At Sage we take sustainability seriously. Most of our products are printed in the UK using responsibly sourced papers and boards. When we print overseas we ensure sustainable papers are used as measured by the Paper Chain Project grading system. We undertake an annual audit to monitor our sustainability.
CONTENTS

About the Editors and Contributors vii
Acknowledgements xiii

Part 1: Social justice theory in psychological therapies 3
1 An Introduction to Social Justice in Psychological Therapies
Divine Charura and Laura Anne Winter
2 Engaging with Minoritised and Racialised Communities
‘Inside the Sentence’
Olga Oulanova, Jenny Hui and Roy Moodley
3 Identity and Intersectionality
Colin Lago
4 The Individual in Context
Byron Al-Murri and Jasmine Childs-Fegredo
5 Integrating the Psychological and the Socio-Political:
A Directional Framework
Mick Cooper

Part 2: Social justice informed therapeutic practice 63
6 Core Principles for Social Justice Informed Therapeutic Work
Laura Anne Winter and Divine Charura
7 Social Justice Informed Therapy and Racially Minoritised Individuals
Nahid Nasrat and Maryam Riaz
8 Social Justice Informed Therapy and Social Class
Rachael Goodwin
9 Social Justice Informed Therapy and Visible and Invisible Disabilities
Esther Ingham
10 Social Justice Informed Therapy and Neurodiversity
Stephanie Petty, Lorna Hamilton, Brett Heasman and Natasha Fibresima
CONTENTS

11 Social Justice Informed Therapy and Gender
   Lynne Gabriel 126

12 Social Justice Informed Therapy and Sexuality
   Silva Neves 138

13 Social Justice Informed Therapy with Refugees and Asylum Seekers
   Anne Burghgraef 150

14 Therapy in the Shadow of the Climate and Environmental Crisis
   Martin Milton 163

Part 3: Beyond the therapy room

15 Advocacy and Working with Individual Clients beyond Traditional
   Therapy Models
   Courtland C. Lee and Marja Humphrey 179

16 Social Justice in Clinical Supervision
   Dwight Turner 189

17 Critical Community Psychology and Participatory Action Research
   Eden Lunghy, Sally Zlotowitz and Lita Wallis 198

18 Influencing Policy and Socio-Political Change
   Dan O’Hare and Melernie Meheux 210

Postscript 222

Index 226
5
INTEGRATING THE PSYCHOLOGICAL AND THE SOCIO-POLITICAL: A DIRECTIONAL FRAMEWORK

Mick Cooper

OVERVIEW

To develop a social justice agenda in the psychological therapies, we need models of well-being and distress that take socio-political factors into account. The directional framework presented in this chapter is one attempt to integrate psychological and socio-political understandings. The basis for this framework is that human beings are agentic and purposeful, striving to realise their needs and wants. People experience distress when they fail to realise their most important needs and wants, and this can be for socio-political or psychological reasons. Hence, both socio-political or psychological channels can be means for ameliorating distress. There are striking parallels between positive change processes at the psychological level and the socio-political level: developing an understanding of such processes can help to advance psychological, social and global wellbeing and justice.

BASIC THEORETICAL PRINCIPLES

How do we conceptualise human beings? It is clear from the empirical evidence that socio-political factors – such as homophobia, poverty and political oppression – are key sources of psychological misery. But how do we develop psychological understandings – rich, complex and compelling – that have such factors at their very heart?
The Apoliticism of Classic Therapy Models

Today, the dominant models in the psychological therapies are almost exclusively apolitical. This is not to say that they deny the influence of socio-political factors, but the influence of such forces is conceptualised outside of the predominant theories of distress. Take, for instance, Rogers’ (1959) classic theory of development. Rogers’ approach is an avowedly ‘humanistic’ model, with an explicit orientation to such liberal concerns as individual freedom, self-worth and growth. Yet, here, the origins of distress are located in the ‘conditional positive regard’ that parents, carers or other significant individuals hold for an infant, and not in wider socio-political structures. Certainly, in Rogers’ classic theory, sexism, homophobia or other forms of prejudice may affect an individual through the expectations placed upon their experiencing (for instance, ‘Women should be meek and not feel anger’). But structural, ‘real world’ factors – such as poverty, racial discrimination or the threat of gender-based violence – do not have an explicit place in Rogers’ developmental model. Only in more recent years, in the person-centred field, has work been done on racialised and gendered conditions of worth (e.g., Chantler, 2005; Proctor, 2008). Another example is cognitive-behavioural therapy (CBT). Here, distress is classically conceptualised in terms of ‘distorted’ thinking, such as making false over-generalisations (for instance, ‘If one person at a party does not like me, then everyone hates me’) (Beck et al., 1979). Again, this does not deny the role that socio-political factors may have on wellbeing or distress, but there is no specific place for them in the classic models. Even contemporary forms of CBT, such as acceptance and commitment therapy, tend to locate distress around such intrapersonal processes as ‘psychological flexibility’, rather than conceptualising how socio-political factors can have a profound impact on wellbeing.

