



IAGP

International Association
for Group Psychotherapy
and Group Processes

CULTURAL DIVERSITY, GROUPS AND PSYCHOTHERAPY AROUND THE WORLD



**Dr. Marcia Honig &
Dr. Cristina Martinez-Taboada**
Editors





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Publisher



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We, the editors, as past and present chairs of the
IAGP Transcultural Section, truly believe that thanks
to the prestige of its authors, this book can make
a conceptual and practical contribution to
Group Therapy in our Multicultural society.

Enjoy your reading!

Cristina Martinez-Taboada & Márcia Honig





“Multiculturalism does not strive for unity, but it strives for unity from uniqueness – to a socially recognized society that is capable of having dialogues, even to its conflict zones. Participation of all cultures in shaping the common public space is a required activity in a multicultural society”

Shemer, 2009





Cultural Diversity, Groups and Psychotherapy around the World

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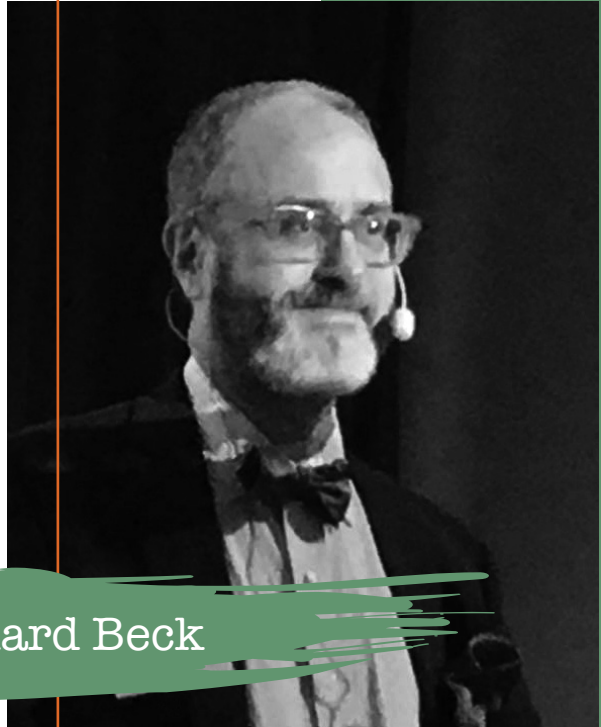
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Preface



Richard Beck

Richard Beck is the current President of the International Association For Group Psychotherapy and Group Processes, where he also served as Vice-President and Chair of the Task Force for Trauma/ Disaster Management. Richard, a Licensed Clinical Social Worker; a Board Certified Diplomate in Clinical Social Work, a Certified Group Psychotherapist and Fellow of the American Group Psychotherapy Association is a psychotherapist in Private Practice in New York City, with expertise in treating trauma; He works with individuals, couples and groups. After the events of 9/11, Richard conducted well over 1500 hours of trauma groups with survivors, their families, witnesses and rescue workers. Richard lectures, teaches and lead demonstration groups nationally and internationally, dealing with trauma and the importance of self-care following a traumatic event and loss. Richard published the "Unique Benefit of Group following Traumatic Events" and co-authored an American Group Psychotherapy Association Trauma Protocol entitled "Lesson's Learned in Working with Witnesses, Survivors and Family Members after Traumatic Events". Richard was awarded the 2007 Alonso Award for Excellence in Psychodynamic Group Theory for his co-authored article "In the Belly of the Beast: Traumatic Countertransference"

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Welcome to the very first IAGP Transcultural Book!

This book, with distinguished authors from around the world, is unique in its approach to the concept of Culture, just as IAGP is a unique international organization, with members located around the globe. The significance of understanding the dynamic of culture has never been more important for all of us, whether we focus on clinical or organizational work. The Internet provides immediate, raw information to all of us. This is a phenomenon that we must always digest and understand within the framework of culture.

Congratulations to our editors, Drs. Honig and Martinez-Taboada, from Israel/Brazil and Spain, who patiently curated this remarkable book. Our IAGP Transcultural Section, which Dr. Honig chairs, is an outstanding online holding environment, where concepts of culture are discussed openly and respectfully. The atmosphere of safety and trust that has been cultivated on our IAGP Transcultural list, which enabled colleagues from around the world to discuss complicated and complex concepts, is equally present here in this unique IAGP book. Marcia is also a member of the Scientific Committee of IAGP 2022 Congress.

Our IAGP Education Committee, that Dr. Martinez-Taboada co-chairs, in addition to her responsibility as the Co-Chair of the Scientific Committee of our upcoming IAGP 2022 hybrid Congress, also offers culturally informed and sensitive events for IAGP members and nonmembers.

All of us in IAGP believe in the utility and power of using groups. The concept of this book itself began during an IAGP Board meeting, when we could meet in person before this pandemic began. There are gifted professionals on our IAGP Board of Directors. The idea of writing and publishing this book developed from a simple idea that began during a discussion, and now the result is here for all of us to read and learn from!

As you read this book, imagine each author speaking directly to you, the reader, just as I am speaking to each of you personally during this preface. Like poetry, that is meant to be read out loud, the chapters in this book, covering a wide range of important topics, deserve this attention as well. As you read each chapter, I am sure that you can imagine how each author, most of whom English is not their first language, is conveying their concepts to you through the lens of the English language. Perhaps we can all imagine this book to be a *conversation with* experts from all around the world, to you, our reader, waiting for your responses, to be continued in future editions of this book.





The scope of topics that Drs. Honig and Martinez-Taboada have cultivated for you are extraordinary, meaningful and timely, given the peritraumatic times we are all living through during this coronavirus pandemic.

