. There appears to be a desire to externalise his feelings as when he is describing them, he shifts from saying 'I' to 'you' as if he is talking about someone else. His pauses and difficulties in articulating himself here may reflect the difficulties he faces when navigating these experiences and their emotional impact.

Emotional experiences also can last beyond the duration of racial microaggression incidences. Kat's reflections suggest that thoughts of her experiences intrude into her mind repetitively, despite her attempts to forget them which increases her emotional distress:

*I'll just think about it again and again and there are times where I'm like I try not to think about it, and I can't help it. It just sits there and I... go over what happened, what I could have done, what I could have said erm... if I did anything wrong that could have diffused the situation... erm... I usually come up with a—actually they were in the wrong. (Kat).*



The unresolved feelings linger and demand attention from Kat. When she does engage with them it is in an analytical manner where she is dissecting the details of the situation indicating her struggle to make sense of her experience and her reactions. Rather than approaching this in a reflective manner which allows her to emotionally process the situation she looks for what she did 'wrong' which could induce feelings of self-doubt and blame for escalating the situation with her responses. She can bat those feelings away suggesting that microaggressions create a complex emotional experience where the recipient is dealing with various internal conflicts.

Like Kat, Divya struggles to navigate these experiences. The subtleness of the experience creates an emotional burden for her creating confusion. She oscillates between 'annoyed' and 'angry' and struggles to articulate her emotions demonstrating her challenge which has left her with unresolved feelings of injustice:

*We didn't say anything you know we didn't say anything or we... We didn't confront it. We were just... I guess annoyed and angry or... Not, not even angry but just... it's unfair... erm not having an understanding of what, what actually happened... (Divya).*

This subtheme demonstrates the complex emotional experiences of participants concerning racial microaggressions.

### *Impact on identity, personality, and self-image*

Across all interviews, participants discussed the impacts racial microaggressions had on their identity, personality, and self-image.

Divya reveals her identity struggles in her youth where her actions of avoiding parts of her culture were driven by her desire to 'fit in'. These aspects of her identity are perceived to go against social norms of her environment and are rejected to avoid being ostracised:

*I think before I never used to watch them [Bollywood movies] because I was a bit... embarrassed... when you are younger you want to feel like you fit in? ...and you want to do all the right things like everyone else like... and the... you are like 'oh but I still want to watch it' like you know I still want to be who I am... So, you watch a little bit of it, and then you hear those sort of things. But now it's come to a stage where you know you put yourself first. I don't know as you get older, erm, you do you. (Divya).*

In the extract above, Divya talks about her struggles with Bollywood movies, which are further complicated by her desire to enjoy these aspects of her culture. Divya speaks about wanting to do what is 'right', implying that embracing her culture would be taboo and going against perceived social norms. By enjoying these aspects of her culture privately she is highlighting their duality where externally these activities are wrong but internally they align with her. Divya's attribution of her experience to the vulnerability of her young age indicates that the impact of microaggressions on identity may be affected by maturity and level of confidence.

Salman attempts to create a harmonised identity by combining British and Asian values, but continues feeling 'stateless' due to skin colour; this indicates that microaggressions impact his sense of belonging. His conviction that 'nothing else' but his skin prevents him from fully feeling British implies that microaggressions have created a perception that being White equals being British:

*I feel stateless... I feel stateless. I don't feel a hundred percent British and I don't think I ever will, because of my colour, nothing else. I feel British in terms of my values, my values are very British. However, I have taken on some values which are the Asian values. (Salman).*

These experiences were also said to impact participants' personalities. Neil recounts his ways of coping with microaggressions, which appear to have developed into prominent features of his identity. His use of headphones signifies a desire to withdraw, leading to self-imposed isolation as protection. His whispering and laughter during these descriptions convey a sense of discomfort and vulnerability:

*Became very... I've become... very... in-introverted [laughs]. Don't want to talk to anyone just keeping to myself and just [whispers] put my headphones on [laughs]. (Neil).*

Jamal's reflections and analogy of being 'in a box' shows that microaggressions have limiting effects, which impacts his sense of self and behaviour. He describes feeling pressured to conform, highlighting how powerful these experiences are for him, where despite his attempt to resist, stereotypes can become internalised and enacted to play out a self-fulfilling prophecy:

*Erm, it makes me feel like I'm sort of judged, makes me feel like I'm in a box. It actually makes me feel to behave as that person in that box a little bit. (Jamal).*

This subtheme has demonstrated that due to racial microaggressions participants tended to experience identity conflicts. The degree to which this conflict impacted an individual varied from participant to participant.

### *Impact on professional and personal life*

Participants reported that racial microaggressions impacted their internal perceptions of their environment and their interactions externally.

Lucky described hostile interactions with his manager and being overlooked for a promotion over a White colleague. Lucky explained that although race was not directly mentioned there was a felt-sense that these actions were racially charged. He expresses the emotional toll these experiences had on him, creating internal defeat which led to loss of motivation and withdrawal:

*Erm... it, it, it knocked my morale off, like I didn't have much motivation to do the job anymore... Erm... But I, I still continued work obviously, but in a just, just coming into work it didn't really feel like 'if I am not going to progress then there is no real point staying here'. (Lucky).*

Lucky's narrative highlights the conflict between his sense of duty and desire to disengage; his use of the word 'obviously' implies an obligation to keep working due to need rather than motivation. His hesitations and repetitions here convey his challenge in processing these experiences, highlighting their distressing effects.

Similarly, Divya explained how indirect racial microaggressions from her colleagues created a hostile work environment and made her avoid work:

*Maybe, like, I didn't want to be surrounded by her, I didn't want to come into work cause I am... they're just negative people really. (Divya).*

Divya's use of 'maybe' and hesitation demonstrates the challenge in articulating her emotional experience and justifying her actions. Regardless, Divya concretely labels her colleagues as 'just negative people' implying that she views their behaviours as fixed and that any effort to change or challenge them would be pointless. This could reinforce her sense of hopelessness and desire to avoid work. Divya's narrative demonstrates how microaggressions can influence her perspective on people around her and can shape her interactions.

For Neil avoiding other Asians was his response to racial microaggressions:

*I want to I want to be immersed with... er in the Western culture more so I can fit in more... then I can, so I can get rid of any aggressions... that they might have towards me. (Neil).*

Neil's desire to assimilate into Western culture is driven by his belief that hostility towards him would be mitigated if he was seen as less different. The repetition of 'I want' reflects Neil's immense drive to 'fit in', reflecting the deep internalisation of the belief that racial microaggressions occur due to how others perceive him. Neil appears to place responsibility onto himself, unlike Divya who has attributed her experiences to the fixed negativity of others.

Similarly for Ahmad, racial microaggressions strained his friendships as he felt unable to share his experiences:

*Ah as I keep saying it's more damaging because... you don't know how to cope with that, you don't really know... what do you do with that? You can't really talk to anyone about it because as I said even my friends didn't understand when people, my friends, were White, they didn't understand that at all. (Ahmad).*

An isolating environment is created for Ahmad as he perceives there to be no outlet to process these experiences, making coping with racial microaggressions even more challenging. He states that his friend 'didn't understand' and this implies that he made an effort to convey his struggles but felt unsupported or unheard. His distress is further underscored by his inability to process or cope with these situations alone due to there being no social protocol laid out. This highlights that the ambiguous nature of these experiences can cause internal confusion and strain relationships.

### *Learning opportunity and self-development*

For several participants, racial microaggressions provided an opportunity for self-development and learning. For example, Salman explained how he has come to accept microaggressions:

*Positively... Yeah, they made me stronger, they made, made me realise that you can't be everyone's best friend, they made, made me realise that... you can't make everybody like you. I've tried to overcompensate... by being Asian and an ex-Muslim... to... do things for people that I think might be racist... to make them, to basically say to them 'hey listen... I know you probably have these... deep-rooted... prejudices... But we are not all like that, I've, I've tried to do that... and in the past year or two I've... I've come to... the conclusion that... you know what I should stop doing this... If they're going to be racist, let them be racist... you're not a one man... global... You know, movement to eradicate racism or discrimination. (Salman).*

Salman's use of 'overcompensate' signifies that he used to believe that he needed to work harder to be liked or accepted, indicating an internalised sense of responsibility to challenge negative stereotypes regarding Asians. Recently, he has started to shift his view and has become more acceptant that these prejudices exist. His shift is evident in the statement 'if they are going to be racist, let them be racist'—it shows that he is acknowledging his limits and freeing himself of the burden of being the 'movement to eradicate racism'. His perspective shift reflects his understanding that prejudice is deeply rooted in society and that global systemic changes are needed.

Divya believed that her experiences shaped her as a person and helped her embrace her identity proudly:

*I, I think they've built up on who I am. It's, it's become a part of me that it's made me feel more like, I think, over the years you become... I don't know, you're, you're proud of who you are. (Divya).*

*It has actually made me want to learn more about my culture. (Divya).*

Divya's reflections on her journey demonstrate how microaggressions have influenced her identity, indicating a sense of growth and acceptance over time. Divya's initial discomfort and identity confusion due to these experiences shifted into genuine curiosity about her culture and an embrace of her identity. This shift shows us that the impact of racial microaggressions is not static and can evolve throughout a person's lifetime. Divya converts her challenges into opportunities for self-discovery; this demonstrates the role of microaggressions in the dynamic process of identity formation which is influenced by personal growth, individual experiences, and age.

For Jamal, these experiences have developed his mindset, made him more aware of his biases, and allowed him to challenge them:

*The positive of it is that it has challenged me, challenged my mindset to kind of... ensured me to not be prejudice and not be erm... yeah... be racist or have unconscious biases and try and challenge some of them. (Jamal).*

Jamal's description, especially his use of the word 'challenged' multiple times, reflects that he is on an active journey of self-reflection where he is trying to achieve personal growth and enhanced self-awareness. His experiences of microaggressions have been thought-provoking and they have held up a mirror, leading him to consider his thinking and behaviours. This highlights the profound impact of these experiences, which can be eye-opening for individuals. His reflections indicate that these experiences have allowed him to engage deeper with his identity and biases.

## DISCUSSION

Using a critical race theory framework, this study aimed to highlight the voices of British Asians. Their experiential knowledge was considered legitimate and important to understanding racism (Carrasco, 1996). The findings of the current study demonstrate that racial microaggressions are an experiential reality for British Asians. Participants in the study spoke about the short-term and long-term impacts of racial microaggressions which could be negative and/or even constructive sometimes. As found in previous studies (e.g., Sue et al., 2008; Sue et al., 2009), participants reported feeling emotional distress due to racial microaggressions. In discussing the emotional impacts of microaggressions, participants would frequently act avoidantly, hesitantly, or try to minimise them—indicating that acknowledging and expressing emotions was perhaps challenging and uncomfortable.

Participants reported that racial microaggressions provoked negative emotions, impacted their identity and relationships, and some participant descriptions of impacts of racial microaggressions seemed indicative of racial trauma symptoms (Carter et al., 2013), such as intrusive memories, avoidance, hypervigilance, low mood, anger, and low self-esteem. It was also found that the severity of impact depended on individuals' subjective experiences of microaggressions (Comas-Díaz, 2016).

The current study identified racial microaggressions to have a significant impact on the identities and personalities of British Asians. Participants stated that racial microaggressions caused identity conflicts, reluctance to embrace their cultural identities, diminished their confidence, provoked feelings of not belonging, and led some to alter their personalities. However, for some participants, racial microaggressions helped them develop their cultural pride, emotional intelligence, and self-awareness. Interestingly, those who described racial microaggressions as aiding their self-development reported this as more of a general impact of their experiences. So, in essence, each racial microaggression experience may have had negative effects on them, but the overall impact was constructive. However, this was not the

case for all participants; it is unclear if this is due to individual differences. Nevertheless, it seemed that participants who reported self-development were eager to take control and turn negative situations into positives. This demonstrates that the impact of single microaggressions and the collective impact may vary depending on the individual.

British Asians have been dubbed as 'cultural hybrids' (Amin, 2003) by some scholars and victims of a 'cultural clash' by others (Brah, 2006). Curiously, both the identity descriptions mentioned above were found in this study. Some participants even reported experiencing both identity confusion and harmony over their lifetime. Their identity development was often spoken about in relevance to age, where some described feeling uncomfortable with their cultural identity growing up in a Western country but as they matured, they had learnt to embrace it. However, this was not the case for all participants, where some, even in their adult lives, reported having problems with their cultural identity which they attributed to racial microaggressions.

These unique insights seem to highlight the complexities of identity within a bicultural context and that the impact of racial microaggressions is not the same for even a homogenous group. This variation could be due to individual differences, such as differences in home environments, residential areas, and/or the schools individuals experienced growing up. For example, perhaps someone who grew up in a more traditional Asian home and went to a majority White school may find it harder to find that bicultural balance as they may have experienced more racial microaggressions at school compared to someone who went to a school where there were other Asian children around. Nevertheless, the findings seem to correspond to past literature on British Asian identity to a certain extent (e.g., Brah, 2006). However, it is important to note that in this study identity was discussed in relation to racial microaggressions and seems to highlight the underlying mechanism which could contribute to the development of the British Asian identity (i.e., racial microaggressions).

The current study also found racial microaggressions to have impacts on the professional and personal lives of participants. For some participants there seemed to be a knock-on effect where racial microaggressions would lead to negative thoughts, emotions, and impact their behaviours. These behaviours for some may be avoiding their friends or colleagues, wanting to escape their environment, and/or challenging microaggressions. For some participants, retaliation manifested as a means to negate the assumptions of the racial microaggression levied against them. Intriguingly, there was only one participant who reported that sometimes racial microaggressions made him want to act according to the assumptions made. This seems to resonate with the 'self-fulfilling prophecy' (Merton, 1948), where a fatalistic approach is almost taken—where the person believes that people will assume things about them anyway so they might as well behave accordingly. Behaviour varied though from situation to situation for all participants. This chain reaction of thoughts, feelings, and behaviours seems to foreshadow cognitive behavioural theory's claims of the three being

interlinked (Wills, 2015). This perhaps could explain why, for some participants, impacts of racial microaggressions persist.

Furthermore, racial microaggressions also had external impacts, including halting participants' career progression, normalising racism, and interfering with friendships. This demonstrates that the impacts of racial microaggressions are not just limited to the internal experiences of British Asians but, rather, they widely impact their lives too. For example, one participant explained how being constantly ignored and shut down at work made those at lower levels think that White members of staff held more power and value than Asian members. Therefore, it seems that racial microaggressions are not only sending messages to British Asians but to others too about who has power. It seems that in some unconscious way the racial hierarchy stays intact, while giving people the illusion that meritocracy and equality exist. From a critical race theory standpoint, this seems to echo interest convergence—where White individuals support racial justice and equality if it serves them in some way (Yosso et al., 2009). Participants who described instances such as the one mentioned here may have sensed these false narratives of equality, but their uncertainty makes it seem that they did not feel empowered to label them in such a way or acknowledge how they maintained the status quo.

The current study has wider societal implications where findings could be used to inform sensitive content development for various media platforms and raise awareness for the public regarding their behaviours which could seem offensive. These findings could also be used by educational and/or corporate organisations to aid the development of effective racial sensitivity training programmes and help create dialogues within these organisations about racial microaggressions. If such organisations are aware of the complexities of ambiguous racial microaggressions they could perhaps create better infrastructure for reporting and handling them where recipients feel safe and validated. The results could also be used to inform recruitment and promotion processes where if these organisations acknowledge these environmental microaggressions perhaps initiatives can be created to prevent them.