Throughout the history of the psychological therapies, however, there have also been attempts to develop models with a socio-political and social justice core (for an excellent review, see Totton, 2000). Adler, for instance, developed an approach oriented around a human need for community and social connectedness, with an appreciation of the ‘inferiority complexes’ that can emerge when people are not treated as equal human beings. In the latter part of the twentieth century, feminist clinicians developed ‘relational-cultural’ models of therapy (e.g., Jordan et al., 1991), which recognised the crucial role that gender and cultural factors can have on an individual’s development. Most recently, there is the Power Threat Meaning Framework, published by the British Psychological Society’s Division of Clinical Psychology (Johnstone et al., 2018). This is a strengths-based alternative to the medical model that locates psychological difficulties in the social adversities, threats and abuses people face, rather than in people’s internal ‘deficiencies’.

This chapter presents a framework for integrating the psychological with the socio-political that is aligned with such developments but has several distinctive features (Cooper, 2019, 2021, 2023). First, grounded in a ‘pluralistic’ approach to therapy (Cooper & McLeod, 2011), it strives to be inclusive to all models of psychological therapy, including humanistic, psychodynamic, cognitive-behavioural, and existential. Second, in
contrast to some of the earlier models of psychological and socio-political integration, it draws extensively from contemporary psychological theory and evidence. Third, going beyond ‘surface-level’ links between socio-political factors and wellbeing, it aims to tie socio-political thinking to an understanding of people at the deepest existential levels. Fourth, as well as understanding people within their socio-political context, it strives to develop parallels between psychological and socio-political levels of functioning, developing broader, systemic principles of what is ‘good’.

The aim of this framework is not to construct a new model, but to create a language and set of concepts through which we can bring together many different pre-existing understandings. In essence, it is striving to ‘get underneath’ such understandings and to articulate their fundamental principles, so that we can develop more comprehensive, meaningful and effective models of social and psychological analysis and change.

**Directionality: An Integrating Theoretical Construct**

The starting point for this framework is an understanding of human existence as directional: that is, agentic, intentional and purpose-oriented. This is an understanding of human beings derived from existential and humanistic thinking, but shared – in different terminologies and conceptualisations – across the psychological therapies. To see human existence as directional is to challenge the assumption that human beings are passive, sponge-like ‘things’; blank screens; or machine-like automatons. Rather, it holds that we are all, always, intentionally reaching out towards our worlds: striving along particular lines of direction. These directions can range from long-term, explicitly-set objectives (such as completing a book) to implicit, bodily-desires, motivations and instincts (such as desiring food). But to describe human beings as directional is to say that there are always needs and wants behind what we do.

While directionality is manifest as an individual’s needs and wants, these directions do not reside ‘within’ the person, but between the person and their world. Every desire needs something desired; and these ‘directional objects’ are as integral to the direction as the ‘inner’ impulse itself. This in-the-world-ness of directionality is essential to emphasise because it sets the basis for understanding distress and wellbeing in socio-political, as well as psychological, terms. Directionality is also in-the-world in the sense that the directions we adopt are often – and, perhaps, always – infused with the meanings, values and directions of those around us. Hence, the directional framework is consistent with both realist understandings of human being and also more socially constructionist ones.

**A ‘Hierarchy’ of Directions**

A basic assumption amongst many psychological and psychotherapist theorists (e.g., Powers, 1973) is that directions can be conceptualised as existing in a hierarchical
Integrating the Psychological and the Socio-Political

structure. Here, there are a small number of highest-order directions (for instance, for relatedness), beneath which are lower-order ‘sub-directions’ (for instance, ‘to spend time with my partner’, ‘to play with my children’). These, then, have further sub-sub-directions (for instance, ‘To book a restaurant’); cascading down to the lowest-order needs and wants (for instance, ‘to move my fingers to type out the restaurant booking form’).