How fortunate we all are, to learn from the wisdom of all our authors. In addition to chapters by Drs. Honig and Martinez-Taboada, we are treated to the wisdom of Drs. Bulut from Turkey; Jeyarathnam from India; Rohr from Germany; Mikhailova from Russia; van Noort from the Netherlands; Lindhardt from Denmark; Pezo del Pino from Brazil; Weinberg from the USA/Israel; Hudgins and Durost from the USA; Burmeister from Switzerland; Agresta and Sangiuliano from Italy; Mela from Greece; Rakhawy and El-Houssini from Egypt; Shpirer from Israel; and Ulrich from Croatia.

You don't need a passport to travel from chapter to chapter to read and to learn from all these different cultures!

How rare it is, and a privilege too, for all of us to hear from former IAGP Presidents as they share their experiences of Culture during their time at the helm of IAGP.

IAGP has been effected by the coronavirus pandemic, just as human beings and organizations from around the world have been as well. The pandemic magnified the cultural influences during this administration. IAGP, putting the safety and well-being of people first, decided to postpone our 2021 Congress until 2022. The uncertainty of travel, the question of vaccinations, the ability to get vaccinated or not, were the reasons that IAGP decided to host a *hybrid* Congress in 2022, with an online component and an in-person venue at Pescara, Italy.

Dear readers, the safety of everyone is now and will always be first and foremost in planning IAGP events. IAGP responded to the pandemic with determination and resilience! We developed webinars as a way to offer top notch teaching opportunities to people around the world who might not be able to attend our regional IAGP events. Because of the coronavirus pandemic, these webinars and online workshops would become a safe container where people from around the world could connect, feel less isolated, and develop strategies to cope with the anxiety and loneliness that occur after any trauma or disaster.

The culture of workshops and presentations done in person shifted overnight to online.

It is with tremendous pride that our IAGP Board of Directors adjusted all of our activities to online work, respecting the safety of everyone, and



knowing how important connection is for all of us. There is a learning curve to all activities, in person or online, and IAGP developed a *steep* learning curve, both out of necessity as well as because of the very talented members of our Board of Directors. The culture of studying dreams became a source of holding and containment as IAGP's social dreaming matrix event opened its heart to people around the world—online! Our educational programs also went from on the ground to on the Internet as skilled IAGP trainers helped colleagues around the world—online! The culture of learning how to write professionally, whether about clinical or organizational topics, was offered—online! Our response to traumas was remarkable—and online!

As President of IAGP during the pandemic, I have been blessed to work with colleagues from different cultures.

I have also been blessed with a great capacity for *ignorance*, not stupidity, when it comes to understanding the meaning of different cultures, and how each culture metabolized the impact and influence of the pandemic on their work.

As I wrote in the beginning of this preface, IAGP is a unique organization. This book is an example of how special IAGP is and how extraordinary the people are who are serving our members in this administration during this pandemic.

Enjoy reading this book. There is much wisdom offered to all of us from the wide range of topics covered by wonderful colleagues and friends.

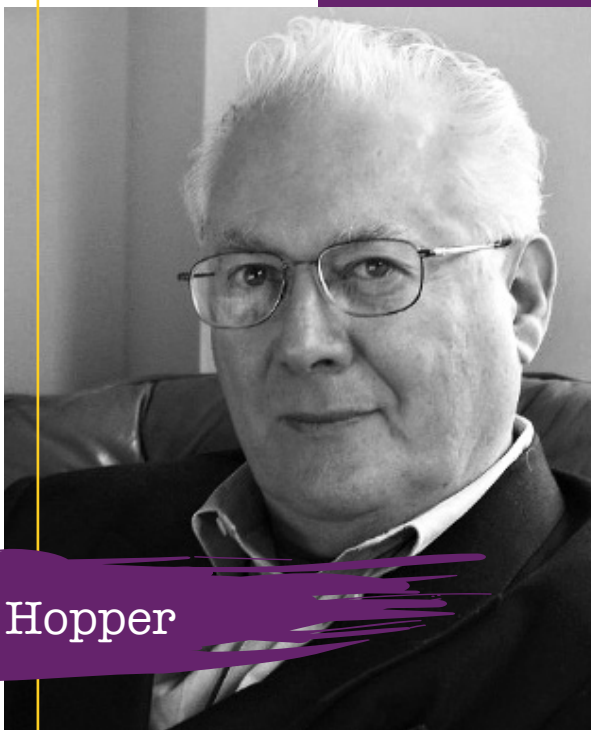
Warm regards to all,

Richard Beck
IAGP President



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Prologue



Earl Hopper

Ph.D. is a psychoanalyst, group analyst, and organisational consultant in private practice in London. He was a member of the Scientific Programme Committee of the IAGP from 1983–1986, and a Co-Chairman of the Scientific Programme Committee from 1986–1989. A member of the Board from 1986–1992, President-Elect from 1992–1995, President from 1995–1998, and the immediate Past-President from 1998–2000.

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It is an honour to have been invited to write a Prologue to a book on the theme of clinical work in the context of cultural diversity, edited by Dr. Marcia Honig and Dr Cristina Martinez-Taboada, and written by a collection—if not a network—of colleagues from around the world who are steeped in various traditions of group therapy and group consultancy. Clinical work is central to our professional identities. We recognise the importance of understanding the largely unconscious constraints and restraints of the foundation matrices of our contextual societies on our personal lives!

I have always been fascinated by the study of social and cultural diversity, most probably because I had so much of it to integrate, for example, how to catch catfish from the muddy Missouri River and to debate various Talmudic tracts. In retrospect, it feels inevitable that I would become a sociologist, psychoanalyst, and a group analyst living in London but often travelling to the United States and various other countries, especially those which surround the Mediterranean. I entirely understand the trials and tribulations of Ulysses.