These findings could also be used to help support dialogue and narratives about existing racism against British Asians. Perhaps by disseminating these findings on social media or other media platforms, a realistic reflection of British Asian experiences of covert discrimination can be seen by social scientists and the public. Launching these findings into the social media realm can also perhaps help create a social media campaign which gives voices to other British Asians who have experienced racial microaggressions. It can also empower others to challenge racial microaggressions and give them the language to name these ambiguous experiences they could not call out before.

The study may also be useful to mental health practitioners as it attempts to exhibit the racial realities of British Asians and get their voices heard. This is thought to potentially help develop practitioners' cultural competencies and aid them in working effectively with British

Asians. Comas-Díaz (2016) argues that acknowledging a client's exposure to historical discrimination and racial microaggressions is important, and ignoring these aspects may lead to the underdiagnosis of race-related stress and trauma. Hence, by highlighting British Asians' daily experiences and histories of discrimination this study hopes to help practitioners create a holistic understanding of the British Asian experience. This could help them enhance interventions used for this demographic and ensure that they are treated appropriately.

However, these findings should be interpreted with caution as the study sample was small and mostly consisted of South Asians with only two participants being of East Asian descent. Therefore, perhaps the findings are more representative of the South British Asian experience and the applicability of findings to all British Asians could be questionable. The British Asian identity is complex, and while common themes were found it may be more beneficial for future researchers to study South and East Asians separately. In the study, we advertised for 'British Asians' with no other specifications, and this led to the sample being mostly South Asians who self-identified as 'British Asians'. Therefore, perhaps future researchers should try different sampling methods to recruit East Asians and gain a more representative sample.

Additionally, all participants were recruited from London, which is considered significantly more multicultural than other parts of the UK. Hence, experiences of British Asians living in other parts of the UK may vary considerably. Another potential limitation could be that the sample included participants who were born and raised in the UK and those who had migrated here. The length of stay of participants may be a crucial factor in determining their racial microaggression experiences because those born in the UK may have had more time to adopt coping strategies to deal with microaggressions. Perhaps future researchers may want to compare the experiences of those who have been born in the UK and those who have migrated here. The two groups may not be completely homogenous and disparities in experiences may be useful to identify.

The study also employed semi-structured interviews which could be vulnerable to demand characteristics and desirability biases. Furthermore, the findings relied on the retrospective recollection of participants' subjective experiences, and therefore their description of events may not be accurate representations of events. However, the study aimed to understand how participants made sense of their experiences rather than trying to gain reflection on the reality of events, and hence the retrospective approach was appropriate.

To expand the UK-based literature on racial microaggressions future researchers may find it beneficial to apply other research methodologies and also consider the impact of recent events, including the COVID-19 pandemic and increased police brutality, on the manifestation and maintenance of racial microaggressions in the UK context.



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## PEER-REVIEWED ARTICLE

### Social justice informed psychotherapy and people living with HIV

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#### ABSTRACT

This article examines the intersectional inequalities experienced by people living with HIV (human immunodeficiency virus) (PLWH) and explores how social justice principles can be integrated into psychotherapy to address these challenges. Drawing on the concept of epistemic justice, the article emphasises the importance of recognising the individuality of each PLWH, acknowledging their unique experiences shaped by factors such as race, gender, sexuality, and socioeconomic status. The article advocates for the use of intersectionality as a tool for conceptualising clients' experiences, critically reflecting and mitigating the relational dynamics. In addition, this article recommends the use of a pluralistic approach when working with HIV-positive clients, encouraging pluralism and diversity in the therapeutic process towards changes. This article introduces a social justice framework tailored to psychotherapy with HIV-positive clients, calling for a broader reconsideration of the implicit biases present within the discipline. It aims to inspire greater effort in navigating the tension between therapists' self-interest and accommodating clients' needs.

**KEYWORDS:** people living with HIV; social justice; intersectionality; pluralism; epistemic justice; oppression; relational dynamics

#### PERSONAL POSITION

My interest in HIV-related inequalities was sparked by my experience working with people living with HIV (human immunodeficiency virus) (PLWH) in therapeutic settings. I must acknowledge that though I had direct experience engaging with the community I am writing about, my identity as a trainee counselling psychologist placed me in a position of power, and privilege. In this article, I reflect on how my social position influences power dynamics in

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therapy, and how I have sought to address these dynamics in my work with clients. The recommendations presented in this article serve as a starting point to consider how pervasive systemic forces shape our clients' experiences, and how we, as psychotherapists, can act as agents of social justice by adopting social justice informed practices. I wish to use my position to raise awareness and inspire my colleagues to take further action in challenging the systemic oppressions and intersectional inequalities experienced by PLWH.

## **INTERSECTIONAL INEQUALITIES EXPERIENCED BY PEOPLE LIVING WITH HIV**

Human immunodeficiency virus (HIV) is a virus that can progressively weaken the immune system, and critically diminish its ability to defend the body against infections (Gallo, 2002). HIV-positive diagnoses are heavily stigmatised, with a wealth of evidence demonstrating the link between stigma, treatment adherence, social support, and health outcomes (Katz et al., 2013). Socioeconomic status, social and sexual networks, socio-political context, and how the community perceive HIV all intersect with personal characteristics and shape the experience of PLWH. PLWH commonly experience feelings of helplessness, shame, guilt, isolation, anxiety related to societal perceptions of their condition, and social withdrawal (Lucas et al., 2024; Mayers et al., 2005; Tshabalala & Visser, 2011; Wen et al., 2023). A wealth of evidence has demonstrated that PLWH are oppressed and discriminated against, they are more vulnerable to acts of hostility and discrimination (Katz et al., 2013), physical and sexual abuse (Kubátová et al., 2023; UK Health Security Agency, 2024; Waldron et al., 2021) and stereotyping, labelling, and status loss within a hierarchy of power (Venable et al., 2006). Ongoing threats to safety contribute to distress and result in mental health issues such as depression, anxiety, substance abuse, and suicidal ideation while hindering the development and expression of an authentic sense of self. These external pressures create intrapsychic and interpersonal conflicts limiting HIV-positive clients' expression of individuality.

Structural inequalities, driven by HIV-related criminalisation, stigma, and discrimination, have created significant barriers for PLWH from marginalised communities to access HIV care and psychological support. Recent research in HIV care revealed how global health policies and narratives reinforce traditional gender and ethnic stereotypes in the delivery of interventions (Dovel et al., 2020; Merriman & Deane, 2023; Mindry, 2024). Merriman and Deane (2023) highlight the gender disparities in international guidelines for HIV support, noting a shortage of social, empowerment, and behavioural change interventions developed for heterosexual men. On the other hand, women accessing support from HIV services reported feeling isolated, criticised, and treated unfairly by staff and other patients (Bogart et al., 2008; Mukamana et al., 2022), due to traditional gender norms in sexual freedom and stereotypes that HIV clinics are 'geared toward gay people' (Bogart et al., 2008, p. 251). Women living with HIV reported significantly higher levels of all forms of stigma—internalised, perceived, anticipated, and structural—associated with HIV while receiving less

social support compared to males due to unequal gender norms (Colbert et al., 2010; Mukamana et al., 2022). Relying solely on the traditional definition of evidence-based practice, which suggests individuals' needs can be conceptualised and addressed by following clinical evidence and guidelines for specific groups (Thyer, 2004), fails to address the complex needs of PLWH and has become a barrier to them accessing and engaging with support.

## **SOCIAL JUSTICE, PSYCHOTHERAPY, AND PLWH**

Social justice, as defined by Fouad et al. (2006), pertains to ensuring fair and equitable distribution of opportunities and resources, and addressing inequities where they exist. It involves ensuring equality and fairness for all individuals, irrespective of characteristics or aspects of a person's identity. Resolving social injustices not only mitigates human distress and facilitates lasting changes in those who were oppressed, but also helps prevent these injustices from persisting into future generations. In the context of psychotherapy, social justice informed practice is centred on efforts to transform societal values, structures, policies, and practices to provide marginalised groups greater access to self-determination with an emphasis on the critical role of social justice within interpersonal dynamics (Goodman et al., 2004; Lewis, 2010).

Working with PLWH has been an important yet overlooked area in counselling and psychotherapy literature. Research in counselling and psychotherapy for PLWH has predominately focused on the effectiveness of specific therapeutic approaches in reducing mental health symptoms experienced by PLWH (Petersen et al., 2014; Qin et al., 2022; Tshabalala & Visser, 2011; Xiao et al., 2021; Yigit et al., 2020). Expanding on Sue's (2015) argument, psychological professions often mistakenly assume that theories and approaches developed by dominant groups apply to everyone while overlooking the cultural and political contexts of the techniques and interventions. This is particularly evident among PLWH, where historically marginalised groups—including racial and ethnic minorities, women, and gender identities beyond cisgender men and women—remain underrepresented in HIV care policies and research (Irie et al., 2023; Johnston et al., 2023; Merriman & Deane, 2023).

### ***Epistemic injustice***

I argue that the epistemic injustices faced by PLWH have not been adequately acknowledged within our discipline. The term *epistemic injustice* was first coined by the British philosopher Miranda Fricker in 1999, referring to the harm inflicted on individuals in their capacity as an epistemic subject—as knowers, reasoners, and interpreters. Epistemic injustices occur when PLWH's ability to engage in epistemic practices—such as sharing knowledge or making sense of their own experience—is undermined. Fricker (2007) suggests two forms of epistemic injustice: *testimonial injustice* and *hermeneutical injustice*. Testimonial injustice occurs when

a person's word is unfairly discounted due to their identity; for PLWH, this can include their HIV status, gender, sexuality, ethnicity, or other marginalised aspects. Historically, HIV has been linked to behaviours like promiscuity, sex work, and drug use—behaviours that have historically discredited individuals in the eyes of society. The prevailing narrative of fear and blame towards those infected with HIV reinforced negative stereotypes, leading to the diminished credibility of PLWH—a clear example of testimonial injustice. Hermeneutical injustice, on the other hand, arises when individuals are unable to make sense of their experiences due to a lack of available interpretive resources. The marginalisation and decentration of PLWH's cultural identities and social positionings in psychotherapy research are examples of hermeneutical injustice. I believe that social justice informed therapy for PLWH can help restore hermeneutical justice by offering the clients a space where they can freely voice and understand their experiences and help them to find the interpretive tools to conceptualise their experience.

### *Recognising the individuality of each person living with HIV*

Another crucial point to emphasise is that each person living with HIV has a distinct life before their diagnosis, shaped by their developmental history, acculturation process, personal losses, or trauma. The experiences of PLWH are inherently intersectional, with each person having unique relationships with their families and communities, shaped by identities such as gender, ethnicity, age, sexuality, and class. The extent to which PLWH experience stigma, oppression, and discrimination varies greatly, depending on family dynamics, cultural values, community attitudes, and the policies and support systems in place in their country at the time. For example, political decisions—whether to advance anti-discrimination and human rights protections or criminalise behaviours associated with HIV—have been shown to play a major role in addressing or exacerbating the health inequalities, discrimination, and injustices faced by PLWH (Kavanagh et al., 2021). These factors influence the specific losses, as well as intrapersonal and interpersonal conflicts PLWH may face post-diagnosis, along with the resources available to support them in navigating their lives moving forward.

In my experience of working with PLWH, *when* the client was diagnosed, linked with the socio-political environment of the time, plays a significant role in shaping the intra- and interpersonal conflicts they experience. The first effective HIV treatment was approved in 1987, and this transformed HIV from a terminal illness to a chronic condition. Before this breakthrough, a HIV diagnosis was often equated with an inevitable death sentence and social isolation—fostering feelings of existential hopelessness, powerlessness, and profound loneliness. Many clients I have worked with that lived through this pre-treatment era and lost loved ones to HIV often share common intrapsychic conflicts: survivor guilt and difficulty moving beyond the ingrained belief that they should not have survived. One narrative that I have frequently encountered is: *'Everyone, including myself, was so certain that I was going to die soon. I came to terms with that, and I lived my days as if they were my last. But I am still*



*here. I should be happy that I didn't die—but I can't.* These clients often lack a space where they can express these feelings, which contradicts the dominant societal narrative that surviving HIV should be a cause for relief and gratitude. They also lacked an available interpretive tool to understand the feelings they were experiencing—the feeling of disappointment, confusion, and how they were stuck in the idea that *'I should be dead'*. These unresolved conflicts have created ongoing challenges in their ability to fully re-engage in life.

In addition to the societal narratives surrounding HIV at the time of diagnosis, local government attitudes towards funding support services for PLWH and the legal environment in which they live play a crucial role in determining their survival and quality of life (Shepherd, 2022). In my client work, I have observed that individuals who were diagnosed with HIV more recently are less likely to experience the same level of hopelessness and helplessness that was common in earlier generations. Knowing that HIV is a manageable condition and having access to support services significantly reduces the psychological barriers to accepting a HIV-positive status. This shift is also reflected in the lower levels of social rejection and discrimination they anticipate or encounter. The global *'Undetectable = Untransmittable'* (U=U) campaign, which raises awareness that PLWH cannot transmit the virus if they maintain an undetectable viral load through adherence to treatment, has contributed to changing perceptions. However, a key factor influencing these varied experiences remains the degree of privilege or marginalisation individuals face within their identities, communities, and broader society. Therefore, I argue that incorporating an intersectional lens is essential for social justice informed practice in working with PLWH.

## **INTERSECTIONALITY**

The term *intersectionality* was first coined by American legal scholar Kimberlé Crenshaw in 1989. Crenshaw (1989) employs the concept to elucidate the overlapping and intertwined systems of discrimination, including racism and sexism, affecting Black women. She critiques the inadequacy of singular or binary frameworks in anti-racist activism, feminist theory, and anti-discrimination laws. The origins of intersectionality, however, can be traced back to the broader multifaceted Black feminist movement in the USA. Notably, the Combahee River Collective Statement is often regarded as an early articulation of intersectionality, underscoring how both the mainstream feminist movement and the Civil Rights Movement of the time failed to adequately address the specific challenges faced by Black women and Black lesbians, resulting from interconnected systems of oppression (Smith, 1983).

This concept has been applied in a variety of contexts as an analytic tool for examining how overlapping systems of power shape social dynamics within diverse societies and influence individuals' lived experiences (Hill Collins & Bilge, 2020). Intersectionality recognises the interconnection and mutual influence of the seven core intersectional identities: race

inclusive of ethnicity and culture, gender, class, sexual orientation, disability, age, and religion, along with other intersecting identities (Moodley & Lubin, 2008). In psychotherapy, intersectionality offers a framework for us to reflect on the interplay between power, marginalisation, and privilege within society, how intersecting identities shape our client's experience, and how these dynamics may influence the therapeutic relationship. Moreover, it bridges *scholarship* with *activism*, encouraging practitioners to transform research findings into actions that promote social change (Cole, 2009; Grzanka, 2020). Despite its potential, the application of intersectionality within psychology has faced critiques for being superficial and often limited to simply understanding clients' experiences (Grzanka, 2020). For example, Hook and colleagues define intersectionality in psychotherapy as to 'work collaboratively with clients to understand the unique intersection of clients' various aspects of identities' (Hook et al., 2013, p. 354). Such a definition undermines the use of intersectionality, minimises the role of the practitioner's identity in the relational dynamic, and fails to address intersectionality's core aim of exposing structural inequalities and driving systemic change.