Within such structures, lower-order directions can be considered the means by which individuals try to realise their higher-order directions. Conversely, higher-order directions form the reference value for lower-order directions. Hence, as we go up the hierarchy, we ask ‘why?’ something is done. By contrast, when we go down the vertical hierarchy, we ask ‘how?’ something is done.

Different psychotherapeutic models have posited different needs and wants as being of the ultimate highest order. For instance, the person-centred approach argues that it is actualisation, logotherapists argue that it is meaning (Frankl, 1986). In the psychological field, numerous different models of highest-order directions have also been posited, such as self-determination theory’s relatedness, autonomy and competence (Ryan & Deci, 2000). There are few today, however, that would claim that there is one, ultimate, highest-order direction for all. It is recognised, for instance, that highest-order directions are likely to vary across cultures (with Global South cultures, for instance, tending to place greater emphasis on community over individuality, as compared with Global North cultures); and considerable variation may also exist at the individual level. Furthermore, as Berlin (2003) argues, the hallmark of a democratic society is that each person, or each community, has the right to determine its own highest-order directions for itself.

Wellbeing as the Realisation of Highest-Order Directions

From this standpoint, and drawing on the empirical evidence (see Cooper, 2019), we can say that wellbeing is the extent to which an individual can realise those needs and wants that are of the highest order to them. A good life, then, might be one in which we have our physical needs met; feel safe, free and of worth; and experience happiness, relatedness, growth and a sense of meaning. ‘Realising’ our needs and wants, however, does not just mean achieving them; it also means being oriented towards something (rather than having a sense of purposelessness), progressing towards our realisation of them, feeling confident we can achieve them and then being able to celebrate their achievement.

RELEVANCE TO SOCIAL JUSTICE IN THE PSYCHOLOGICAL PROFESSIONS

The principles outlined here – that human beings are directional, and that wellbeing is the realisation of our highest-order directions – has the potential to serve as the basis for an integrated psychological and socio-political understanding of psychological distress; and the means by which such distress may be ameliorated.
The Origins of Psychological Distress

If wellbeing is the realisation of our highest-order directions, then psychological distress is the failure to realise such needs and wants. Why might this come about? Three basic sources of psychological distress can be proposed: the first socio-political (a lack of external resources) and the second and third more intrapersonal (intrapersonal conflicts and ineffective means towards ends). These sources, however, are fundamentally interlinked: in particular, the more limited the external resources, the more likely individuals may be to experience intrapersonal conflicts, and/or to adopt ineffective means towards their ends.

Lack of External Resources

The most obvious reason for failing to realise our directions – and one that social justice advocates will be acutely aware of – is a lack of external resources. Poverty, insecure housing, back-breaking working conditions: all are examples of socio-economic conditions that limit people’s abilities to realise such directions as safety, pleasure or growth (Cooper, 2021). These external limitations may not just be material. Domestic violence, for instance, can be understood as a situation in which a person’s interpersonal context violates – rather than sustains – their need for safety; homophobia can be considered a context in which lesbian and gay people must struggle for security, autonomy and self-worth.

Of course, as Marcuse (1966) states, the fundamental fact of scarcity means that the struggle for existence will inevitably take place ‘in a world too poor for the satisfaction of human needs without constant restraint, renunciation, delay’ (p. 42). Put more prosaically, we cannot always get what we want. But restrictions such as insecure housing or homophobia are what Marcuse (1966) terms ‘surplus repression’, in that they do not need to be there. Rather, in this instance, there is the possibility of creating a more ‘resource-rich’ world: one in which all people can have decent homes, or live without the threat of violence.