So many members of our profession are immigrants or the children of immigrants. We have learned that although social and cultural diversity is important, so too are the cardinal virtues and the eternal verities. Marginality has always afforded a space both for pain and for creativity.

My academic and clinical work has crystallised around sex and aggression, love and hate, hope and despair, but also around the *social unconscious*. My first publication involved the study of work groups in a British factory compared with their counterparts in an American factory. The groups were comprised of working-class women and their middle-class male supervisors. I showed that in response to variations in the supervisory styles of the foremen, variations in rates of productivity were a function of aggressive feelings and aggression displaced from the supervisors onto the production process and onto productivity itself. I considered the importance of variations in self-esteem, but even more important were normative orientations towards the expression of feelings in general and aggressive feelings in particular, and towards the acceptance of authority, as influenced by gender and class relations (Hopper, 1965).

My next publication was with my friend and colleague Eric Dunning who was a prodigy of Norbert Elias, who was belatedly acknowledged to be one of the fathers of sociology in Britain and of the theory of group analysis, particularly in reference to the theory and concept of the social unconscious.





Eric and I argued that many societies were becoming more and more alike in many features of their foundation matrices as a consequence of processes of industrialisation. However, we also argued that, somewhat to our surprise, such societies maintained and even developed various elements of their sociocultural idiosyncrasies, primarily in matters that were peripheral to their economies and occupational structures. In other words, industrialisation was associated with both increased uniformity and convergence, and increased diversity, and even divergence, depending on the centrality of the institutions (Dunning & Hopper, 1966).

In a paper presented at the IV IAGP Congress in 1973 in Zurich, I introduced the concept of *bigenderality*, arguing that sexual identity differed from gender identity, the former being based more on the body and the latter more on the norms about what is appropriate for males and females. At the time, it was not so obvious that masculinity and femininity were characterised by cultural diversity, and varied in terms of nationality, ethnicity and class (Hopper & Seglow, 1973). It could be argued that we were *advanced* in our awareness of what is now called *intersectionality*, but this was central to the ethos of the International Association for Group Psychotherapy and Group Process (IAGP).

In a study of the personal consequences of various patterns of social mobility in Britain and in the United States, I showed that many patterns of anxiety originated in social situations that occurred after infancy. I focused on the phenomena of insatiability, anomie and alienation. Especially important were the socially patterned ways in which people managed and coped with their anxieties, which ranged from patterns of retreatism to patterns of political engagement (Hopper, 1981). It was necessary but not sufficient to consider patterns of maternal deprivation and Oedipal struggles.

My development as a clinician has been marked by an appreciation of the transgenerational causes and consequences of massive social trauma. This is the basis of my clinical work with survivors of the Shoah, as well as with their children (Hopper, 2003a, b). It is also the basis of my work with people who are addicted to various substances. It is not generally known that colleagues who work clinically with survivors often work with addicts (Hopper, 1995).

During the 1980s, I began to study what I have come to call Incohesion: Aggregation/Massification as the fourth basic assumption in the unconscious life of social systems, especially those in which trauma is prevalent (Hopper,





2003b, 2022b). Fundamentalism (Hopper, in press, c) and scapegoating (Hopper, 2022a) are important elements in these processes, which are often associated with various forms of social violence (Hopper, 2020, 2022d). Although the genotypical structure of basic assumptions is universal, the phenotypical manifestations of them are culturally diverse (Hopper, 2018a, 2018b).

In my Presidential Lecture at our IAGP Conference in 1998 in London, I defined mature hope as the ability and willingness to exercise the transcendent imagination. This offers possibilities for an exit, not as ghosts but while we are still alive (Hopper, 2003a). These processes are especially relevant in our current struggles to make creative use of the *syndemics* of the COVID-19 virus and the eruptions of social violence, including the current war in the Ukraine.

The Eliasian and Foulkesian idea that the group and the individual person are two sides of the same coin, and that sociology and psychoanalysis are essential to the development of group analysis and the study of group dynamics has influenced my editing of *The New International Library of Group Analysis*. It has also led to my coediting with Haim Weinberg (Hopper & Weinberg, 2011, 2016, 2017) a series of books on the social unconscious in persons, groups and societies. In these publications we have privileged the study of both tripartite matrices and basic assumptions. Influenced by the classical ideas of Moreno, we have included essays by psychodramatists in our book.

Only recently, I benefited from a consultation with a Jungian psychodramatist who I know through the IAGP. I needed some help in my work with a married couple from a war-torn country in the heart of darkness who were struggling to decide whether to separate. My consultant helped me to appreciate that the negotiations between the husband and the wife were governed by their negotiations with their ancestors concerning various property rights. This was not a matter of psychotic processes primarily within the husband, and feelings of guilt on the part of the wife. It was necessary to tolerate uncertainties about their beliefs. I learned that their possible divorce was a matter for their community, some of whom were organismically dead but in their continuing communications and the expression of their interests were very much alive. As a former sociologist, I knew and understood their beliefs, but after my consultations, I was better able to facilitate more peaceful discussions between the husband and the wife.

This integrated and transdisciplinary perspective is at the very heart of the IAGP. Our shared interest in the sociality of human nature continues to



enliven our politically informed search for cohesion in patterns of integration, solidarity, and coherence. Maturity involves political commitment to reducing extreme inequalities among our citizens, and even to extending the very notion of citizenship. We appreciate that freedom and responsibility are based on finding and maintaining an optimal balance between the needs and wants of individuals and the needs and wants of their human groupings.