We need to consider how multiple identities intersect with being HIV positive and compounding the injustices faced by PLWH. Research has consistently shown that HIV-related inequalities are exacerbated by intersectional inequalities, such as structural racism, gender disparities, class inequalities, and sexual orientation, each adding an additional layer of vulnerability to oppression and discrimination (Watkins-Hayes, 2014). PLWH identity as members of one or more marginalised communities, for example, people of colour or the LGBTQ+ (lesbian, gay, bisexual, transgender, queer, and other identities) community, and often encounter stigma linked not only to their HIV status but also to their cultural identities. Studies have shown that PLWH from marginalised groups report significantly higher levels of stigma and discrimination (Beer et al., 2022). For instance, a homosexual man of colour living with HIV may face not only HIV-related stigma but also racial and sexual orientation-based discrimination, with experiences distinct from those of a heterosexual woman of colour living with HIV (McConnell et al., 2018; Nydegger et al., 2021).

Another intersectional identity that needs to be considered when working with PLWH is social class. With the physical health and social challenges associated with HIV, PLWH are significantly more likely to live in poverty. While global statistics on social class among PLWH are limited, data from the UK, where I practice, highlight this issue. A national survey conducted in 2022 found that one in two PLWH struggle to afford basic needs (UK Health Security Agency, 2024). Income inequalities are particularly pronounced among PLWH from multiple marginalised communities, with over 70% of those from ethnic minority backgrounds struggling to meet basic needs, compared to less than 40% of their white British counterparts. The ongoing challenges of living in poverty compound with the other intersectional inequalities experienced by PLWH can translate into a sense of extreme powerlessness, shame, inferiority, self-doubt, and social isolation (Goodman et al., 2009). The class differences between us can become blind spots for us to recognise the unique challenges

faced by our clients. Thus, psychotherapists must adopt an intersectional approach that considers individual, community, and societal factors influencing the experiences of PLWH and the relational dynamic, to provide socially just and ethically sound psychotherapy.

### *Critically reflecting on and mitigating relational power dynamics*

Operating from an intersectional lens involves practitioners reflecting on their own identities, and how their social group memberships may impact their work. As psychotherapists, we must recognise that our identities play a crucial role in shaping the power dynamics within the therapeutic relationship. The importance of our continuous self-reflection on issues of oppression, power, and privilege in our own lives is widely emphasised in professional literature and guidelines (Goodman et al., 2004; Pope & Vasquez, 2016; Shaw, 2010; Winter & Charura, 2023). Extensive evidence suggests that practitioners who are aware of how their social positioning shapes their values and experiences are less likely to make faulty assumptions, unintentionally perpetuate harmful power dynamics, reinforce negative stereotypes, or inadvertently replicate past injustices experienced by marginalised individuals (Leary, 2000; Sue, 2015; Sue et al., 2007). Addressing power differentials may be especially salient when working with PLWH because we can be gatekeepers to resources; for example, welfare providers may require documentation from us as evidence that the situation the clients are in is detrimental to their wellbeing which further complicates the power dynamics.

Regardless of our theoretical orientations, it is crucial that we remain open to engaging in dialogue with clients about identities, collaboratively exploring and addressing the values, assumptions, and biases that shape both parties' perspectives throughout the therapeutic relationship. Within the counselling literature, there have been growing calls for counsellors to assume responsibility in helping clients navigate their culture-specific values, attitudes, beliefs, and experiences in the therapeutic process because the practitioners hold a significant power advantage within the relationship (Day-Vines et al., 2007, 2021; Lee et al., 2022). I believe this assumption should also extend to psychotherapy, especially when working with PLWH, given the hermeneutical injustices this group faces. However, we need to be cautious about how we implement this in the therapeutic process. Navigating differences in culture, identity, and power requires delicacy, particularly as we strive to understand how intersectional identities shape relational dynamics. Clients may not always be ready or willing to engage in developing critical consciousness—pushing too hard could do more harm than good, inadvertently imposing our own cultural values on them, deepening their sense of disenfranchisement, and reinforcing the epistemic injustices they face (Hailes et al., 2021).

When working with people living with HIV (PLWH), I strive to address power dynamics by critically reflecting on the differences and similarities in our intersectional identities, while remaining open to acknowledging them when appropriate. Using myself as an example, I am a middle-class, heterosexual, cisgender, Chinese female trainee counselling psychologist.

Certain aspects of my identity place me in marginalised groups—being female and an ethnic minority—while other aspects, such as my middle-class and cisgender status, afford me privileges that contribute to the structural inequalities faced by other groups. These intersecting identities shape my worldview, influence my perspective on social justice, and inevitably affect the power dynamics within my therapeutic relationships with clients. In my client work with HIV-positive clients, I often try to remove myself from the ‘expert’ status associated with the title of ‘Trainee Counselling Psychologist’ by openly acknowledging my limitations in fully understanding their subjective experiences. When exploring our shared and differing intersectional identities in the process, I tend to focus on more visible factors like gender, ethnicity, and age. I believe that differences in class, disability, and in this context, HIV status, should be approached with additional care. While acknowledging my privileges can promote cultural sensitivity and potentially improve the therapeutic relationship, it may also inadvertently reinforce a client’s sense of otherness and replicate the feelings of past alienation.

From my experience, HIV-positive clients often find their identity reduced to their HIV status by those who know about it. Highlighting our difference in HIV status, for instance, could unintentionally reinforce barriers, limiting the client’s ability to define their identity beyond the label of being HIV positive. Interpersonal power dynamics become even more complex when I share aspects of my identity with my clients, such as gender and ethnicity. I make a conscious effort to consider how our shared identity might obscure important differences in our life experiences. If not carefully addressed, my understanding of how HIV is perceived and the gender stereotypes prevalent in Asian cultures can manifest as unconscious bias in how I conceptualise and understand my client’s experience. This may lead me to unconsciously impose the negative stereotypes and injustices faced by others onto my client, potentially undermining their autonomy and weakening the therapeutic alliance. I try to maintain my critical awareness by discussing my application of intersectionality in client work during clinical supervision. Supervision provides a valuable space for me to reflect on the therapeutic relationship from a different perspective and develop strategies to address relational dynamics more effectively.

## **PLURALISM AND MONOCULTURAL BIAS**

I argue that social justice informed psychotherapy for PLWH necessitates adopting the philosophical stance of *pluralism*, which posits that any substantial question may have multiple varied, yet sometimes conflicting, answers (Rescher, 1993). Building on this concept, Cooper and McLeod (2007) developed the pluralistic approach to therapy, a framework that emphasises shared decision making between client and therapist. The pluralistic approach to therapy is grounded in three core principles. First, *pluralism across orientations* encourages therapists to remain open to diverse ways to conceptualise clients’ experiences of distress

and approaches to addressing their needs. Second, *pluralism across clients* highlights the importance of recognising client diversity and tailoring therapy to individual needs rather than offering a one-size-fits-all model. Third, *pluralism across perspectives* underscores the significance of client participation in selecting therapy tasks and methods and deciding therapeutic goals. The pluralistic approach aims to create a structure that accommodates various pathways to change, rather than prescribing a singular, fixed method for therapeutic progress (Cooper & McLeod, 2007). By applying the pluralistic approach, we can better honour the individuality of each HIV-positive client, a point I emphasised earlier. Moreover, it serves as a crucial tool for practising from an intersectional lens and for restoring epistemic justice to HIV-positive clients.

My support for the pluralistic approach stems from my critical examination of the *monocultural* bias—the procedural norms embedded in our profession, which can become a source of cultural insensitivity and undermine therapeutic alliance (Gone, 2009). We need to recognise and reflect on the limitations of psychotherapies and the orientations we practice from. While our role as psychotherapists positions us to advocate for the value of therapy, we must remain vigilant against potential biases that may lead us to assume therapy is always the optimal or universal solution. Recognising these biases allows us to approach our work with greater humility and cultural sensitivity. We need to reflect on how the therapeutic orientations we adopt shape our understanding of the sources of our clients' distress and influence the structure and goals we set for therapy.

### *Beyond traditional therapy*

Activism and advocacy are constitutive components of the social justice work of therapists endeavouring to address intersectional inequalities rooted in oppression and power (Grzanka, 2020; Mallinckrodt et al., 2014). As defined by Toporek and Liu (2001), advocacy in psychotherapy represents actions that the practitioner takes, within and beyond the psychotherapy context, to eliminate the external and systematic barriers impairing clients' wellbeing. Advocacy may result in improvements in socio-political and economic inequalities through influencing how public decisions are made. Winter (2019) highlights that to truly embody social justice principles in our practice, we must incorporate a socio-political lens into our formulation, tailor our approach according to the needs of our client, and consider the border resources available to our clients—therapy may not always be the most appropriate or effective course of action. Specifically, this is important when working with PLWH, where loss of social networks, status, financial security, and resources to meet basic needs are common. It is not uncommon that my HIV-positive clients express concerns about their ability to commit to therapy due to financial constraints, such as being unable to afford travel expenses. Remote therapy often is not a viable option for them due to a lack of privacy in their living situations. Frequent and unpredictable hospital appointments further complicate their ability to engage in therapy. To address these barriers, I reached out to the organisation

I volunteer with to inquire about potential reimbursement for travel expenses. I also advocate for flexibility in boundaries related to practices, such as focus of the therapy and cancellation policies to better support our clients' needs.

We need to consider other forms of psychological support that might be available to our HIV-positive clients to accommodate their individual needs. In my client work, I often refer to the *Standards for Psychological Support for Adults living with HIV*, published by the British HIV Association (BHIVA, 2011). BHIVA (2011) outlines a stepped-care model of psychological support for PLWH, which includes a range of services: information, advice, peer support, self-management courses, screening for cognitive difficulties and comorbid conditions alongside HIV, as well as counselling, psychological therapies, and specialist mental health interventions. We need to consider the limit of the therapy that we can provide, and actively collaborate with our clients to determine the most appropriate course of action. The interpersonal conflicts and lack of social support experienced by PLWH can often be addressed by developing new support networks and engaging with communities that share similar experiences. Extensive literature demonstrates the unique value of peer support in helping HIV-positive individuals navigate the health system. Peer support not only offers interpretive tools for understanding complex health information but also provides strategies for managing their condition (Berg et al., 2021; Boucher et al., 2020; Feldman et al., 2023; Monroe et al., 2017). By considering these resources in therapy, the process can potentially help address the intrapsychic conflicts that hinder clients from seeking additional support, such as fear of association with the HIV community and difficulty in accepting their HIV-positive status.

Relevant to my previous point, many PLWH face significant challenges in meeting basic needs, such as debt, housing, and access to welfare support. These issues, which traditional therapy may not address, are crucial in determining their wellbeing and contribute to their distress. As a volunteer counsellor at a local HIV charity, I collaborate closely with other professionals in the organisation to provide holistic support for my clients. A social justice informed approach requires us to routinely inquire about clients' basic needs as part of the clinical assessment process and actively assist them in obtaining necessary resources (Appio et al., 2013). We should also consider providing flexibility in the focus and boundaries of therapy to meet the individual needs of our clients. When working with clients who are in the process of accessing welfare support and are finding the process challenging, I offer them the choice to either continue pursuing their original therapeutic goals or shift the focus of the hour to collaboratively develop strategies for effective interactions with social service agencies. By validating and addressing clients' experiences of institutional barriers, we can empower them to advocate for themselves and others (Carr et al., 2023). Additionally, exploring available options, support systems, and community strengths can enhance clients' self-worth, confidence, and critical consciousness, encouraging them to challenge oppressive institutional practices and work towards social change. Sharing tasks and responsibilities with

other resources can alleviate the professional and personal burden on us endeavouring to address the social injustices faced by our HIV-positive clients.

### *Acknowledging the potential benefits of medicine*

Another *monocultural* bias that I observed within our profession is a bias towards disregarding the power of the medical model in understanding distress. With the contemporary shift of a social justice perspective emphasising *power with* rather than *power over*, practitioners and scholars have been actively critiquing and rejecting the medicalisation of distress (Carr et al., 2023; Sanders, 2006). As a trainee counselling psychologist, I firmly believe in the philosophy underpinning the discipline, that we need to operate from a holistic lens and view individuals as unique, relational beings with autonomy (Strawbridge & Woolfe, 2010). However, I also believe that, while we challenge the traditional medical model of distress centred solely on the individuals (Tribe & Bell, 2018), we should not disregard the potential role of biology on distress, and the benefit of psychopharmacology for our clients.

This perspective is particularly crucial when working with PLWH. HIV infection can lead to cognitive impairments and neurological changes that affect people's experience of distress and emotional regulation, with research consistently demonstrating the link between depressive symptoms and cognitive impairments among PLWH (Rabkin et al., 2000; Rubin & Maki, 2019; Starace et al., 2002). I noticed in my experience of working with HIV-positive clients, that for some of them, their intrapersonal conflicts have a neuropsychological basis—feelings of confusion, powerlessness, and helplessness persist due to severe cognitive impairments and a chronic sense of fatigue. In my experience, it is common for the role of cognitive impairments to be overlooked by both clients and professionals. Clients may internalise these cognitive difficulties, perceiving them as indicators of inferiority or inadequate intelligence. *'I thought I was just getting old, or I am just not as good or as smart as others.'* They may refrain from disclosing these difficulties to the professionals involved in their care due to the internalisation of their challenges. Additionally, when PLWH experience cognitive impairments, their responses during assessments and therapeutic interactions may be limited and brief. This can often be misinterpreted as clients being guarded or unwilling to engage. Even though as psychotherapists we do not have the expertise to directly address the impact of cognitive impairments on our clients, acknowledging the role of biological factors in their distress can help alleviate feelings of self-blame and shame and may be essential for them to engage in the process.

This is particularly important for PLWH from multiple marginalised groups who often face numerous barriers to accessing HIV care. By exploring and understanding the biological basis of their challenges in therapy, we can empower clients to advocate for themselves to access the appropriate treatments from the healthcare system, fostering new power relations between them and medical professionals. In addition, the physical health challenges stemming from a weakened immune system may require psychiatric medication for

resolution. While psychotherapy may facilitate their self-acceptance of having been infected with HIV and the limitations it imposes, PLWH may need psychopharmacology to manage specific physical symptoms, for example, clouding of consciousness, in order to engage in psychotherapy, to immerse in the process, and to address the intra- and interpersonal conflicts they are experiencing.

## CONCLUSION

Social justice informed practice for working therapeutically with PLWH requires us to adopt an intersectional lens. This involves critical reflection on the power and privileges inherent in intersecting identities, and how these shape the clients' experience of distress, contributing to both intra- and interpersonal conflicts as well as relational dynamics. We also need to interrogate the limitations of the theoretical orientations and structural paradigms from which we operate, including the biases shaped by our own positionalities. I argue that the integration of social justice informed practice is imperative to delivering psychotherapy that upholds the ethical standards of our discipline. How can PLWH, or anyone for that matter, receive the ethical and socially just psychotherapy they deserve if we do not reflect on our biases and set aside our beliefs about what is right or wrong in different views on therapeutic issues?