Intrapersonal Conflicts

Yet limited external resources cannot explain all psychological distress. Why is it, for instance, that two people with seemingly equal levels of resources can experience such different levels of distress? Similarly, why is it that some people with access to every possible resource can still be so miserable, while others that have ‘nothing’ can experience such satisfaction and fulfilment? As psychological therapists, we know the reality of these ‘paradoxes’ every day in our therapy rooms: a wholly socially determinist account of mental distress, from a psychological therapy perspective, is just not accurate, compelling or complete.
A concept that can add here to an understanding of the aetiology of distress, pervasive across the psychological therapies (albeit, often, implicitly), is that of intrapersonal conflicts. This conflict is seen as taking different forms. In the Freudian school, this conflict is between ‘id’ and ‘superego’; for person-centred, between self-concept and actual experiencing; for CBT, between short-term heuristics and longer-term rational thought. A conflict that, as psychological therapists, we frequently witness is between a person’s desire to be close to others (a direction towards relatedness), and a fear that they will be damaged or hurt if they do so (a direction towards safety). In such examples, opposing needs and wants are present at the same time, but conflicts can also be between ‘parts’ or ‘voices’ that take over at different times. For example, a client may become consumed with a desire for revenge (‘No-one should be able to treat me like that’), and only later shift into the opposing position (‘I’m terrified people hate me for being angry’). When a person becomes ‘taken over’ by a particular direction, to the exclusion of all other needs and wants, we can describe that direction as going rogue (Cooper, 2019).

As at the interface between person and society, we can never realise all of our needs and wants all of the time: some degree of ‘restraint’, ‘renunciation’ and ‘delay’ is inevitable. Indeed, existential therapists have emphasised the need to accept such conflicts as part of living, rather than striving to attain a conflict-free and entirely harmonious life. But, again, the problem is where there is ‘surplus conflict’: more discord between a person’s needs and wants than there needs to be. A client, for instance, might be pulled between wanting to present a confident front to the world, and desperately yearning for love, care and affection from others. In a relatively ‘functional’ configuration, the person may be able to recognise both needs, and move fluently between them. Less functionally – and as an example of surplus conflict – the person’s ‘confident’ side may despise and berate their vulnerability: ‘I hate you inside of me and I hate what you reveal to other people. I just want to destroy you’.

Here the role of a therapist – of any orientation – is to help the person move towards less conflictual, and more cooperative, solutions. We help clients, within their given circumstances, to bring such conflicts to the fore, and then look at ways in which more of their highest-order needs and wants can be met more of the time. This might be through, for instance, ‘two-chair work’, in which the person’s confident side can listen to their vulnerable side and find mutually compatible solutions. Alternatively, a therapist might use such strategies as interpretation, to help the client understand what they are unconsciously striving for, such that they can find more constructive ways of progressing towards it.

Such cooperative solutions can also be termed synergetic. Here, in abstract terms, $1 + 1 > 2$. That is, two sets of needs and wants can come together and make something ‘more than’ than either direction alone. They support each other, pull in similar directions. The opposite to this – another term for unproductive conflicts – is dysergies, where $1 + 1 < 2$. Here, where you get one need or want met, you undermine the achievement of others. ‘Synergies’ and ‘dysergies’ are useful concepts when we begin to consider the
maximisation of wellbeing across different levels of organisation (see below), because they indicate how we can get more (or less) benefit within the same set of resources.

**Ineffective Means**

Across the psychotherapeutic fields, there is also an understanding that sometimes people fail to realise their higher-order needs and wants because the lower-order means that they adopt to try and get there are just not very effective. Take the example of a person who is trying to get rid of panic attacks. As they start to feel anxiety, the person grits their teeth and tries to compel themselves not to feel anxiety. Such a response is totally understandable – I know it myself very well when I used to get panic attacks – but the problem is that it generally has the opposite effect: we become more afraid that we will panic, and so our symptoms (like feeling nauseous) worsen, leading to an ever-tightening vicious spiral. In fact, as behavioural therapy teaches us, when people are starting to panic, they are generally better off saying to themselves things like, ‘If I have a panic attack, then that’s OK, I will survive’, which can then defuse the cycle. But this is not something we are born knowing, and it is not something that is absent because of our socio-economic context.

In some instances, ineffective strategies may have arisen because we have learnt ways of doing things in the past that are no longer ‘fit for purpose’ in the present. This is, de facto, the basis for many counselling and psychotherapy practices: helping clients trace back dysfunctional thoughts, feelings and actions to their childhoods; and finding ways of being that are more ‘fitted to’ their current circumstances.