I have also been invited to reflect upon my own involvement in the IAGP, and eventually in the governance of it, especially from my point of view as the first elected President. I first became involved in our organisation in 1968 in Vienna where the IV International Congress of Group Psychotherapy was held. I witnessed several debates among Drs. Moreno, Berne and Pines, among other famous mother and father figures. I heard colleagues speaking openly and authentically about their countertransferences. And I participated in groups in which transgenerational traumatic experience was recapitulated, heard, and understood. The relational realities of groups, families, organisations, and societies were respected. Senior colleagues acknowledged that personal maturity involved political engagement. I made friends with colleagues who agreed with Foulkes and de Maré that sometimes insight follows change rather than the other way around. At the time, these ideas were radical, especially that psychoanalysis was in essence a social psychology, that personal pathology was a matter of disturbed relations, and that the personal was political as well as vice versa. Today, such ideas are no longer radical, but they remain difficult to realise.

I am aware of several challenges to the realisation of our ideals. First and foremost, is the universal problem that whereas only the elderly are fit for the roles of titular leadership, only the young really want to take on these roles. This is especially ironic, given that our contributions are entirely voluntary, and associated with being the object of envy rather than the object of gratitude and appreciation, which are often the most expensive forms of payment. There is, therefore, a tendency for the entire Board of Directors to want to be members of the necessarily small Executive Committee, and the members of the Executive Committee to want to be the President.

It is difficult for diverse organisations to be sufficiently cohesive for them to accomplish some work. It is often necessary to create and then to manage various subsections of the organisation that are associated with the subspecialties of it. This creates an organisation of nascent organisations,





and it is difficult for the parental organisation to hold together in face of the centrifugal tendencies that arise from this. During my time in office, I remember hearing references to the myth of Uranus in response to the trials and tribulations of my attempts to provide leadership of such a professionally diverse global organisation, whose members and leaders were also obliged to use English, which many colleagues experienced not merely as a useful universal language, but as a means of communication with continuing undercurrents of colonial and imperial power and conquest. This language problem is rarely only a language problem. The myth of Babel remains instructive.

Also challenging are the problems that beset all organisations whose basic ideologies are characterised by a high proportion of axioms which must be accepted to propositions that can be tested. This certainly applies to organisations in the field of psychotherapy as well as to those in religion. Like many organisations in these *fields*, we tend to generate a variety of forms of *social narcissism*. Perhaps we also attract colleagues who are vulnerable to the role suction that characterises these formations. Each subspeciality tends to have a very tight hold on truth, and to know where the devil resides, which is not only in the detail of administration.

These matters are often manifest in the ways that some of the sectional orientations privilege *feelings* over *thinking*. Feelings are regarded as true and authentic, and thinking as defensive and perhaps as manipulative. Feelings are the *lingua franca* of the people, and thinking the language of the power elite. And perhaps vice versa. Such challenges are much greater than the simple matter of the exercise of power and authority in all matters of governance. International organisations are beset with the deceptively simple matter of the meanings of *democracy*. Similarly, the meanings of such terms as *ex officio*.

Tensions beset any organisation that is attempting to grow and develop, which inevitably means any organisation that is in the throes of attempting to institutionalise itself, which often involves an excessive preoccupation with matters of governance and constitutionality. This tends to become more important than what brought the organisation into existence in the first place, which in our case was the wish to explore and to develop all forms of group psychotherapy in the service of the better understanding of the human condition, and helping people suffer the pains inherent in it as well as to realise their hopes.

Nonetheless, this very book of essays is testimony to the fact that our organisation is not only about strudel in Vienna, *carne de lomo* in Buenos



Aires, smoked reindeer tongue and cloudberry in Scandinavia, roasted roo in Melbourne, *mole de pollo* in Mexico City, and snake blood in Taiwan. Nor is it only about beautiful young travellers who are seeking to expand their definition of *home*. Actually, this book of essays is a collective enactment of our belief in citizenship without national boundaries and without passports of particular colours. It is also an enactment of our knowledge that the study of cultural diversity leads to the appreciation of the unity of human interests, values and aspirations. This book also celebrates our confidence in our organisation and in its mission. Reading these essays will whet the desire to become even more involved with the world of group psychotherapy and the study of group process.

I am confident that the IAGP will continue to grow and to develop, and that it will continue to sponsor and facilitate many intellectual and professional activities. I look forward to the next International Congress of Group Psychotherapy in 2022 in Pescara, Italy, where we will have the opportunity to nurture our relationships and develop our interests and skills.

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Introduction



Marcia Honig &
Cristina Martinez-Taboada Kutz

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Cristina is PsyD. Doctorate on Social Psychology, group processes and group therapy. Former Chair of the Transcultural Section at the IAGP (2015–2018). IAGP Congress Co-Organizer and Co-Chair Scientific Committee 21st IAGP Congress, 1st Hybrid Congress (2022). IAGP Co-Chair Education Committee (2018–2022) IAGP Board Member (2009–2012), (2012–2015), (2015–2018). Senior professor University of Basque Country /EHU Spain. Staff at Granada Academy (IAGP and UNESCO).

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Working with cultural diversity in group therapy around the world

The challenges of social diversity are present today in our communities and in society in general. Recent social movements and the massive waves of immigration in the last three decades around the world have caused deep cultural and social mixture and, hence, community health changes. We are probably transforming into a new world of heterogeneous communication and culture with its strengths and difficulties.

According to the World Migration Report (International Organization for Migration; United Nations, 2000), more than 150 million people have left their homeland in these years to escape aggression, racism, violence, natural disasters or human actions in search of work, education, independence, and dignity. Moreover the years, immigrants and refugees have posed a challenge for society and also for the field of group therapy, which must be sensitive to different cultural situations (Rohr, 2010).