Social justice informed practice often relies on the voluntary efforts of practitioners, who must navigate the tension between self-interest and the accommodation of clients' needs. This additional burden, often unrecognised within the scope of regular workloads, can lead to burnout, hopelessness, and even anger (Helms, 2003). Without a robust professional support system, therapists working on the frontlines of social justice risk being oppressed by the very mission they seek to fulfil. In light of these challenges, this article introduced a social justice framework specifically designed for psychotherapy with HIV-positive clients. This article calls for a broader reconsideration of the implicit biases present within the discipline and aims to inspire actionable change among practitioners, to share responsibilities with other professionals and organisations in the ecosystem of support services. Collaborative engagement with external resources is crucial, not only in providing holistic support but also in helping us uphold our commitment to social justice, all while maintaining our own wellbeing.



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## ACKNOWLEDGEMENTS

I would like to express my sincere gratitude to all those who recognised the value of my work, particularly the editorial team and reviewers, whose support and encouragement were instrumental in the publication of this article. Their constructive feedback allowed me the opportunity to contribute to restoring epistemic justice for both myself and those living with HIV.

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## PEER-REVIEWED ARTICLE

### Lessons from psychology in Palestine: More than psychotherapy, we need a truly community psychology

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#### ABSTRACT

In this article, we provide a historical overview of community psychology in Palestine, drawing lessons for the critical analysis of psychology's development, especially for capitalism periphery, and its possible contributions to Palestinian resistance against genocide. The rise of Palestinian community psychology, linked to liberation and anti-colonial struggle, and its subsequent decline, demonstrate the need to go beyond academia and institutionalisation, overcoming the boundaries of psychology itself. Community psychology, criticism of psychology, and decolonisation are not metaphors or rhetoric. They are praxis. It is important to consider community psychology as a part of another ethical-political project of psychology. In this regard, more than psychotherapy, we need a truly community psychology. Finally, solidarity with Palestine and Palestinians as a political praxis is essential, as is the production of knowledge that engages with Palestinian resistance, especially from the perspective of Palestinians and their voices.

**KEYWORDS:** community psychology; praxis; critique; decolonisation; Palestine

In this article, we seek to provide a brief historical overview of the development of community psychology in Palestine, in order to critically analyse psychology's development, especially for capitalism periphery, as well as to draw out lessons regarding the possible contributions of psychology to Palestinian resistance against genocide. We are psychologists, professors, and researchers from Brazil, whose particularity as a dependent capitalism country, with colonial genesis and development, brings with it a series of similarities with Palestine. Likewise, we have noted numerous similarities regarding the development of psychology in our country and in Palestine. This allows us to advance with Ignacio Martín-Baró's (2011) observation that

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the *misery* or *slavery* of Latin American psychology, that is, its colonised and dependent character, also occurs in other contexts and countries—not by chance, that are colonised and dependent—denoting the uneven and combined development of capitalism, via imperialism and colonialism, also in and through psychology.

On the other hand, there is no comparison with what the Palestinian people have been going through for seven decades, with the settler colonialism and apartheid of the self-proclaimed State of Israel. In the 21<sup>st</sup> century, we are experiencing the unfolding and strengthening of a colonialist, racist, and genocidal project. This scenario has intensified in recent times, since October 2023, resulting in even more violence, death, and barbarity. This places us before a reality that is impossible to ignore, even if someone tries to turn the head and eyes away, pretending that it does not exist.

For psychology and the 'psy' field (that also includes psychoanalysis and psychiatry), as human sciences and professions that deal with human beings and their needs, regardless of the object they want to attribute to them (mind, subjectivity, behaviour, mental health, etc.), there is a call not only to pay attention to what is happening in Palestine, but also to take a clear position in solidarity with the Palestinian people. Furthermore, considering the gravity of the genocidal resurgence by the self-proclaimed State of Israel with the endorsement of the world's imperialist powers, it is essential for psychology to ask itself whether there is anything that can be done to support the Palestinian population. In our view, the affirmative answer to this question involves two observations, which, at the same time, serve as constant warnings: (a) that psychology must rethink and self-criticise its historical development, whose hegemony contributed to Israeli colonialism in Palestine and the denial of the Palestinian people; and (b) that there are relevant initiatives and movements in Palestine to build a community-based, decolonised psychology, within the struggles for liberation and self-determination of Palestinian people, which must be studied and understood as recognition and learning from the Palestinian people themselves.

Regarding the first point, we know how difficult it is to talk about psychology in a general way, without having some problems. Point 'b' itself already signals that psychology is not a monolith, that it has its internal contradictions. However, psychology as a discipline of knowledge or a partial science and profession, develops itself within a Eurocentric capitalist paradigm, even as a way of justifying this development, psychologising, and individualising reality. As Bulhan (1985) characterises in dialogue with Frantz Fanon, there is an imperialism *in* and *by* psychology. Also, psychology has been hegemonically Euro-American, Eurocentric and, in this, a *psychology of oppression*.

For example, this is expressed in the context of the Israeli genocidal advance against Palestine. According to Samah Jabr (2024c), a psychiatrist and head of the Mental Health Unit of the Palestinian Ministry of Health, the 'one-sided condemnations from leading psychiatric [and psychology] associations reinforce Israeli propaganda and make them accomplices to

oppression and killing of Palestinians’ (p. 144, our translation). The author specifically addresses the cases of the American Psychological Association (APA) and the American Academy of Child and Adolescent Psychiatry (AACAP) that demonstrate the colonialist and imperialist character of psychology itself and the psychiatry field in general, considering that they are two associations that are central in building directions and policies for the psy field. Thus, we seek to heed Jabr’s (2024c) call that ‘we must push back against the APA and AACAP and any other professional organisations that contribute to hateful and negative representations of the Palestinian people’, being ‘accomplices of the oppression and killing of Palestinians’ (p. 148, our translation).

Furthermore, we seek to continue the dialogue proposed by *Psychotherapy and Politics International*, which aims to make the genocide of the Palestinian people visible and to call on psy field to take responsibility for this reality (Minikin & Pavón-Cuéllar, 2023). We thus agree with reflections published in the journal that repudiate colonialism, racism, and the Israeli genocide, while seeking to contribute through psychology and psychoanalysis, from their ontological, epistemological, and practical particularities to the resistance of Palestinian people (e.g., Gaba, 2024; Mendelsohn, 2023; Palmieri, 2023; Parker, 2023; Sheehi & Sheehi, 2023).

From this, we carried out a brief historical recovery exercise of Palestine’s community psychology construction. We specifically address the community psychology developed within the scope of Birzeit University, based on the praxis of people such as Ibrahim Makkawi and colleagues, as well as other Palestinian authors and activists.

Ibrahim Makkawi (1948–2022) was the most prominent name in the theoretical and practical development of Palestinian community psychology, oriented towards contributing to Palestinian liberation. This development was based on the critique of the colonised and dependent character of psychology in Palestine—in Arab countries. During his career, along with several contributions, Makkawi founded and coordinated a postgraduate programme (Master’s) at Birzeit University, contributing to the formation of numerous psychologists from a critical and community perspective. Furthermore, he was an important actor at the international level of community and liberation psychology development, proposing and organising several events and initiatives, working together with groups, researchers, and activists from different parts of the world, and reiterating that his commitment to Palestinian liberation was also internationalist, concerning human emancipation (Atallah & Masud, 2023).

Our goal, much more than trying to teach lessons to a people who are resisting and being the moral compass of our times in terms of struggle, is to learn from them. In this, we seek to share their voice, their knowledge, and their struggles, who have been historically denied, but, despite this, they continue to assert themselves and become humanised through their own praxis, pointing out paths and exits to a sociability whose development is increasingly

barbaric. Thus, in the first instance, we present some of the main aspects of community psychology's development in Palestine. Later, we seek to extract lessons to think about the contributions of psychology, especially in peripheral capitalist countries, as well as in Palestine itself.

### **COMMUNITY PSYCHOLOGY IN PALESTINE AS A RESPONSE TO COLONIALISM**

According to Makkawi (2009, 2012, 2015a, 2015b, 2017), the roots of community psychology in Palestine lie in the Palestinian people's own self-organisation and struggle for their liberation. More specifically, the author points out the relevance of the movements that culminated in the First Intifada, with numerous grassroots, community, and popular initiatives, from a self-management and self-determination perspective, such as: popular education, community schools, welfare services, daycare centres and childcare institutions, support groups, and conscientisation strategies, among other initiatives, which were developed and gained strength, with community psychology nourishing itself from them, at the same time that it was one of these initiatives (Makkawi, 2009, 2012, 2015a, 2015b, 2017).

The First Intifada came to an end in 1993, following the Oslo Accords. Mediated by the United States, agreements were signed between the Israeli government and the president of the Palestine Liberation Organization (PLO), Yasser Arafat. For Makkawi (2015b), the Oslo Accords represented a turning point in the development of the Palestinian national movement and its popular and community-based self-organisation, with a series of influxes and setbacks in community psychology itself. The same assessment is made by Lena Meari (2018), another key figure in the development of community psychology in Palestine, who states that the post-Oslo era is 'characterized by the transformation of the Palestinian struggle from a revolutionary anti-colonial liberation struggle into a state-building project bound by legal and administrative liberal logic and neoliberal economic and political rationality' (p. 50).

Even with the Second Intifada, which occurred in 2000 due to the non-compliance with the Oslo Accords by the self-proclaimed State of Israel, these Accords had already weakened the Palestinian struggles and means of resistance. As a result, 'the Palestinian community in the West Bank and Gaza was less prepared to sustain the collective struggle' (Makkawi, 2009, p. 80), with the Second Intifada resulting in many Palestinians' deaths, failing to achieve its objective.

Despite this, the brief exercise already demonstrates that the construction of a community psychology in Palestine took place as a response to Israeli colonialism; it was based on the needs of the Palestinian people in their struggles for liberation and self-determination. Add to this the influences of Latin American community psychology, especially the contributions of Martín-Baró and Paulo Freire, the praxis of Frantz Fanon, as well as the anti-colonial

revolutionary movements and experiences in Latin America, Asia, and Africa (Makkawi, 2009, 2012, 2015a, 2015b, 2017). In short, community psychology in Palestine arises from the historical and concrete ground of the Palestinians—also influenced by Third World struggles—as well as from their own humanisation praxis. According to Makkawi (2009), ‘what we need in Palestine within the prolonged struggle for self-determination is a liberation form of community psychology’ (p. 77).

Community psychology in Palestine was not, therefore, a mere academic production of research centres or researchers, even though it was also developed by them. It originated from struggles and was developed with these struggles. It was not an epistemological invention, as if class struggle and national liberation struggle were transformed into a mere clash of theories, concepts, or worse, of prefixes. Even though this movement criticised the colonised-dependent epistemological bases of psychology, the critique was, above all, ontological, against the ontological denial of the Palestinian as human. Additionally, it was a critique put into practice. It was (and is) praxis; a liberating praxis, linked to the anti-colonial national liberation movement.

Furthermore, we emphasise that such community psychology was born outside of psychology—just as it has occurred with Latin American community psychology, for example (Makkawi, 2009, 2012, 2015a, 2017). Its social genesis lies in popular, community-based organisations, in anti-colonial struggle, and self-organisation and self-determination initiatives of Palestinian people, especially in the context of the First Intifada. Such struggles and actions end up entering psychology, confronting it and its colonised hegemony. They confronted particularly the way in which colonised psychology was institutionalised in certain sectors and spheres, such as in universities and academia. For example, according to Makkawi (2017), ‘Palestinian universities, and in particular Palestinian academic psychology, at that time failed to understand and cultivate grassroots manifestations of community psychology’ (p. 484). Psychology in such institutions continued ‘to teach mainstream, Western individualistic knowledge, and fail to place the development of higher education within its anti-colonial historical context’ (p. 484).

Therefore, it is necessary to criticise the movements of institutionalisation and academicisation of psychology critique and decolonisation. In the case of community psychology, especially in Palestine, this institutionalisation and academicisation has meant the mischaracterisation, distortion, and denial of criticism itself and its radicality. For example, in work carried out with colleagues from several countries on the critique of community psychology, Makkawi pointed out that:

community psychology has gradually become decreasingly diverse and decreasingly radical the more it has become academically and professionally established and evangelized and it is now endangered as a critical alternative to the disciplinary ideologies, theories, procedures and practices of mainstream psychology. (Coimbra et al., 2012, p. 135)

This institutionalisation in the Palestinian context, especially since the Oslo Accords, has also occurred through the penetration and large-scale action of research funding agencies and institutions in psychology, psychiatry, and mental health, by the imperialist and colonialist powers (Makkawi, 2009, 2012, 2015a, 2015b, 2017; Meari, 2015). The main manifestations of this process are: (a) Western-funded non-governmental organisations (NGOs), supposedly focused on Palestinians' mental health care, considering them in a passive and depoliticised position as victims of a supposed war; and (b) in the trend of individualising (psychologising and psychiatrising) research on trauma, more specifically, on post-traumatic stress disorders (PTSDs) (Coimbra et al., 2012; Jabr, 2024a, 2024b; Makkawi, 2009, 2015a, 2015b, 2017; Meari, 2015).

In other words, the so-called concern of the West, especially of imperialist and colonialist countries, with the mental health of Palestinians, through NGOs, agencies, and funding institutions, has been a Trojan Horse. Armed with supposed critical, counter-hegemonic guises, they are based on the world's and human beings' conceptions that take the imperialist and colonialist countries themselves as ideal types, with the Palestinians continuing to be denied, as mere objects: on one hand as terrorists and, on the other, as victims. What presents itself as critical, socially committed, even decolonised, has largely been an arm of colonialism, hindering the decolonising, anti-colonial, and community initiatives of the Palestinian people.

Furthermore, as much as many of these initiatives present themselves as innovative, there is nothing new in the content or purpose of this process. It is a colonial movement that uses psychology and the psy field as ideological and practical weapons. Something, for example, already denounced by Fanon (2020) regarding the colonised nature of the psy field, especially psychiatry in Algeria—and Africa in general—during colonisation. Thus, through the psy field, the coloniser continues to assert himself by the denial of the colonised, including through their role as saviour of those who need to be cured. Add to this the scientific condition, the impartiality and objectivity of the psy field. In line with Meari (2015, p. 81):

Both trauma and human rights discourses presuppose a specific Western-like imagined human who possesses specific psychic sensibilities and characteristics. This construct had been positioned as universal and was transferred to different parts of the world. This specific human construct established the depoliticized victim to be redeemed by specialists.