**Ameliorating Distress**

So how can we help people who are distressed? The three factors described above point to an understanding that fluently integrates psychological and socio-political strategies. If people are experiencing distress because their external circumstances do not allow them to realise their needs and wants, then there is a need to change those external circumstances – through, for instance, advocacy – so that the person can have more of what they need and want more of the time. But if people are experiencing distress because their directions are configured in dysergetic ways, then therapeutic strategies may be needed to help the person find more cooperative and synergetic modes of intrapersonal cooperation. And, if the problem is that the person is striving through ineffective means, then psychoeducation or other forms of self-reflection may be most helpful in supporting change. Different ameliorating strategies, then, suit different types of problems, but there is no conceptual break between them. Rather, they are all means of helping people realise what they need and want more of the time: sometimes with a focus on the external correlates of this direction, sometimes with more of a focus on the internal correlates.
Mapping across Psychological and Socio-Political Levels of Organisation

Directionality and Wellbeing at Higher Levels of Organisation

There is a second way in which this framework allows us to integrate the psychological and socio-political: by creating a model of intrapsychic processes – of multiple, interacting directions or ‘agencies’ – that can be closely aligned to ways of understanding processes on the interpersonal plane.

Koestler’s (1967) concept of a holarchy is useful here. Koestler envisioned different levels of organisation (such as the self, the community or the nation), with the ‘organising unit’ at each level sitting within an open-ended hierarchical structure (see, for instance, Figure 5.1). Here, higher-level organising units are made up of lower-level units. So, for instance, the individual is made up of intrapersonal directions, the family is made up of individuals, and the community is made up of families. But because the higher-level units are formed through the relationships between the lower-level units, they are never simply reducible to them. This means, then, that at each level of organisation, the units can be considered functioning whole – self-regulating and semi-autonomous – with none more ‘real’ or significant than the others.

Such a model opens up the possibility that we can articulate concepts and processes that are common across different levels of organisation: that is, we can understand such phenomena ‘systemically’, in terms of abstract, structural principles. And, indeed, the core principles discussed so far in this chapter can all be seen as transposable to levels of organisation beyond the individual. Directionality, for instance, can be considered a quality of organisational units across multiple levels: whether an organisation’s

![Figure 5.1](image-url)
‘mission’, or the needs and interests of different social classes. And, as at the individual level, the ‘wellbeing’ of each unit of organisation can be conceptualised in terms of the maximal realisation of its needs and wants. A family or community, for instance, succeeds to the extent that it achieves its goals for safety, prosperity or creativity. The success of any one organising unit, however, only serves the common good to the extent that it contributes to the maximal realisation of directions at higher levels of organisation. This, then, brings us back to the issue of synergetic and dysergetic modes of relating; and whether the realisation of one unit of organisation’s directions is supportive, or undermining, of the realisation of another’s. Racism, for instance, can be understood as one form of inter-community dysergy. Here, one group may actualise its desires (for instance, for self-worth) but at the expense of many other communities’ needs and wants (for instance, for self-worth, safety and freedom). Capitalism, of course, is another form of dysergy, this time between classes. Indeed, capitalism can be understood as a rogue goal at the inter-class level, in which one group’s social interests take over to the exclusion of all others. And, of course, war – the social ill that causes an abundance of misery, terror and loss – can be considered the most macro form of dysergetic relating.

Common Principles of Positive Change across Levels of Organisation

So how can we create more synergetic, and less dysergetic, modes of relating? What is striking here is that, while different theorists, practitioners and activists have focused on answering this question at very different levels of organisation (with psychological therapists, for instance, focusing on the intrapersonal; mediators on the interpersonal; and ecological activists on the global), the synergistic strategies that are described are actually very similar (Cooper, 2023). And, indeed, these also closely align with principles emerging from game theory: ‘the study of strategic interdependence – that is, situations where my actions affect both my welfare and your welfare and vice versa’ (Spaniel, 2015, p. 1).