Many articles have been written on this theme, but we have not found an organized book, including distinguished theoretical approaches, with clinical examples, of group therapeutic interventions in multicultural contexts. I would remove it

Group psychotherapy interaction allows creating a social scenario of integration and understanding of emotions, behaviors, and symbols that must face processes such as exclusion, marginality, conflict or encounter with the *Different*. It is necessary to build an internal container to be more open and flexible towards the *Other*. Sometimes, this requires basic social skills and personal values, such as mutual respect, tolerance, and trust to reduce patients' distress, increase active coping skills and sense of well-being.

Therefore, we are pleased to present this new book that focuses on a variety of group experiences. Experts from different cultures describe their approach and conducting group methods. Migration challenges as the understanding of new ideologies and old prejudices in the face of diversity, as well as the influence of the social unconscious, intergroup and psychosocial challenges come to the fore. All of this shapes dilemmas and highlights the need for in-depth training in intercultural group psychotherapy.

The proposed book is based on different perspectives, methods, and conceptualizations in psychosocial intervention and group therapy. Multiple





social contexts are observed allowing to notice the impact of cultural values and behaviors as well as the challenge of sociocultural transition in groups practice. To create safe spaces is a task for therapists, social workers, and educators involved in group work. So, this is an invitation to look within ourselves, to become aware of our own values, perjuries, preconceived notions and personal limitations.

According to UNESCO (1948), citizens of the world have the right and the need for an increasingly present cultural diversity to be recognized. We believe that this book can contribute for understanding the complexity on dealing with multiculturalism and the insecurity that it can generates.

The content is organized in different sections based on the categories of contribution:

- **Reflections of IAGP Past Presidents:** IAGP Past Presidents reflect on and share their direct experience in cultural diversity issues: Earl Hopper (1995–1998), Roberto Inocencio (1998–2000), Christer Shandall (2003–2006), Frances Bond-White (2006–2009), Jorge Burmeister (2009–2012), Kate Bradshaw Tavon (2015–2018).
- **Contribution of different and prestigious authors:** The readers can approach some group experiences and therapeutic interventions in contexts of cultural mixture. The authors are from different sociocultural origins; they are doctors, sociologists, psychologists, university professors who will address these topics in a specialized way. There are important aspects that are not always posed with precise answers, but that can add new perspectives and creative ways on working with groups in these times of social, cultural and personal uncertainty.
- **Part 1 – Enhancing Cultural Diversity and the Interpersonal Dialogue in Group Therapy:** We can observe how the management of emotions and behaviors enables dialogue as fundamental process that promotes exchange and resonances among members (Foulkes, 1991). This is the driving force behind any social matrix that faces psychological and social difficulties such as migration or other situations that generate emotional obstacles and dissatisfaction among members.



This part delves into the issues that group therapists might face when providing services in multicultural settings. Strategies and recommendations by Dr. Marcia Honig from Israel/Brazil, Dr. Isil Bullo from Turkey, Magdalene Jeyarathnam from India, Dr. Elisabeth Rohr from Germany, Dr. Ekaterina Mikhailova from Russia, Dr. Maria Van Noor from Holland, Dr. Anne Lindhart M.D. from Norwegian and Dr. Maria Antonieta from Peru/Brazil.

- **Part 2 – Boosting Cultural Diversity and the Intergroup Dialogue in Group Therapy:** We can notice in this part how cultural diversity addresses new experiences, ideas and situations ranging from the interpersonal to the intergroup dialogue. The internalization of cultures builds social representations of the collectives, their values and their personal predispositions inside the groups.

Intergroup relations are as present as interpersonal relations within group therapy. Differences in race, ethnicity, age, socioeconomic status, gender, religion, or sexual orientation drive group processes as a whole (Sherif, 1954) and build different resonances depending on the emotional capacity and degree of tolerance for dealing with discrepancies in perspectives and feelings.

Theoretical and practical approaches are introduced by Cristina Martinez-Taboada Kutz, PhD from Spain; Haim Weinberg, PhD from Israel & USA; K. Hudgings, PhD, & Steven Durost, PhD from USA; Dr. Jorge Burmeister, M.D. from Switzerland & Spain; Psy. Domenico Agresta & Alessio Sangiuliano from Italy; Catherine Mela, M.D. from Greece; Mona Rakhawy M.D. and Ahmed Houssini M.D. from Egypt; Dr. Yafi Shpirer from Israel; and Dr. Ivan Urlić M.D. from Croatia.

Epilogue: Dr. Honig and Dr. Martinez-Taboada Kutz conclude and resume the edition process.

Our gratitude to all the authors. We hope you enjoy reading them as much as we do.



<https://doi.org/10.56217/IAGP.Transcultural.Reflections>

Former Presidents' Reflections

For this special section, the editors invited Former Presidents of the IAGP to express their reflections and thoughts on their experience at the helm of a Multicultural Association such as the IAGP. They address organizational challenges of cultural diversity involving different approaches, social behaviors, and a variety of associated feelings.



Roberto Inocencio
1998–2000

I first contacted IAGP at the congress held in Copenhagen in 1980. I was living in Santander, a small summer resort city in northern Spain, where I had trained in Psychiatry during the previous years and where I was just starting my private practice as a psychotherapist. I had decided not to do biological psychiatry but wanted to go into psychotherapy exclusively. I had been in training towards that aim for several years.

Given some contingencies in my teen years, I had lived in New York and Miami. Both cities were known by their multicultural population. More so New York than Miami.

Attending the IAGP congress in 1980 was, in my prejudice, an atmosphere to which I had grown accustomed. Could never have been more inaccurate in my perspective. There and then, I found out that, while being an international encounter, it was also





a meeting of people that, in spite of many different backgrounds, we all shared a zest for learning from each other.