However, such salvation was (and is), in fact, the perpetuation of colonial violence. In the specific case of mental health, it was (and is) reduced—and distorted—to an individual intrapsychic instance, in a clear liberal bias, of an abstract, generic being that hovers in the air. Consequently, its approach is synonymous with psychotherapy, counselling, medication, and to be carried out or coordinated by NGOs and other foreign entities, through individualistic approaches and from a privatising perspective. There is also a corporatism of medical entities (especially psychiatry) and psychology, as if they were private owners of the mental health of Palestinians. Furthermore, it is foreign institutions or those heavily financed

by foreign entities that privately appropriate Palestinians' mental health. Thus, they weaken or deny other collective and collectivised care initiatives, created by the Palestinians themselves, as well as the very nature of care present in gestures of solidarity, in struggle instruments—and in the struggle as a whole—with countless positive implications for Palestinians' mental health. According to Makkawi (2015b), while the Palestinian

grassroots organizations were established from the bottom up with a broad base of supporters, typically linked to political parties and inspired by self-sufficiency logic, NGOs are established by a few individuals with links to Western funding organizations and with no popular base... Western-funded NGOs are conceived within the wider strategy of co-option and entrapment of the Arab and Palestinian intelligentsia, seeking to depoliticize, distract, and distance radical and organic intellectuals from involvement with the struggle for justice and self-determination. (p. 420)

Meari (2015, p. 79) calls this process 'The Empires of Trauma and Human Rights', in an obvious allusion to its imperialist and colonialist character. Makkawi (2017) characterises this movement as the re-emergence of neocolonialism. As a result, it contributed to a liberal turn in Palestinian culture, with the weakening of community-based and popular voluntary organisations, rooted in the territory, and that were constitutive of Palestinian liberation struggles. In fact, many political and community leaders ended up becoming managers and administrators of such NGOs, of their financed projects or of other imperialist and colonialist ideological apparatuses.

One of the most obvious examples of this process of distortion is the attempt to weaken *sumud*. Although it is often understood as firmness, resistance—or distorted in liberal psychologising terms as resilience—*sumud* does not have a fixed meaning, a univocal translation in Brazilian Portuguese or English, and it is not possible to synthesise it in a single Western concept without distortion. *Sumud* emerged among Palestinian militants and spread throughout their communities specially in the late 1960s, reaching its peak in the Palestinian offensive and its political effervescence during the First Intifada (1987–1993). Following Makkawi (2015a), and based on community, collective, and solidarity values, and on *sumud* as a philosophy of life, as an identity construction and resistance praxis, in contrast to the objective and subjective Israeli colonisation and fatalisation, this process erupted in the First Intifada. After an uprising in a refugee camp, the movement gained even more momentum, based on the entire popular and community infrastructure developed by the Palestinians themselves as resistance. The Israeli counteroffensive was even more violent and repressive, but it was unable to end the anti-colonial offensive of Palestinian liberation, much due to *sumud*.

For Meari (2014), *sumud* is an anti-colonial way of being, embodying 'a multiplicity of significations and practices' that 'destabilizes the colonial order and its power relations', constituting 'a Palestinian relational political-psycho-affective subjectivity' (p. 549). It represents and expresses Palestinian resistance and struggle, in terms of its philosophy of life,

of a collective identity, of a permanent praxis that even circumvents the linear and anti-dialectical conception of time—past, present, and future.

According to Meari (2015) and Jabr (2024a, 2024b), the liberal tradition in discourses, activism, and initiatives linked to human rights and psychological trauma opposes and clashes with *sumud*, which expresses a philosophy of life, social values, identity, and ethical-political commitment. Not that such a liberal tradition does not contain ethical-political dimensions, but these are antagonistic to those of *sumud*, which synthesises and expresses a set of cultural values linked to the firmness, perseverance, and resistance of Palestinians amid the struggles for national liberation.

In the opposite direction, seeking to suppress *sumud*, the liberal tradition of human rights and mental health—expressed by the psy field—began to hegemonise the ideological constructions and modes of subjectivation after the Oslo Accords, reinforcing the Palestinians as objects: whether through supposedly well-intentioned (salvationist) guises, with them as victims, traumatised individuals, etc.; or through explicitly pejorative characterisations, as violent individuals, terrorists, savages, among others. If *sumud* emerged among Palestinian militants and spread throughout their communities, as a result of their resistance, reaching its peak during the First Intifada, its weakening is a constitutive part of the objective and subjective genocide perpetrated by Israeli colonialism. It is, therefore, an intricate colonial engineering, which seeks to physically and symbolically genocide the Palestinian people, depoliticising and weakening their struggles and resistance, and, therefore, some of their central values such as *sumud*.

Linked to this, the concept of community or community-based is manipulated and distorted ‘by many NGOs by merely affixing the word “community” to the title of whatever training project they are conducting’ (Makkawi, 2015b, p. 421). This distortion occurs on the ontological, epistemological, and practical levels, with ethical and political implications that weaken truly community-based and grassroots initiatives, built from the bottom up by Palestinians. This is not just a rhetorical movement, but also a material, political, economic, and ideological one. Thus, ‘both the work of the NGOs and the PTSD research accumulation are problematic and pose serious challenges to community psychology enactment that is committed to people’s liberation and social justice’ (Makkawi, 2015b, p. 416).

Therefore, the continuity and strengthening of a truly community-based psychology in the Palestinian context requires criticising and overcoming such initiatives. The actions of Palestinian’s (mental) health care cannot be reduced to traditional tools in the psy field, such as psychotherapy, analysis, or medication; to a privatist and individualistic conception.

How can this be done? In our view, the answer lies in the resistance of Palestinian people themselves, and how it has been carried out through collective, community initiatives: in and through struggle; in and through self-organisation and self-determination. In line with Jabr (2024b), ‘collective trauma can be alleviated through the promotion of collective efforts such

as recognition, respect for minorities, support for the afflicted, and mass cooperative action' (p. 58, our translation). In other words, it is essential to go beyond psychology or even the clinic.

This means the resumption and strengthening of initiatives that are specific to the Palestinian people, as occurred in the genesis of community psychology. In other words, territorialised, community-based, grassroots, bottom-up initiatives, carried out by the Palestinians themselves and their allies in their liberation project during the anti-colonial struggle—which has not stopped.

Yet according to Makkawi (2017), one of the most unexpected and insurmountable challenges was 'academic dependency on Western knowledge production' (p. 490). However, this dependence was not a merely theoretical or epistemological subordination, although it also occurred through these dimensions. For Makkawi (2017), the root of the dependence of Palestinian psychology was the economic and political dependency itself, characteristic of settler colonisation, with the 'maintenance of economic dependency as a means of ensuring academic dependency among Palestinian intellectuals' (p. 484).

In the meantime, the Master's programme in community psychology itself suffered a decline. According to Makkawi (2017), although this decline was linked to 'epistemological and administrative conflicts with people in power during the developmental phase of the programme' (p. 489), it cannot be dissociated from the 'remarkable success of the programme and its emerging academic identity as decolonising community psychology' (p. 489) and the reaction against it, both within and outside psychology. Broadly speaking, the relevance of community psychology as a critical alternative to colonial psychology was confronted by colonialism, which countered the first with marginalisation and lack of recognition within psychology developed in Palestine. We can conclude from this that any movements of criticism and transformation of psychology, such as the one that occurred from Palestinian community psychology, are not dissociated from the struggles and conflicts outside psychology.

The history of community psychology in Palestine—and of psychology as a whole—is, above all, the history of class struggle—the history of class struggle in psychology and through psychology. More specifically, the history of the uneven and combined development of capitalism, its imperialist, colonialist, and racist character, and its expressions in and through psychology. Thus, if community psychology was born in Palestine as a response to colonialism, its institutionalisation and its consequent decline were counter-responses of colonialism—and imperialism—to its relevance.



## **SOME LESSONS FROM PALESTINIAN COMMUNITY PSYCHOLOGY**

In this section, we seek to solidify some of the teachings arising from the historical recovery of community psychology in Palestine. In certain aspects, it is a matter of repeating what has already been made explicit in the recovery exercise itself. Thus, in some cases, even though it has been made explicit, the relevance of the notes makes repetition pertinent. We live in times when the obvious needs not only to be said, but repeated. In other cases, the signs were implicit, also justifying the movement undertaken here.

Some of the inflections of community psychology in Palestine, as pointed out by Makkawi (2017), resulted from its institutionalisation in academia and by NGOs, mainly financed by the West, with colonialist and imperialist intentions. As a result, it ended up going against its socio-historical genesis, within the scope of the struggles, resistance, and Palestinian liberation initiatives. It also went against the examples that founded it, such as: the praxis of Martín-Baró and his liberation psychology in El Salvador within a civil war; Paulo Freire and his popular pedagogy in an abruptly unequal Brazilian reality, with a dictatorial regime; the anti-colonial bound with the fight against apartheid in South Africa (Makkawi, 2009, 2012, 2015a, 2015b, 2017).

It is worth noting that these inflections are not exclusive to Palestinian community psychology, and are also observed in other realities and countries, as Makkawi himself, together with colleagues, denounced (Coimbra et al., 2012). In the Palestinian case, it should be observed, however, that, unlike what occurred in Latin America and South Africa, where community psychology developed and consolidated itself during the 'transformation of their respective anti-colonial national liberation movements, decolonising community psychology in Palestine was born during an era of deep setback and defeat of the national liberation movement' (Makkawi, 2017, p. 491).

This serves as a warning to some psychologies that position themselves as critical, community-based, or even decolonising in the peripheral, dependent, and colonised contexts. It is essential to go beyond institutionalisation, especially academic institutionalisation, as well as to overcome the boundaries of psychology itself. The academic institutionalisation of psychology largely implies its disconnection from struggles and social movements, or a stance that criticism is a university's private property, exclusive to academia, which should be the beacon of struggles and movements, guiding them in a paternalistic perspective.

In turn, this does not mean that academia is irrelevant and unnecessary. However, it is a pertinent warning about the need to criticise and to put pressure on academia and psychology, through internal movements, that is, *from within*, but also and especially *from outside*. The challenge for the critique and decolonisation of psychology (including community psychology) in Palestine and, furthermore, in Brazil, El Salvador, South Africa, and several other peripheral realities of capitalism, is: 'to realise that unless it is dialectically connected

to the national liberation movement, it risks being just another academic cliché during an era of neoliberal economic dependency' (Makkawi, 2017, p. 491).

We hope to have been able to demonstrate by the analysis of Palestinian community psychology by Palestinian community psychologists that, more than psychotherapy, we need a truly community psychology in Palestine—and in other colonised or dependent contexts. As Makkawi (2015b) points out, the '[hegemonic] frameworks for intervention are awkward and mostly apply individualistic approaches to counselling and psychotherapy' (p. 420). No one denies the evident and widespread objective and subjective impacts of colonialism, apartheid, and genocide, including in terms of mental health. However, just as mental health refers to the production of life, of concrete individuals in concrete situations that are forged in relationships with each other, care is also collective, and not something individual–private, much less the private property of a field of know-how, of a specific science or profession (Costa, 2024). With this, we must go beyond psychology itself, overcoming it as a partial and private way of approaching objects and phenoms that are social, collectively produced, not being individual–private, even though expressed in or by the singularities of individuals.

Community-based and self-organisation initiatives can (and should) be understood as care initiatives and should therefore be strengthened. Solidarity must be reinforced as the substance of care processes and initiatives. Even in the clinical setting, whether necessary or possible, we can take conscientisation as its horizon (Makkawi, 2012), reiterating and materialising its educational and pedagogical character, in order to deprivatise care by reaffirming that it occurs fundamentally outside of the walls, of the institutions, of the limits of the psychotherapeutic sessions, and the boundaries of psychology. Care occurs in and by relationships with others, in everyday life, in the strengthening of bonds and less alienating and more humanising dimensions of life. In the case of Palestine, care and mental health strengthening can be part of the struggles—they already are.

We also point out as a lesson from the development of community psychology in Palestine, the need to go beyond the necessary but insufficient epistemological changes, in terms of ideas, concepts, and theories. They are not detached from historical soils, their contradictions, and the need to transform them. There is a risk, in this process, of reinforcing that the decolonisation of psychology is a mere decolonisation of psychological thought—as if that were possible. We cite as an example, the critique by Izzedin Araj (2023):

We find ourselves today in an era of academic metaphors where many have divorced academic recognition from the recognized reality. Many academics write on decolonizing curriculums, epistemologies, methods, perceptions, and disciplinaries but hardly engage with actual forms of undoing injustice. (para. 8).

Community psychology, the critique of psychology, and its decolonisation are not metaphors; they are not mere rhetorical exercises. They are praxis. Thus, it is important to consider community psychology as a part of another ethical-political project of psychology,

which concerns the necessary changes from its ontological and epistemological foundations, but also rethinking its practice and its ethical-political implications. Broadly speaking, a change in the praxis of psychology, that dialectically results from this new praxis. A new praxis, linked to a new horizon not only of psychology, but of society, as postulated by Martín-Baró (2011) in his ethical-political project of liberation psychology—which implied our liberation from psychology.

Once again, recalling Makkawi (2017) and his teachings—including those derived from the author's own self-critical analysis of the development of academic community psychology in Palestine: 'unless framed within the context of the broader anti-colonial national liberation movement, a decolonised community psychology has minimal chances to survive and thrive' (p. 482).

We also emphasise the importance of listening to what is being silenced: the voice of the Palestinians themselves. They are telling us. They are screaming. In the case of psychology, this implies listening to what has been produced in terms of its critique, of counter-hegemonic constructions, as is the case with Palestinian community psychology. These assertions sound contradictory and comfortable, when the authors of this article are not Palestinian. However, for this very reason, we seek to undertake historical recovery of Palestinian community psychology's development, extracting lessons from it, rather than assuming that we have something to teach them, telling them what they should do. Doing that we would be reproducing a (colonial) stance of treating the Other as a mere object, denying it. We seek to equip ourselves with the voices that speak for themselves, that have cried out, despite all the silencing, seeking to be a space for their vocalisation.

Furthermore, being from a country, Brazil, that was colonised and is dependent on the capitalist dynamics, we know that what happens at Gaza also happens in our country (or will happen, if Israel wins), obviously in conditions and proportions that cannot be compared—even because barbarity is not equated or hierarchised. Concretely, the bullets that kill young Brazilian people (black, poor, and from the *favelas*) are produced by Israel and tested on Palestinians. The genocide against our indigenous peoples that does not retreat—despite all the resistance, struggle, and achievements—has its corollary in the genocide perpetrated by Israel against Palestine. Palestine has been a great laboratory for state terrorism, ethnic cleansing, and the development of productive forces of death and barbarity.

In our view, looking into this process allows us to understanding better the Brazilian—and Latin American—reality, but, at the same time, expanding it, going beyond our particularities. Although one can correctly question that the Arab world is not readable from the ontological logic inherited from the Western world, and vice versa, it's also questionable that the conception of Latin America and other realities that were (and still are) colonised as the *Western world*—even if they dialectically are, not passing unscathed by it. Understanding that within the capitalist social totality framework, there are numerous similarities between the

processes of psychology's development in the capitalism periphery. They express the unequal and combined development of this mode of production itself, and the colonised, underdeveloped (or overexploited) particularities of social formations in Africa, Asia, and Latin America (and even some in Europe). More than ever, we need unity among the *wretched of the earth*, even in psychology—and, therefore, against it, to transform and overcome it.

In addition, at no time do we consider ourselves as spokespeople for Palestinian reality and psychology. However, we feel compelled by reality itself and by an ethical-political commitment to its transformation. This concerns the relevance of providing support and solidarity to Palestine and the Palestinians, as well as the importance of producing knowledge that engages with Palestinian resistance—as has been happening in the journal *Psychotherapy and Politics International* itself (e.g., Gaba, 2024; Mendelsohn, 2023; Minikin & Pavón-Cuéllar, 2023; Palmieri, 2023; Parker, 2023; Sheehi & Sheehi, 2023).