Drawing this theory, research and practice together, I have suggested eight cross-level principles for developing synergies (Cooper, 2023). First, here, is seeing the bigger picture, whether this is mentalisation at the individual level or recognising the needs and wants of other countries in international negotiations. We cannot act synergistically if we cannot ‘move up a level’ and see the greater whole. Second is taking responsibility: at any level of organisation, entities need to proactively initiate the development of synergistic processes. It is not enough to wait for something to happen, or for someone else to forge them. Third there is a willingness to trust: at the individual level, for instance, to listen to the different internal ‘voices’; at the dyadic level (for instance, in couple’s counselling), to move beyond blame and contempt. Closely related to this is being nice: starting from a position of friendliness, openness and warmth; catalysing a virtuous cycle of cooperation and good will, whether towards internal or external others. Fifth, and again closely related, is prizing difference and diversity: valuing the other whether marginalised internal
voices; marginalised communities; or, at an ecological level, marginalised non-human organisms. Sixth is **being assertive**: having the capacity to calmly, non-aggressively and non-manipulatively state our own needs and wants, and to hold them as of equal value to others. Being nice means starting from a position of good will, but it does not mean being gullible or naïve. Synergies require an openness to all, and if some agencies are acting to shut down or minoritise others (whether as oppressive inner voices, classes or nations), then they need to be resisted. Seventh, and critically, synergies require **effective communication** between different entities, to understand the other’s needs and wants, and to creatively generate synergetic ways forward. In two-chair work for instance, as above, a person’s voices talk to each other; couples therapy invites both parties into a communicative space; international negotiation requires countries to articulate their needs, listen to the needs of others and find mutually compatible solutions. Finally, at whatever level of organisation, synergies require **fairness**: equal access to resources, power and the capacity to realise one’s highest-order directions. As *The Spirit Level* shows, everyone is worse off when things are unequal, because the disadvantaged feel mistreated; and the advantaged feel threat, stress and vulnerability (Wilkinson & Pickett, 2010). Democracy, though complex and hard won, is a general systemic principle for what maximises benefit overall. When voices are excluded from power, they, as well as others, almost always lose out.

**CONCLUSION**

In this chapter, I have mapped out a conceptual framework that can bring psychological and socio-political understandings into an integrated whole. This is in two main ways. First, it provides a means of understanding distress, and its amelioration, that can move fluently between psychological and socio-political accounts. This supports psychological therapists in bringing together intrapsychic work with more advocacy and social justice practices. Inviting clients to reflect on the childhood roots of their difficulties, for instance, or advocating for them to tackle discrimination in their workplace, are no longer conceptually distinctive practices. Rather, they are part of an integrated psychosocial therapeutic whole, focused on helping clients realise more of their directions, more of the time. Second, this framework provides a means of exploring, across different levels of organisation, common processes and principles of change. Developing such a systemic view is helpful because it means that psychological therapists can learn from, and contribute to, other understandings of positive, synergetic developments. For instance, how might principles of democracy, developed in the socio-political arena, be applied to an understanding of clients’ inner worlds? What might this mean for therapeutic practices? And conversely, how might such intrapsychic phenomena as insight or self-care be applied at the inter-community or international levels?

The directional framework described in this chapter also shows how principles of social justice are ‘best’, overall. Not just for ethical reasons, but because fairness and
a prizing of difference and diversity are key principles in maximising benefit for a system as a whole. Closely related to this, the framework shows how cooperative, synergetic functioning is a fundamental component of wellbeing. Whether at the intrapsychic, interpersonal, inter-community or international level, we all do better when we work together, rather than against each other. Finding pathways towards more synergetic solutions, at whatever level of organisation, is an essential concern for today – and one that psychological therapists, like other progressive forces, have much to contribute.

**REFLECTIVE AND CRITICAL THINKING QUESTIONS**

1. What is your own, personal model of human being? To what extent, and in what ways, do socio-political factors feature in it?
2. What parallels do you believe exist, if any, between processes at the intrapersonal level (that we work with in therapy), and processes at the interpersonal? Do you agree that there are common processes of positive change?
3. Where are synergies in your own life: both within you, and between you and others? And where are dysynergies?
4. What might a ‘socially just’ inner world look like? Would you say that is how your being is configured, or those of your clients?

**RECOMMENDED READING AND RESOURCES**


An extensive account of directionality and how it can serve as an integrating basis for therapeutic practice. The implications of this for a progressive politics is further developed in Cooper, M. (2023). *Psychology at the heart of social change: Developing a progressive vision for society*. Bristol University.


Classic, albeit highly technical, account of a hierarchy of needs and wants.

Psychotherapy and counselling’s contribution to global peace, justice, and wellbeing:


A treasure trove of talks on the relationship between social and psychological change, including my own: ‘Common principles of positive change: Bridging the intrapersonal and socio-political divide’. 
REFERENCES