The meeting went on with vivaciousness and verve from beginning to end. Emotion and intellect rivaling during the whole congress.

In my experience, what I found in that congress was to be found in the association as a group.

IAGP, due to its transcultural essence, is a melting pot of idiosyncrasies, languages, religions, and ways of life. It is a constant source of knowledge and experience for anyone belonging to it. It is also a constant challenge to overcome prejudice and xenophobia. There are many differences in perspective in many members of IAGP. Because of these differences in culture and the natural resistance to give up deeply rooted traits, feuds appear. These disagreements have always brought light to the parts involved. Not an easy task for those in the strife. Nevertheless, the action provided by the group spirit has more often than not, prevailed.

Being cultural discrepancies relevant among the national, religious, and cultural groups in IAGP, not less noteworthy have been the disagreements related by the disciplines within the organization. There have been notable competitions among the different disciplines represented in IAGP. This vying for relevance and/or representation has always ended in consent for whatever was best for the organization, giving the observer a lesson of compliance and understanding beyond any discrepancy.

What can be said about the different groups within IAGP can also be said about its individual members. Friendship and antagonistic attitudes are to be observed in the heart of IAGP and its personal members.

Year after year, congress after congress, professionals attended the IAGP congresses not only for the highly qualified professionals presenting their experiences and work, but also with the aim of meeting exceptional people residing at the other end of the world. They all, in many instances, have looked forward to the IAGP congresses with the zest of meeting that other member—often more than one—they expected to meet once again in the very special atmosphere provided by the congresses and the spirit prevailing in its ambiance.

As said, I have been a member of IAGP for a little over forty years. I have attended all the congresses held since. Being part of IAGP has been a fountain of learning and also, at times, cause of a deep reflection due to the many different cultures represented in the organization.



There were times during those years in which I had the chance—and fortune—to meet very respectable professionals and scholars dedicated to the investigation and growth of group psychotherapy. I have also had the privilege to meet and establish very dear and valuable personal relations with those professionals who have honored me with their personal relationships.

Last, but not least, I am deeply grateful for the tolerance with which the association has coped with my many limitations and inadequacies during my periods of service and responsibilities in the organization.

Always proud of being a member of IAGP. A fortunate decision I made over forty years ago.



Christer Sandahl
2003–2006

Bureaucratization: A result of cultural diversity and imbalance of power?

Jacob Moreno and S.H. Foulkes, the founders of the IAGP, shared the conviction that humans primarily are social beings. They strongly believed in the power of the group as a vehicle for change. However, their approaches, psychodrama and group analysis, differed in many ways. The two traditions have developed into two main stream group therapy cultures, which exist side by side within IAGP, but not without tensions.

The members of the board represent different parts of the world. During my time on the board (1992–2009), those from northern Europe formed a relative strong cluster with shared values. The English-speaking cluster differed somewhat in terms of values, but created another power centre relative to its political



power in the world, in addition to the power of mastering the English language in itself, which is the lingua franca on the board. Both nonverbal and verbal communication problems were frequent due to cultural diversity.

Compared to traditional group psychotherapy, the position of psychodrama was weaker in the two above mentioned parts of the world, in terms of acceptance within health and social care. Somehow, I believe, this resulted in an increased vigilance regarding power within IAGP and between board members.

Usually, the atmosphere on the board was friendly and warm, except when some members were frustrated, for example when simple questions were discussed for hours.

One way to reduce frustrations and irritation was to formalize the board meetings. Robert's Rules of Order was introduced and adjusted to IAGP. This is a North American quite complicated handbook on how to run meetings, make decisions etc. Most Americans are used to this way of working, which contributed to their power on the board. Meeting procedures are simpler in most parts of the world, but Robert ruled the board. The formalized way of running meetings had the advantage of keeping tensions related to power issues and diversity under the surface, until they unexpectedly erupted and became visible.

When the board met there was a tradition to start and end with an open, more or less leaderless discussion. The initial meetings were friendly and optimistic. People were glad to meet again. Sometimes the encounter at the end went well after a productive board meeting, but not seldom it exploded in one way or the other. One person was very angry, or another very sad, or somebody suddenly left etc. It was not always easy to understand what had caused the eruption. On such occasions the meeting ended in chaos and bewilderment. Nonetheless, when the board reconvened after half a year, people were happy to meet again.

Another formal aspect of the work is related to the by-laws. During my presidency we spent a lot of time working through each detail. In my naivety I thought that now we had done this work once and for all. However, it took only another crisis to once again radically change the by-laws, as if they were the cause of the crisis.

This tendency of the board to occupy itself by formalities such as meeting procedures and by-laws seemed to have the function of containing





conflicts, which to some extent was useful. The extreme bureaucracy of the United Nations has probably developed of the same reasons. However, underlying conflicts became disguised and unsolved. It was a suboptimal solution as it also took valuable time from purposeful work.

As group professionals it was incumbent on the IAGP board to carefully examine and work through power imbalances and cultural diversity within the organisation itself, including its unconscious dimensions. The inability to do so has hampered IAGP to reach its full potential.



Frances Bond White
2006-2009

When I received the invitation to write about my experience in the transcultural world of IAGP, I had a memory of seeing my father with a newspaper in his hand as he stood in front of a map of Europe that was pinned to the wall in our living room. When I asked him what he was doing, he explained that he was looking at the map of Europe and finding where my uncle William's division (he was a paratrooper in World War II) was and he pointed at a place on the map. As a four-year-old child I knew war was bad, even though I had no idea of the immensity and horrors of WWII. I did know that because my favorite uncle was there that what happened to the people who lived in those countries had an impact on me. We also had a family friend who worked with the International Red Cross during the war and whenever she came home on leave, she would bring me a small present from the country she was stationed in for that period and describe the meaning of the gift in that country. I



vividly remember a plaster Santa Claus from Iceland that I carried with me into adulthood until it finally crumbled away. So perhaps my interest in working in an international organization has early childhood origins.