As Jabr (2024e) points out, 'international solidarity with the Palestinians helps alleviate the psychological pain and alienation caused by Israel's relentless dehumanisation and the world's demonstrated apathy and denial, as well as the lack of denunciation' (p. 164, our translation). In this, solidarity with Palestine is also 'a mental health imperative' (Jabr, 2024d, p. 151, our translation). However, this solidarity, as a political praxis, can and should go further, meaning movements of boycott, divestment, and sanctions (BDS) within and/or through psychology, reinforcing this important initiative, as well as strengthening other actions of Palestinian psychology—such as networks, associations, etc. However, together with all of that, we need to go beyond psychology.

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## ACKNOWLEDGEMENTS

We thank Professor Muna Odeh for the inspiration and knowledge.

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## NOTE FROM THE FRONT LINE

### Reflections after 15 months of war: Knowing there is suffering on a global scale, while holding in mind what I know as a therapist about trauma, healing, and reparation

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<sup>1</sup> The views expressed here are my own personal views.

#### ABSTRACT

Personal narratives help shape therapists, and their narratives are the lenses through which they see the world. The legacy of intergenerational war trauma is one such lens. Lenses and personal narratives are foundational to building knowledge and understanding, of events on a small and large scale, and this is a soft power of influence to be shared. Many therapists have lived experience of mental health difficulties, and consequently they are not immune from what they study.

Social realities are co-constructed, and we are all active participants in building peaceful alternatives for generations to come. An agenda of nationalism is being forcefully applied in the Middle East, and this is triggering for anyone with lived experience of conflict which includes intergenerational trauma. I argue that there is a need to remain vigilant to the impact of global conflict, in personal, professional, and political spheres of life.

**KEYWORDS:** therapist influence; intergenerational trauma; war trauma; Israel; Palestine

#### CONTEXTUAL KNOWING, CONTEXTUAL FRAMING, AND FORMULATING AT MULTIPLE LEVELS... 'FORMULATING BIG'

Barnett Pearce eloquently describes in the book *Making Social Worlds: A Communication Perspective* how after the September 11 attacks there was a moment which probably defined the next 20 years of foreign policy across the world, and the onus was on the USA, the victims

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of the atrocities that day, to respond appropriately (Pearce, 2007). On this occasion one might say the USA failed to act proportionately or acted with insufficient awareness and compassion, and without thought for future events and future generations, on both sides.

Similarly, now again, in another high-profile example, globally, the USA advised Israel not to act out in rage or vengeance after violence was perpetrated against them... in Joe Biden's own words, 'not to be consumed by rage' (Honderich, 2023). Again, the voice of peace was distant and quiet against the sound of militaries, but it was there, competing against the rhetoric of entitlement, entitlement to self-defence, in a claim that places armies and their actions above humanitarian law (a claim that was supported by other countries). However, what self-defence translated into, in the Middle East, was the large-scale invasion of an occupied territory in search of attackers and in the process, the mass killing of civilians. Unfortunately, the same outcome will likely beset Israel, as was observed for the USA following 9-11, that of a protracted war and although disproportionate, casualties on both sides (at the time of publication, this stands at 45,936 Palestinians versus 1,706 Israelis [United Nations Office for the Coordination of Humanitarian Affairs, 2025]). This is another example of a majority population in a high threat, low security state, despite their comparative, overwhelming strength, and their actions indicating that some lives are worth more than others.

Global events such 9-11 and October 7, 2023 are, of course, complex, after all there are so many variables and factors involved. This is a perspective that has been voiced by United Nations (UN) Secretary-General António Guterres (2023) when he stated that the events perpetrated in Israel 'did not happen in a vacuum' which is no surprise to therapists who come across this all the time in therapeutic encounters. Namely, the framing of a present moment that is built on past events, also present in current realities; an analysis that uses a broad lens, and that looks backwards and forwards in time, at multiple levels, and includes all factors. One might say there is no end or limit to understanding and no end to formulating in this way, and behind it a 'social construction theory is really a lens about lenses' (Hoffman, 1990, p. 3).

In summary, I propose a way of understanding local and global events, from a psychological perspective, that mirrors Guterres' words, that no event, in fact *no-thing* exists 'in a vacuum', and this is as true for global conflict as it is for interpersonal events. Rather, everything that exists in the present has come about in the context of a past, and this acts as a precursor to the future, so past and present are influencing future all the time. In other words, we can see a process of contextual force, in action, as decisions made now have a lasting impact on relations and the wellbeing of many generations to come, interpersonally and globally.



## **A PERSONAL-PROFESSIONAL-POLITICAL PERSPECTIVE ON THE CHALLENGES OF MAINTAINING A POSITION OF NEUTRALITY WITH REGARDS TO THE CURRENT CONFLICT IN THE MIDDLE EAST**

The futility of the path chosen by armed actors to this conflict, in terms of securing peace and justice for the October 7, 2023 victims—indeed for all victims of Israeli–Palestinian violence—has never been so stark.

Informed by multiple lenses through which I see the world, below I highlight dimensions of relevance at play and offer several reasons why all nations need to remain as neutral as possible in this protracted conflict which has the potential to escalate at any time.

First, these are neighbouring populations, and this is a dispute over land ownership. The trigger to the recent offensive was a security breach of a boundary, and of course boundaries exist to keep people safe. Rather than double-down on the security of its borders, instead a decision was made to escalate and accelerate efforts at military domination and the occupation of another people, a people with its own independently elected governing group. The state of Israel's failure to defend its borders is no reason to start an offensive of this kind. An agenda that is a war of occupation is being fought but under the guise of regime change against a ruling party that admittedly is banned in many countries, but in a way that echoes an apartheid or dictatorship because of the proximity of people.

Second, for reasons of humanitarian law. Reasonable force in common law and humanitarian law is defined as necessary and proportionate and the protection of civilians is paramount, and the numbers of civilians lost in this war, as time goes by, are simply too high. Self-protection like any aggression, is only justified if the reasons are valid, lawful, and the response proportionate. I say humanitarian law and the sanctity of life must be respected, always. Not taking sides is the only way of staying within international law, which concurs with the recent indictment of both Hamas and the Israeli government by the International Criminal Court.

Third, because the need for humanitarian aid remains high, and safe passage for workers is critical. The number of attacks on humanitarian aid workers going about their daily work has been staggering. The idea that aid can be delivered in a warzone at the same time as there are ongoing attacks from planes and drones is nonsensical. Concerns about this have been heightened especially since the attack on a World Central Kitchen aid convoy that occurred on April 1, 2024 (see, e.g., Vock and Turnbull, 2024). The need for aid efforts to proceed, in the absence of ongoing attacks, is overwhelming.

Fourth, current attempts to find solutions are short-term when what is needed is a long-term solution to this long-running dispute over territory. In any exchange of hostages for prisoners this is simply a short-term solution to managing tensions in the region and this is unlikely, in itself, to bring about a lasting peace (Fleischmann, 2023). In the seven-day

exchange that took place at the end of November 2023, there was also an accompanying exchange of slurs, and the words 'occupiers' and 'terrorists' were frequently used. These words were used to cause maximum offence by devaluing and degrading the other in this war of cancelling cultures, a war of degradation, each blaming the other for carrying out worse atrocities. We await to see the outcome of the second hostage exchange, especially how many more people will have to die if commitments are not honoured or delayed, likely more than the number of hostages currently held. Meanwhile the war of words continues, a never-ending cycle; it is a war of degradation, of cancelling cultures.

Fifth, the war continues to have a polarising effect and countries outside the region are being pulled into a toxic dynamic and asked to take sides. (By recognising the Palestinian state and by advocating for a two-state solution, countries such as Spain, Norway, and Ireland have recently given confidence to other countries to set a similar example [Landale, 2024].) This has been seen before in earlier wars: after the Second World War, for example, and in recent times after 9-11 attacks. The dynamic perpetuating this is when a people or country is feeling vulnerable and insecure (e.g., due to a border incursion) which then causes a vicious cycle or dynamic of victimisation. However difficult for surrounding countries to remain neutral, there can be no useful role played in reducing tension and resolving conflict if external actors are seen to be partial to one side or the other. It is this victimisation that creates the mindset 'you are either with us or against us', as we have heard as rhetoric so many times. The need to stand apart from this polarisation and from an over-identification with victimhood is clear as there are perpetrators and victims on both sides.

Sixth, for many nations there are ulterior interests in this region and there is a value attached to the trade passing through neighbouring seas, as has been seen when this is threatened. However, risk to profits is no reason or justification for joining a war or joining an offensive against other countries. Again, reference to self-defence by countries outside the region is questionable given these wider interests, and involvement in the defence of commercial interests and shipping lanes, over and above human lives cannot be supported from an ethical perspective.

Finally, the global civilian community is calling out for a ceasefire. The call for a ceasefire is so overwhelming and widespread that this cannot be ignored.

In summary, commitment is needed on a global scale to build back and invest in infrastructure, for a regional two-state solution, and in a way that does not prevent the freedom of movement of inhabitants. Only by showing unwavering, long-term support to both sides to demilitarise the region can age-old hostilities and insecurities begin to reduce, whereas a widening offensive poses only further risk to civilian lives. Longer term, the losers in this war of occupation and degradation are the children living now and children yet to be born, children whose lives or futures have been cut short, and who in time are exposed to a narrative of hatred for neighbours and for reasons unknown to them.

To be clear; whether suicide or casualty of war, the loss of one life is one too many, and the long-term impact of any war is felt for many, many generations to come.

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## ACKNOWLEDGEMENTS

To all peace-activists and peacebuilders, the world over.

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## NOTE FROM THE FRONT LINE

### Rupture and repair: The consequences of colonial childcare

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#### ABSTRACT

During the years of colonial rule in India, the white colonial classes delegated their childcare to Ayahs—or nursemaids—despite regarding them as inferior and less civilised. Marjorie, daughter of colonial parents, traces her early attachment to her Ayah despite her family's racist attitudes. As World War 2 ended, Marjorie was abruptly removed from her Ayah and brought back 'home' to England where she was sent to boarding school following the conformist pathways of a colonial family. Her loss of her Ayah and her feelings of abandonment and being unloved cause her to close down emotionally and focus on surviving. Much later, in her fifties, she began to recognise her own state of emotional dysfunction and sought help with therapy. She was fortunate to meet Nick Duffell who had been developing an understanding of what became known as Boarding School Syndrome. With a group of other former boarders, they formed a support group to help those traumatised by boarding school years to process their feelings. Marjorie assisted many boarders and in doing so reduced her sense of isolation and loss. In the meantime, campaigners had fought to acknowledge the Ayahs who were brought to London to care for their charges on the long sea journey and who were then shown the door and abandoned on the streets of London. A care home was established and this effort to give support has finally been recognised.

**KEYWORDS:** colonialism; childcare; India; racism; Ayah; boarding school

'One kiss on the cheek, one kiss on the nose, one kiss on the other cheek'. This was Marjorie's bedtime ritual in Delhi with her Indian nursemaid, her Ayah (Figure 1), who had been her primary carer since the age of seven months. This loving gesture was in clear defiance of her mother's orders to her as a child: 'You must not kiss Ayah goodnight'. When Marjorie asked why, her mother replied: 'Because she's a servant and an Indian'.

By the age of three Marjorie had navigated her way between the powerful emotional bond she had formed with her Ayah (she was called Byah) and the duty and obedience she owed

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to her mother, who seemed to have been anxious about any intimate form of affection and bond developing with Byah.

**Figure 1. Marjorie with Ayah**



*Note.* Reproduced with permission of the owner.

Marjorie was polarised from her early days between her loyalty to two women: to her birth mother with her rigid hierarchical mindset and her Ayah, who was her emotional anchor and source of love and safety. She found a way to bridge the parallel worlds of her parents' colonial mindset and the cherishing love of her Ayah—her primary carer. She rapidly learned to comply with her parents' chosen status but at the same time to cherish her attachment to Byah who cared for her till she was eight when they were abruptly separated forever.

This is the story of Marjorie's journey from the arms of her Ayah to her highly conformist, institutionalised period in a boarding school on her return to England, followed by her much later-in-life unravelling and processing of her early life distress and resistance to the racism around her.

Marjorie's life story offers a magnifying glass to aspects of the British empire and colonial life and its legacy that are now being extensively re-examined by both colonial and colonised generations. Her very British story offers insights into our understanding of our past.

Decades later her therapist Nick Duffell would address her pain and confusion, establishing that Byah had been a second mother to her during the critical early years development and had made her who she is. As part of this acceptance, and with Duffell's help, a small group of other boarding school survivors, formed an organisation called Boarding Concern (which is now called BSS-S [Boarding School Survivors Support]) to help other boarders deal with a similar privileged pain! During these years of therapy and processing Marjorie also witnessed the documentation and acknowledgement of how the Indian Ayahs had cared for the colonial offspring were sometimes valued, but often treated with brutal contempt.

I learned about Ayahs and their undervalued plight while studying—late in life—aspects of the British Empire and our legacy. As an ex-boarder myself, sent away at 10 from home to a school 300 miles away, when Marjorie talked through her experiences, it resonated strongly with me. I also watched both my brothers endure the life-long effects of being sent away at the age of seven and understand the importance of releasing our suppressed emotions. Meeting Marjorie and interweaving the two strands has been a great help in processing my own involvement and comprehension.

Marjorie's resistance to the status quo and her profound loyalty to her Byah were qualities that she would carry deep within her until much later in life when she would begin to unravel and process her passage from India to boarding school in England—and her subsequent life of reluctant conformity.

Although the loss of Byah would get submerged in the boarding school years, her understanding of the importance of these early years of care and development would emerge later with a greater intensity. This recognition would be reflected in Marjorie's pleasure at the ongoing re-evaluation and close examination of Britain's past as well as the recognition and honouring of the many Ayahs who had been brought to London and then discarded.

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Marjorie was born in southern England, and in 1937, at the age of seven months, she travelled to India where, embarking from the ship on the quayside, her mother handed her over to Byah who had already been looking after her older sister for four years. Byah thanked her mother, who later told Marjorie that Byah had said 'I have been praying for this baby'. So, at this very early age a bond was already in the making.

The family background was a model British colonial existence. In 1858, British Crown rule was established in India, following a century of control by the East India Company. The British ruled India for about 89 years, from 1858 until India and Pakistan gained independence in 1947—over a period known as the Raj.

Her father had attended Haileybury College, the training establishment founded in 1806 by the East India Company to prepare the administrative class for their colonial roles. After the East India College closed in 1858, Haileybury College was set up four years later, as a

boarding school for boys on the site. Haileybury was a good pathway to the India Army which was his ambition.

He finished his schooling in 1918, and, as Marjorie explained, always suffered from not having served in World War 1, having had the notion of dying for duty instilled in him. During the war, each Monday, the teachers read out the names of former pupils who had been killed in service the previous week. The pupils stood hearing these names and citations of people they had recently watched playing cricket. It was a traumatic period for him and he hardly ever spoke about it later in life.

When he left school, aged 18, he followed his ambition and went to India and joined the Indian army in which, as a white British soldier, he would have been superior in rank and status to any Indian.

Marjorie's mother was born in India and she met her father at a dance when he was 24. Life in India for the family was one of duty and maintaining status as the civilising, superior, white imperial race.

In 1888 a guidebook was published for young white memsahibs (term of deference for colonial wives and women by non-white people) arriving in India. Written by Annie Steel and Grace Gardiner, long-term colonial wives, *The Complete Indian Housekeeper and Cook* gave advice on managing a household as well as servants and is a fascinating—and shocking—insight into the memsahib frame of mind as well as establishing consistency of behaviours and attitudes (Steel & Gardiner, 1888/2011).

In his book *Inglorious Empire*, Shashi Tharoor (2018) points out the need by the colonial wives to demonstrate the Imperial lifestyle:

The British in India created little islands of Englishness, planting ferns and roses... They lived in bungalows in their own areas, known as cantonments and 'civil lines', separated from the 'Black Towns' where the locals lived; they kept to their clubs, to which Indians were not admitted; their loyalties remained wedded to their faraway homeland; their children were shipped off to the British public-school system and did not mingle with the 'natives'; their clothes and purchases came from Britain, as did their books and ideas. (p. 54)

As Tharoor points out there was rare acknowledgement of the existing skills, discovery, and development history (such as steel production, boat and gun design) and the proven talent of the Indians—the British were there for profit and rule.

'Before the war' Marjorie said, 'Mother was quite busy doing Red Cross work as well as tennis parties. During the war, she did a lot with St. Dunstan's for people who were blinded in the conflict. She knitted for the troops: it wasn't an easy environment.'

Much later in life as she examined her past, Marjorie recognised that her mother had lived with very conformist attitudes: 'My mother was quite racist, referring to "*the touch of the tar brush*" and that sort of stuff'. As did her father who declared that certain Indians could have



a meal with the family but not stay in the house. He totally embraced how the colonial system encouraged a sense of rigid superiority—there was no other way to rule.

Marjorie was aware of this contradiction from very early on: ‘In my heart was this nasty stuff I was brought up around, which I loathed from the time I was little. I loathed it. I loved Byah. I was absolutely with her, it was in my blood’. She was forced to live her life constrained by this dividing force between her mother and her Ayah: her relationship with her mother was complicated and even tortuous at times. It wasn’t until much later in her life she could unravel her mother’s own conflicts and secrets.

Life with Byah was one of routine and safety in the highly sensory and colourful environment that was India. The two sisters were woken, washed, and dressed by Byah, before going to breakfast. There was a lot of ‘prim and proper’ behaviour: all with the aim of remaining aloof from the real India and promoting a veneer of civilisation.

At a certain point in the morning, there would be a meeting with her mother to oversee some very traditional educational activities—reading, writing, ‘sums’, and some history and geography—all reflecting British culture. They did not go to school until they arrived in Britain.

‘If my mother was at home, I would have lunch with her. If not, Byah would sit while we had our lunch. She wouldn’t eat with us.’

Every afternoon they went to Lodhi Gardens (Figure 2), the huge park in the middle of Delhi where the children, accompanied by their Ayahs, would play and explore. Byah was always there to encourage, console, and be her pillar of safety and love. ‘I can’t think of a better word than being at ease with somebody. She was just there and loving and secure. Everything was safe, everything.’

**Figure 2. Lodhi Gardens, Delhi**



*Note.* From *Lodhi Garden, Delhi, India* [Photograph]. Tanviechpilani, 2016, Wikimedia ([https://commons.wikimedia.org/wiki/File:Lodhi\\_Garden,\\_Delhi,\\_India.jpg](https://commons.wikimedia.org/wiki/File:Lodhi_Garden,_Delhi,_India.jpg)). CC BY-SA 4.0.

Byah's name was Angeli. She didn't tell Marjorie much about her life. She'd been working with British families for many years. 'She was probably in her fifties: she was going grey because I remember how she used to do her hair.' Occasionally she would go off and see her mother. She would have left her family to work, although apparently, she had a son.

'I remember once when my mother was out, Byah took me to her quarters and I was appalled because she was in the servants' quarters in Delhi and it was a mud floor. And I asked, "Where's your bed?" And she said, "I haven't got a bed". She just had a mat on the floor and that shocked me. She showed me her Christian Bible, which had Indian illustrations in it, and she sat and read it to me.'

Her older sister had accepted and absorbed her parents' attitudes whereas Marjorie had, from an early age, instinctively resisted them: 'She was different and always thought in an upper-class manner. When she wanted fudge and the Cook or Byah said "No, not until 4 pm", she would then change her watch to demand fudge when she wanted it.' Marjorie was aware of her sister's conscious right to manipulate and order someone who is a servant, as opposed to respecting someone who looks after you. She would challenge her sister and explain it was the Cook's rest time.

'It's all difficult stuff... that degree of suppressing the empathy, because you believe that some people somehow are not worth it or not better than us. Or you believe deep down that you have an innate superiority that enables you or allows you to treat somebody exactly with a darker skin as inferior. It was awful to watch. My anti racism has a very emotional base. I've recognised that from refusing not to kiss Bayah. I hated my parents' racism.'

Marjorie's story reflects the significant changes in parenting styles during her lifetime. Her parents would have been brought up with a hangover from the Victorian era—children were to be seen not heard and obedience and punishment were the key drivers, with the cloak of duty wrapped around all activities. Parents saw their offspring as continuing and maintaining this line of duty and, perhaps for this very reason, not regarding their children as equals, friends, or companions; they felt justified in handing over their important early care to the very people they regarded as inferior and less civilised. This contradiction whereby the British colonials handed over their parental duties to native servants they regarded as inferior and uncivilised meant that the children often had a very different, more relaxed experience. Parents would not know or care about the stories, the songs, or the games the children learned.

For this same reason the children were returned to the homeland to go to boarding school. This institutionalised care and education ensured the desired consistency in behaviour, to instil these same disciplines and values into the next generation and avoid any resistance or interrogation of the life they were being given.

Without realising it, Marjorie's powerful attachment to Byah meant that she saw the world through a different lens to the rest of her family. A confused perspective that would challenge her for much of her life, geared as she was to conform to their way of thinking.

The big change and emotional rupture for Marjorie came when her father was posted back to England. The war ended on May 8, 1945. 'I remember exactly where we were in the house: I have flashbacks, exactly like photographs. My father came back from work and said: "We're going home"'.

'My Byah was always very quiet anyway with my parents and I never thought I would hear her stand up to him, but, very upset, she asked, "And what is going to happen to me?" She had already been with the family for 12 years'.

'And my father said, "Ah well, I'll see if I can get you to come back with us", but even then, I understood he never would. It was 1945. We couldn't have brought her with us back then. So he just lied to her. I remember it clearly because she was so upset. So was I: I hadn't ever thought of not having her with me.'

Her father was flown back to England. Her mother and Marjorie and her sister followed suit and sailed less than three weeks after the end of the war in late May.

It took three days on the train to get to the port in Mumbai (Bombay). The family had packed up swiftly in Delhi. Byah travelled on the train with them, but was never allowed to sleep in the compartment with the family. 'That was the last week I had with her because she came with us to the Deolali Camp, where we stayed for a few days. I'm so glad I had that time with her because my mother slept in one room with my sister, while Byah stayed in a room with me. She was sleeping on the floor. It was just very special seeing how she lived, which I hadn't seen before. We were sharing space, intimate space. It wasn't me being nosy. I was just hugging myself with delight. I remember feeling so good. It was just wonderful'. These last days with Byah—though she didn't fully understand it—gave Marjorie experiences of intimacy never previously allowed or tolerated.

The parting was appalling: the night before there were thousands and thousands of people preparing to leave. The ships had been changed into troop ships: people were stacked inside. On the top deck were civilians, and on the lower decks, 5,000 troops were being returned to England.

'The next day Byah left in a rickshaw that faced backwards. My sister and I stood, howling our eyes out, just watching her disappear down a dusty road into the distance. That's an awful memory. Her just sitting, looking backwards. And that was it. There was no sense of being able to stay in touch with her.'

'My mother had been in India for 45 years: she was born there. When we were leaving, she got malaria and she didn't want to tell anybody, which is why we saw an awful lot of Byah because she was taking care of us because my mother was ill. If she told anybody they would

have cancelled her passage and she would have had to wait for months. She went on to the boat with a temperature of about 104 and she waited until we were far enough out to report it to sick bay. After about 12 hours, they wouldn't turn the boat around. My sister, who was 12 and I, who was eight lived in our life jackets. We were on our own, which was also quite a novel experience.'

So, with the world in turmoil, the children, at an early age, were abruptly removed from the life they were used to and cut adrift from their primary caregiver. They were put on a packed troop ship to take them from India and bring them to a cold, northerly Britain and life in the institution of a boarding school. It was 1945. The Britain Marjorie came back to (which she had left at only seven months) was an immediate post-war Britain, struggling to recover from damage, challenged by economic hardship, and with basic necessities in short supply.

Once Marjorie had been torn from Byah—with no real understanding of what lay ahead of her—and brought to England, she had 15 months before being sent to boarding school. 'Until I was eight years old I did not attend school and lived in the love and warmth of India.' The long sea journey to London was followed by a few weeks of living with various relatives in different places, such as Tunbridge Wells: 'We stayed with them as long as they'd have us, and then we'd move on. Eventually we rented a house in Weybridge.'

Marjorie's ongoing relationship with her mother continued to hit unexplained and harsh barriers: 'About three months after we arrived a letter came with Indian stamps on it and I rushed into the hall. I picked up the letter and said to my mother "It's got Indian stamps. Is it from Byah?" And she took the letter out of my hand, and said, "No, Byah is dead", and walked out of the room'.

This shock was clearly something not to be discussed and that needed to be buried in Marjorie's psyche. Much later Marjorie would discover facts that would reveal her mother's own conflicted relationship with India, her identity, and her jealousy of Byah's bond with her daughter. That brusque revelation of Byah's death further terminated Marjorie's hopes of somehow being reunited with her. For her mother it was a complex mix of commodity and ill-will. Byah may not have travelled to London with the family—as did many of the Ayahs—but she was promptly wiped out of existence without any concern for the child's feelings.

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For the most part, childcare by Ayahs has been described from the child's perspective: the popular novel *The Secret Garden*, written in 1911 by Frances Hodgson Burnett (1911/2024), outlines how an unwanted child, Mary, is orphaned in India and brought back to England where, along with her upper-class cousin, she learns, through nature, to find love. The Ayahs are portrayed as servants through a distinct colonial mindset. Several film and TV versions of the book reflect these attitudes of arrogance, until the children learn to reflect just how unloved they are.

Very little was documented about the Ayahs and their own feelings—of their close emotional bonds formed with their wards, and the pain of having this bond broken and lost. The voice of the Ayah is virtually silent: despite the key significance for the children they cared for, they were invisible and considered insignificant. Just like the children packed off to boarding school, they were undervalued and rarely considered as individuals except in the memories of the colonial children.

It is only relatively recently that the full story of these caring women has been examined and revealed. In her book *Asians in Britain: 400 Years of History*, Rozina Visram (2002) reveals how the journeys back to Britain for colonial families required Ayahs to travel with them on the sea voyage of up to four months to look after the children, to be nurses and maids for their white memsahibs. An indication of how undervalued they were was that they were not given their own name on the ship's ticket but were labelled with their employer's name—as in Ayah Smith.

Once in London they were deemed unnecessary and dispensable—often to be replaced by English nannies. They were literally shown the door and had to fend for themselves, in an unknown city, with neither immediate help nor the promised return ticket to take them home. It was expected they would figure out how to survive, abandoned and put on the streets. If Ayah had travelled to Britain with the family, there is a high chance that she too would have been discarded.

While the Ayahs were dismissed and sent off to fend for themselves, the next step for the children, abruptly parted from their carers, was to be parcelled off to boarding schools.

In September of 1946, Marjorie, aged nine, was taken to boarding school and left there by her mother. The boarding schools were full to the brim because the post-war world was heavily disrupted with deaths and housing shortages, so she was boarded outside of the school in a private house full of other children. Marjorie's experience of being left there by her mother was very matter of fact: no explanation or reason or support was given, and it was expected that she would accept and adapt with no resistance or unhappiness.

'After being shown the way to school, I walked there on my own for 25 minutes each day, for a year. It was awful. I was then moved into the school's own boarding house. It was even worse. I was on my own when Matron came into the hall to pick up the new girls and take them to their dormitories. The dormitory had seven people. I was the eighth. Everybody was in the dormitory and Matron took me in and said, "This is a new girl who's coming into the dormitory." They stared in silence, and she said to me, "You're in that corner because nobody likes you."

'I stood up to her and said, "Nobody knows me." And she said, "Oh, we've all heard about you and the place you were at before", which I know wasn't true. Women like this Matron were embittered, single women who didn't have anywhere to live after the war. So they went to work in boarding schools.' It was 1947. Marjorie had to learn to survive under the rule of

teachers and staff who clearly saw these children as privileged offspring who needed to follow rules and obey.

Being sent to boarding school on returning to England was alien to 'normal living'. 'I found the lack of privacy, strict timing, and the loss of quiet thinking spaces all devastatingly awful', remembered Marjorie. She realised the need to fall in, follow the herd, and conform.

While at boarding school, Marjorie learned to repress her emotions—about the complete loss of Byah, about being abandoned at boarding school that gave her the feeling of being unloved—and unlovable. She quickly learned not to cry: it didn't help and crying brought reprimands, mockery, and bullying—with all the children fighting to survive in their own ways. Her innate sense of resistance or divergence was under great pressure to conform to the dominant patterns of behaviour belonging to the school, her family, and their social class.

At boarding school, she would experience the dislocation of her primary feelings, realising there was no anchor to turn to, no one who recognised her confusion and pain. The solution was to clamp down on any real feelings and turn her face towards the dominant mode of behaviour and compliance. 'I decided to cope on my own', she described, 'so I could not get hurt.'

Marjorie's story got more complicated as she contemplated the role of her mother and understood her jealousy of Byah, but there had never been any resolution. She had declared Byah was dead, but later, when Marjorie was around school leaving age she found her mother's address book and saw an address for Byah, next to her house-mistress' address. So her mother had in fact been in touch with Byah but had chosen to terminate the bond and never once told her daughter that her Ayah was still alive. This was yet another blow for Marjorie who had to live with not only her own conflicting drives between the emotional bonds she had for Byah and the duty she owed her parents, but also the harsh and complicated attitude her mother clearly felt towards Byah. Reconciling all these contradictions felt impossible: it was better to bury. Marjorie was to live her next decades constrained by this divisive turmoil.

She then followed a life path predetermined for her by her parents' mindset. Four weeks after school she trained as an orthopaedic nurse. She felt fortunate to find work that she enjoyed. She married a man, had children—and life continued down a model pathway. Except that gradually her inner discord began to surface: 'I was married for 34 years. I thought it was acceptable to marry someone who never once said he loved me.'

Gradually the relationship began to disintegrate, with both of them not fully understanding how the experiences of their highly formative young lives were surfacing in confusion and degrees of depression. Both were numbed and unable to express real emotions. They divorced. This was a pivotal point for Marjorie to begin exploring and unravelling her life.

Drawn strongly to help and work with children, Marjorie always worked with them in several different roles.

She formed a new relationship with someone she had met decades before and who had tracked her down. He recognised the very difficult time she was having and suggested she should seek help.