If we think of transcultural experience as recognition of oneself in the other, consisting of human experiences that extend through all or most cultures then the Board of Directors of the IAGP is a Petri dish for that exploration. I served on the Board of Directors from 1995–2012 in various roles, nominating committee member, conference chairperson for the 2000 conference in Israel, chairperson of the membership committee, president-elect, president and finally past-president. At the conference in Argentina, a Danish colleague and I were rushing to get to our first Board Meeting and paused on the sidewalk to light cigarettes. We laughed at ourselves and I said, “We got our smoke and my mother is turning over in her grave” and she replied “Mine too”. We both laughed in recognition of a common more that was above our cultures.

In reflecting back over my 17 years involved in IAGP there are some human phenomena that stand out in my memory, some positive and some negative. I would say that my initial experience was of the welcoming, nurturing and mentoring of many of the more senior members of the Board when I first joined in 1995. This came from a very diverse mix of people from Asia, Europe and the USA. They helped me get my footing in an almost overwhelming first year on the Board where the action was thick and fast and the issues being discussed all new. As I gradually became acclimatized to the meetings, I became aware of the struggle to work together amid such diverse cultures. Unlike the International TA Association where we all had a common theory, the IAGP Board was theoretically diverse and that contributed to some of the tensions as each group seemed to have differing ideas of how we should work together, process issues and information and make decisions.

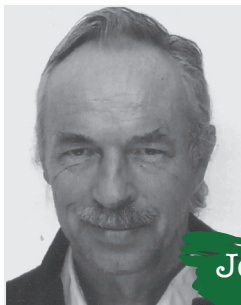
Over time it became clear that the universal issues of envy, power and gender were very present in our group. These are more difficult to give voice to and I realize that each person has a different view of how they were exhibited. Let me be clear that this is my personal view and others may have seen these things differently. I remember thinking that each member of the Board of Directors was used to being a leader and that making the transition to the role of working member of a group was



difficult for many of us. We were all used to be in charge and found it difficult to relinquish that power and let someone else lead. I thought that this contributed to some of the chaos of the meetings, the struggles to make decisions and keep focused on our goals of finding the best ways for the IAGP to function as an organization.

When I made the transition from Board member to Executive Committee member in the role of President-elect, I received a great deal of support from the women on the Board. Some of the power and gender issues became more apparent within the smaller group as some members thought that they should have been in my role. Clearly all of us were in these roles because we were ambitious and again being able to step back and let someone else lead was difficult. I remember one meeting when I was the only female present. In the midst of a discussion, I made reference to some group dynamics research about keeping standards for membership high and about five minutes later in the discussion someone referred to what I had said but attributed it to one of the male members. When I spoke up and reminded the group that I had said that, there was an “Oh, it doesn’t matter who said it” reaction. So, I cited some other research from the Chicago Tavistock Group about female leaders’ interventions being discounted and accredited to men. This brought forth frowns from a couple of the males present and we moved on with the discussion. This is one example of many where I saw gender issues in play both on the Executive Committee as well as on the Board. I don’t think that we ever had an open discussion about these gender issues, perhaps reflecting how difficult they are to broach on a universal level.

Although I do not participate as much since leaving office, I enjoyed contributing to the growth of the organization and getting to know new people by serving as Chairperson of the Nominations Committee for the 2018 elections. Looking back at my time as a board member and officer is both difficult and pleasurable. The strongest experience that stands out for me is the sense of belonging to a group of people who were trying to build support for a group something we all value, group psychotherapy. And even stronger than that are the friendships that developed and the sense that I could travel many places in the world and have dinner with a friend.



Jorge Burmeister
2009–2012

I have been the president of IAGP between 2009 and 2012. My presidency started with a remarkable transcultural process, making clear that it is the same force which can crucify and crown us. As a president-elect the site selection committee and me elaborated the project of a joint congress of AGPA and IAGP in New York city being in our eyes a real *dream event*. Nevertheless, the Board of Directors voted the project down based on a strong suspicious attitude against our partner, the AGPA with all kind of negative transcultural projections: what a pity. If the dream was burnt to ashes out of its ashes the phoenix was rising by an opposite transcultural effort. Thanks to Maria Cecilia Orozco and her family but also to a joint networking the congress in Cartagena de la India in Colombia was born literally out of the nothing. Lectures in different universities in Colombia paved the way for strategic partnerships as well as the multicultural setting of committees and congress organizers. It became a wonderful event indulging shamans as well as participants from all over the world: what a blessing.

In 2011, I was invited to give a key lecture at the conference of the JGPA in Tokyo on global social challenges. My Japanese hosts and me were discussing afterwards our experiences on the podium. Comparing the apparent silence of the majority of students then and the heated discussions and street manifestations we recollected from our youth, we discovered something really transcultural: our own engagement in spite of all our differences. Both of us had a brick in our hand at one moment of time. And we shared another connection. Being in Hiroshima in the Memorial Peace Park out of the nuclear catastrophe one story is specially moving. Sadako Sasaki, a 10-year-old



Japanese girl had developed cancer as a consequence of the exposition to the bomb. She started to fold cranes while a Japanese myth is telling that gods will confer a wish to those who are ready to fold 1,000 cranes. While her strength was diminishing her school mates and later on all over Japan children were helping to achieve the number and her wish for a world without nuclear bombs. Although it was in vain and she died, cranes are arriving until today to honour her wish for a world in peace. When IAGP held its congress in Rome participants from all over the world were encouraged to fold cranes which were sent to Hiroshima. On the stage the symbol of the crane embraced IAGP and JGPA.