‘When I was 54, I realised I was using work as the left-over survival strategy from school and I took the major step of starting therapy to look at my boarding—and childhood issues. I left all previous work, went to university, and started working as a volunteer at a children’s charity. I continued to work there for ten years, moving on to be a member of staff.’

She read a newspaper article in which Nick Duffell had written about boarding school men who were typically ‘confident, arrogant, and brittle’. The word brittle really hit her and took her back to her boarding school days, thinking of the shell she had surrounded herself with that could so easily be cracked to reveal a mass of repressed emotion.

Duffell (2000), a therapist, was one of the first to examine the ‘privileged’ trauma of children sent away to what were very tough environments for children back in the 1930s and later. Marjorie went to see Duffell and realised he could help her because he could understand her blocked emotional and mental state. She then continued to see him for four or five years, working with him to acknowledge and untangle all the conflicting layers of her earlier years.

‘All this stuff comes out much, much later in life and I’ve felt more settled and assured in the last 10–12 years. I’m 86 now. It can take an awfully long time. The key thing we are left with is that we’re unlovable. Once you feel you are unlovable, then so much else goes wrong because you think nobody likes you too. It’s a very hostile sort of thing. I coined the phrase “inappropriately independent”. You’ve just got to get your shoes on and carry on.’

At the time, Nick Duffell was running workshops for people who were coming unstuck later in life after boarding school. He was beginning to formulate the presence of a state of mind that he recognised in children who had been sent to boarding school and whose emotions were largely suppressed during this time. Very often they only began to explore these hidden feelings much later in life, when precisely this state of mind led to relationship trouble and to feelings of loss and abandonment with resulting confusion and anger. These feelings had never been processed.

Joy Schaverien (2011), author and analyst, first coined the phrase Boarding School Syndrome when her clients talked about deeply repressed feelings: ‘The learned behaviours and discontents that result in Boarding School Syndrome revolve around problems with intimacy. Whilst appearing socially confident the ex-boarder... [may] make deeply dependent relationships and then ...emotionally, or actually, abandon the loved person. This cutting off from emotional need may be experienced by the partner as a violent attack or an abrupt

rejection’ (p. 140). She outlines key principles of A, B, C, and D—abandonment, bereavement, and captivity, which in turn cause dissociation.

Since 1990, Duffell and Joy Schaverien have worked therapeutically with thousands of ‘boarding school survivors’. In an article in *The Guardian* (2024), Duffell outlined the ‘normalised neglect as the context in which such abuse regularly occurs and compensated survival is inevitable’ (para. 3).

Boarding School Syndrome was difficult to talk about for older ex-boarders. The main reason being that these children led privileged lives through their catered upbringing, wide open opportunities for work, wealth, and also membership of belonging to a club-like environment whose foundations were never questioned. Marriages were informally arranged through social status and parenting patterns repeated.

‘Nick raised the level of discussion. He lifted it entirely upwards to talking about intergenerational trauma and this lack of empathy from people in power. The disconnect between your sense of current status and your vulnerability as a child is vast. You’re told you’re the best. You’re the top. You’re the cream. We need to understand more about this process of rupture, followed by institutionalisation. For a long time we had Tory people making decisions about us who are in positions of power but who actually don’t care about us.’

Duffell explained to Marjorie that there was a real need for follow-through after the workshops, somewhere people could go to share stories and collectively process many of the traumas suppressed from early life, in order to retrieve a sense of balance.

As Marjorie worked with Nick to process her personal history, she combined it with her professional experience of helping people and it became clear that a more public forum was needed, a chance for those who suffered from boarding school years to share their stories and be able to revisit and process some of the pain they experienced. A group of other ex-boarders formed the Boarding School Survivors–Support (BSS-S) in 2003 (<https://www.bss-support.org.uk/>). They were able to share stories and help—complemented by one-on-one therapy—to untangle a complex range of emotions.

‘The support group has now been going for over 20 years. It took time to establish, but the group has newsletters and a conference every year. From being a taboo subject, it’s become much more talked about. It helped enormously reduce my sense of isolation. What I took from boarding was that it was an unhappy way to spend my school years and that I was unloveable and “different” because of my childhood.’

The emerging stories of former boarders are important for understanding the lasting and long-term effects of sending children away from home to boarding school where they are taught they are part of a privileged elite, superior to the rest of society. This effect was more pronounced through the 20<sup>th</sup> century, especially pre-internet, when children were more



isolated—but if we accept that there is damage from these fee-paying divisions, then we should acknowledge how it affects the social fabric and policy decisions made by individuals (including key players in politics and industry) who have not processed their superiority and lack of empathy.

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As Marjorie shared experiences with former boarders, she discovered that—in parallel—there were other steps forward being taken to acknowledge the role and significance of the many Ayahs who had cared for colonial children. This was important for her to resolve her sense of loss about her Ayah and her early years.

Between 1890 and 1940, over 1200 Ayahs, as well, it must be added, the Amahs who had cared for children in the East Asian colonies, entered Britain on international ships as British administrators travelled back and forth to the Indian and South East Asian colonial provinces. Most of the Ayahs were dismissed on arrival and abandoned. This destitution was gradually noted by concerned white British women, who felt that Christian duty should be applied to these abandoned women and decided to create a refuge that would not only give them a roof but also civilise the heathen other.

Mentions of the first hostel for Ayahs appeared in the 1890s after it was founded in 1891 by Mr and Mrs Rogers in Jewry Street, in Aldgate in East London. This was subsequently moved to Hackney (Figure 3) by the London City Mission. This was also because in 1909 the India Office—the British government department created in 1858 to oversee the administration of the colonial provinces in India—finally, after nearly 30 years of failing to support destitute Indians, established a Committee on Distressed Colonial and Indian Subjects (Visram, 2002).

In 1921 the Home was moved again to a larger house in King Edward Road also in Hackney (Figure 4). This Ayahs' Home had 30 rooms and could accommodate over 100 women. The Home not only gave sanctuary to the Ayahs, it also served as an 'employment agency' finding return passages with new families.

**Figure 3. *Ayahs and Amahs in the refuge in Hackney***



*Note.* From *Ayah's Home, Hackney* [Photograph], Author unknown, 1901, Wikimedia ([https://commons.wikimedia.org/wiki/File:Ayahs%27\\_Home,\\_Hackney.jpg](https://commons.wikimedia.org/wiki/File:Ayahs%27_Home,_Hackney.jpg)). Image in the public domain.

**Figure 4. *Ayahs' Home 4 King Edward Road, Hackney, circa. 1921***



*Note.* From *Ayah's Home 4 King Edward Road, Hackney* [Photograph], Author unknown, c. 1921, Wikimedia ([https://commons.wikimedia.org/wiki/File:Ayahs%27\\_Home\\_4\\_King\\_Edward\\_Road,\\_Hackney.jpg](https://commons.wikimedia.org/wiki/File:Ayahs%27_Home_4_King_Edward_Road,_Hackney.jpg)). Image in the public domain.

One recent move to acknowledge the Indian Ayahs was the campaign to install a Blue Plaque on the building that had housed the Ayah's Home in Hackney. Art historian Farhana Bello (née Mamoojee) came across certain historical family portraits in which an Ayah would be present, next to children, part of the family but never credited. She found out about the Ayah's Home and, with extraordinary tenacity, set about campaigning to have the building (now a block of flats) designated with a Blue Plaque.

In June, 2022, after a lengthy campaign, a Blue Plaque (Figure 5) was unveiled on the building known as the Ayahs' Home in Hackney (English Heritage, 2022). English Heritage, who administer the choice of plaques, has been working hard to break with the long convention of lauding 'notable' and 'prominent' individuals and to aim for a broader representation of social achievement. The plaque for the Ayahs represents a significant shift in our public memorialisation of the past: not only were they women of colour (in 2022 only 14% of English Heritage plaques represented women and 4% of people of colour; Visit Heritage, n.d.a, n.d.b) but they were also stripped of their identity: until 1922, the ship's documents registered most of the Ayahs as Ayah X—the name of their employer. So this Blue Plaque is a memorial to a number of largely anonymous and offensively undervalued women, playing a key role in the early development of colonial children, who were then abandoned in the 'Home' country.

**Figure 5. English Heritage Blue plaque for the Ayahs' Home**



*Note.* From *The Ayahs' Home for nannies and nursemaids from Asia was based here 1900–1921*

[Photograph]. Spudgun67, 2022, Wikimedia

([https://commons.wikimedia.org/wiki/File:The\\_AYAHS%E2%80%99\\_HOME\\_for\\_nannies\\_and\\_nursemaids\\_from\\_Asia\\_was\\_based\\_here\\_1900%E2%80%931921.jpg](https://commons.wikimedia.org/wiki/File:The_AYAHS%E2%80%99_HOME_for_nannies_and_nursemaids_from_Asia_was_based_here_1900%E2%80%931921.jpg)). CC BY-SA 4.0.

While campaigning for the Blue Plaque, Farhana (Mamoojee) Bello also set up an Instagram account (@ayahshome) documenting her research. She also gave talks and curated an exhibition in Hackney Town Hall delving deeper into the history and interviewing men and women who still clung to their memories of their Ayahs. These memoirs from British children reveal the deep attachments with their Ayahs: just as it was a rupture for the child to lose the constant care of the Ayah, so the Ayah—often a single woman with no children—was cut off from the child with whom she had formed a deep attachment and could no longer contact. The pain was mutual and lasting.

In his book *The Intimate Enemy*, the Indian political psychologist Ashis Nandy (1983) wrote of the loss and recovery of self under colonialism: reversing a trend to focus on the colonised, he talks of both the coloniser as well as the colonised. He looked at the psychological problems engendered by the colonial process and this becomes relevant when we understand more about the conflicting nature of white, British children cared for by Ayahs. The Blue Plaque honours the carers: we need also to understand the impact on the children.

As women also began to acknowledge the role of the Ayahs, several writers explored this aspect of colonial childcare in novels and plays: Sita Bramachari's (2022) teen novel *When Secrets Set Sail* centres on two south Asian teenage girls—one adopted, one whose

grandmother has just died. Together they discover that the house they live in was once the refuge for the abandoned Ayahs. The girls begin to decipher secrets from the past in the house and, guided by helpful ghostly spirits, they gradually discover the real stories of the people who had lived in their house. They follow a detective trail that has them uncovering the injustice towards one Ayah and her story of being reunited, when very ill, with her beloved charge who had become one of the first Asian women doctors at the Elizabeth Garrett Anderson Hospital for women. The contemporary perspective interweaves past and present truths of immigrants coming to Britain and their struggles to find respect and peace instead of offence and wrongdoing.

Tanika Gupta's (2013) play *The Empress* entwines the story of a young discarded Ayah and a lascar (Asian seaman employed on European ships) with that of Queen Victoria and her chosen Indian servant, later tutor, Abdul Karim. This stage drama centres on the struggle for Victorian Indians to survive in a hostile and exploitative Britain. In *An Ayah's Choice*, Shahida Rahman (2022) outlines the turbulent tale of a young Indian woman, full of ambition, who, as an Ayah, embarks on a relationship with a white colonial employer and arrives in London to witness the rise of the Suffragettes and make difficult choices.

The value and the perspective of the Ayahs has now been acknowledged in ways that could only have happened as Britain confronts our Imperial past and recognises how our history has shaped our superior white attitudes. As the American futurologist Alvin Toffler predicted in his 1970 book *Future Shock*: 'The illiterate of the 21<sup>st</sup> century will not be those who cannot read and write, but those who cannot learn, unlearn, and relearn' (Ratcliffe, 2016, para. 2).

Marjorie entered this arena of understanding with enthusiasm and a sense of both grief and gratitude for the accelerated re-evaluation of Britain's colonial past. As Salman Rushdie so cleverly put it—lifting and redirecting a phrase from 'Star Wars'—the Empire was writing back!

Another factor was to emerge during the years of therapy that would help Marjorie understand her mother's tricky and conflicted relationship with both Byah and India. This was an added complexity to Marjorie's story but one which has helped bring a degree of closure. Marjorie chose to do a DNA test for interest, when they became easily available, and the results showed she had Indian blood. 'I'm 6% Indian. It turns out my mother was 12.5% Indian and my grandfather 25%.' She was very happy to learn this.

This discovery after her mother's death made it easier for Marjorie to look back at her life and feel a deep sense of reconciliation with her divided loyalties.

Marjorie, in her new stage of understanding and processing could now decipher her mother's conflicted attitudes: the pressure of white social superiority and guarding a secret she could never reveal forced her to become rigorously formal in her relationships with Indians. She assumed and protected her identity of a white British colonial wife and mother by staying aloof to real Indian life and people and not relaxing on the rules.

For Marjorie this discovery was also a highly significant way of viewing her mother's racism as well as her conflicted relationship with Byah. She realised how resentful her mother had been of Byah's intimacy and emotional closeness with her daughter. It also meant that Marjorie could, in her mind, renew her attachment with Byah and grieve in a different fashion knowing she had this deeper link and was also able to feel this was a reason she had resisted her family's racism.

'I am sure my beliefs about how to care for and about people comes directly from Byah. I have also finally worked out that what I put up with when I was nine to 17—a mixture of neglect and boarding school trauma—did not become my ruling influence and pattern for adulthood. During my most formative years, from seven months until I was eight years old I had the most stable and perfect example of love and the "right" way to think about others and behave. Byah's teaching was firm and strong enough for me to hold onto for life. If any credit is due, it belongs to her!'

In 2009, Marjorie went back to India with her daughter. When she entered Delhi Airport she found tears streaming down her face: 'It sounded like music to me. It was extraordinary. I got out with all this language around me and it converted into a beautiful, beautiful sound.' There had been enormous change, but still the same rich sensory environment in which her childhood and memories were rooted.

Her daughter wanted to see the house where she had lived in the '1930s Lutyens-style bungalow zone' and found it along with the tree she used to kiss goodbye to.

When they went to the hotel close to where she had lived, there was a doorman at the front in a military uniform who said, 'Welcome to the hotel, Madam' and Marjorie looked up at him and responded, 'But I'm coming home!' He took her hand and when he asked when she had last been here, she told him '64 years ago!'

The next day she asked him how to get to the Lodhi Gardens and he showed them on a map how to walk down the central roads towards the park's principal entrance. However, as memories of her childhood routine surfaced, she turned away from the main streets, followed by her daughter, and worked her way down a busy lane, then another, till she was in front of a doorway. She reached out and turned the handle and opened the door into the back of the familiar, unchanged Lodhi Gardens. Using her memory of the shortcut, she was back in her place of play and safety. Time stood still: she could bring all she had surfaced, shared, relearned, and processed to a place in her mind of love and care. With Byah at her side.

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## ACKNOWLEDGEMENTS

Thanks to Sita Bramachari, Clare Lewis, and Joy Schaverien for their support in writing this article.

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In 2018, using her decades of experience across different industries, she took time to step back and look at the bigger picture.

In 2020 she made a significant personal visit to Montgomery, Alabama to visit Bryan Stevenson's National Memorial for Peace and Justice. This triggered a strong desire to explore Britain's Imperial legacy, and she embarked on an MA at Birkbeck in Culture, Diaspora and Ethnicity, as well as engaging in anti-racist training and working on projects relating to our contemporary uncertainty, divisiveness, and confusion. She has written several articles on this subject for Byline Times: <https://bylinetimes.com/author/hannahcharlton/> (Image credit: Barry Lewis.)