During the summer academy in Granada in 2012, one young colleague from Palestine shared her dream of an apple tree in the desert. It was touching when a colleague from Israel told her that he had exactly the same dream two nights ago. Uri Levin from Israel and Rasras Khader from Palestine met on the stage of the agora. Rasras and Uri were talking with their heart and their mind. Their children had told them quite similar messages to practise peace and do never any harm to the other. In the end the first mixed Israeli-Palestinian working groups were created which are still cooperating. On the same spot, four women from four continents representing four different religions met to exchange on the situation of women all over the world. In the end and thanks to Granada, as a third place, and thanks to the transcultural practise of IAGP, they embraced each other connected by the same transcultural fate and a similar mission.

In the end I am deeply grateful for IAGP by giving me a home of friendship and trans-cultural humanity during all these years.



Kate Bradshaw Tauvon
2015-2018

Making attachments to other people and to the settings where we live is our foundation for future learning. In the UK shortly after two world wars, my family moved several times.





As a nine-year-old, relocating involved leaving the precious and familiar, unequipped to sustain connections. Our wonderful doctor, realizing my predicament, gave me a leather zipped writing case with, notepaper, envelopes, stamps, his address, and a perpetual calendar! This transitional object rooted me. In each new place I was initially an outsider, with another dialect and cultural norms. It's the unusual people on the edge who are generous and let strangers in, so I developed a fondness for strangeness and liminal spaces. A group process moves from the periphery to the core. I knew about inclusion and wanted to foster this for all.

I met psychodrama and group analysis in 1971 and went on to train in both methods. J.L. Moreno and S.H. Foulkes together with Zerka and others founded IAGP from a shared vision that with our group psychotherapy and group process methods we could make significant changes in the world by meeting *the other*. Moreno's definition of group psychotherapy "one person the therapeutic agent of the other, one group the therapeutic agent of the other" applies to the world view of both men. They sought to bring about social change through maximizing the creative and spontaneous capacity of citizens.

A group can be differentiated from a crowd, a mob, a class, a network. A network is a number of contacts who don't necessarily know each other but who through generalised positive group experiences can connect us in the world. A group has a structure, a frame, a purpose (its reason for being), a culture, a process, and a context. The structure is comprised of such things as norms, goals, and group roles. The frame concerns boundary conditions which establish the roles and responsibilities of all involved, such as the asymmetrical relationship between teacher and students and the agreed time, place, membership, and contract. A group can be defined in terms of membership, leadership, and process. It explores forces that move it towards or away from its expressed purpose. Ever since the hunter-gatherer stage, people have banded together in larger and larger groups, a development that has led to building nation states. Without a *they* to define ourselves against one cannot define a *we*.

Globalisation presents us with a new dilemma, *we* need the next we to be global. From this perspective there are no outsiders. Integration though is not fusion; it requires separation and differentiation between *us and them* but if we are one world there is no external them.

Consider the intermediary parts of the self to be body, psyche and society. To function well, we need to attend to diversity, differentiation,



linkage, and integration in all the parts of a system—an individual, family, organisation, or society. All separate parts remain different and intact but are linked. The *catharsis of integration* is a state achieved when the parts of self are linked, consciously, emotionally, and physically through experiencing events—past, present, or future, with a new insight in relation to the present context. A psychodrama or a group analytic group provides a transitional space—a theatre for the inner network. The outer network reminds us of the inner network.

At the 2nd IAGP African regional conference in Pretoria in March 2015, Yaacov Naor and I co-presented a workshop titled *Creating Social Transformative Spaces Through Psychosociodrama*. This is an experiential method which facilitates change in a spontaneous and creative way with a dual focus on a person and his or her role in society. We explored therapeutic effects of groups when applied as an instrument for social integration; intercultural effects on the personal and how we personally can constructively influence the multicultural world around us.

This connected me with those interested in learning more about psychodrama and group analysis in South Africa—at the Centre for Group Analytic Studies (CGAS) in Cape Town, the University of the Free State (UFS) Unit for Social Justice and at i2we therapy and training centre, where we founded a postgraduate diploma in classical psychodrama. Psychodrama and group analysis are greatly valued as means of processing the brokenness after apartheid; healing, and instilling hope. Students have shown me the Cradle of Humankind, near Johannesburg, and the Garden of Remembrance at the National Women's Memorial and Anglo-Boer War Museum in Bloemfontein. Being cognizant of the British concentration camps during the South African War (Anglo-Boer War) 1899–1902, and the 51,927 black and white women and children who died in them, gives me an awareness of their impact. Through enacted psychodramas we see how structural violence has directly incited vengefulness throughout ensuing generations but also brilliantly loving and resilient new responses. We are working for a world where all can respond authentically and cocreate a nurturing culture.

When presenting *Creating a Nurturing Culture: Care for the Carers in South Africa* in Cape Town, two students from the northern provinces arrived late and tiptoed at the back of the room. I knew that to have a chance of arriving at 10:00 a.m. involved leaving home at 4:00 a.m. and using a transport system



with many delays and a high risk of abuse and assault. What tremendous commitment, courage, and motivation this journey had involved. I greeted them but they didn't hear me. I walked to the back of the room, welcomed them, shook their hands, and told them to take their time in joining us. At the end of the seminar, they told me that no teacher had ever looked them in the eyes and addressed them personally before. Their sense of being respected, valued, recognised, and included resounded throughout our work in the multicultural group. Cross-cultural work is a process entailing mutual learning where each is dependent on the others sensitive interest and receptivity. Hope is like the bird that senses the dawn and carefully starts to sing while it's still dark.

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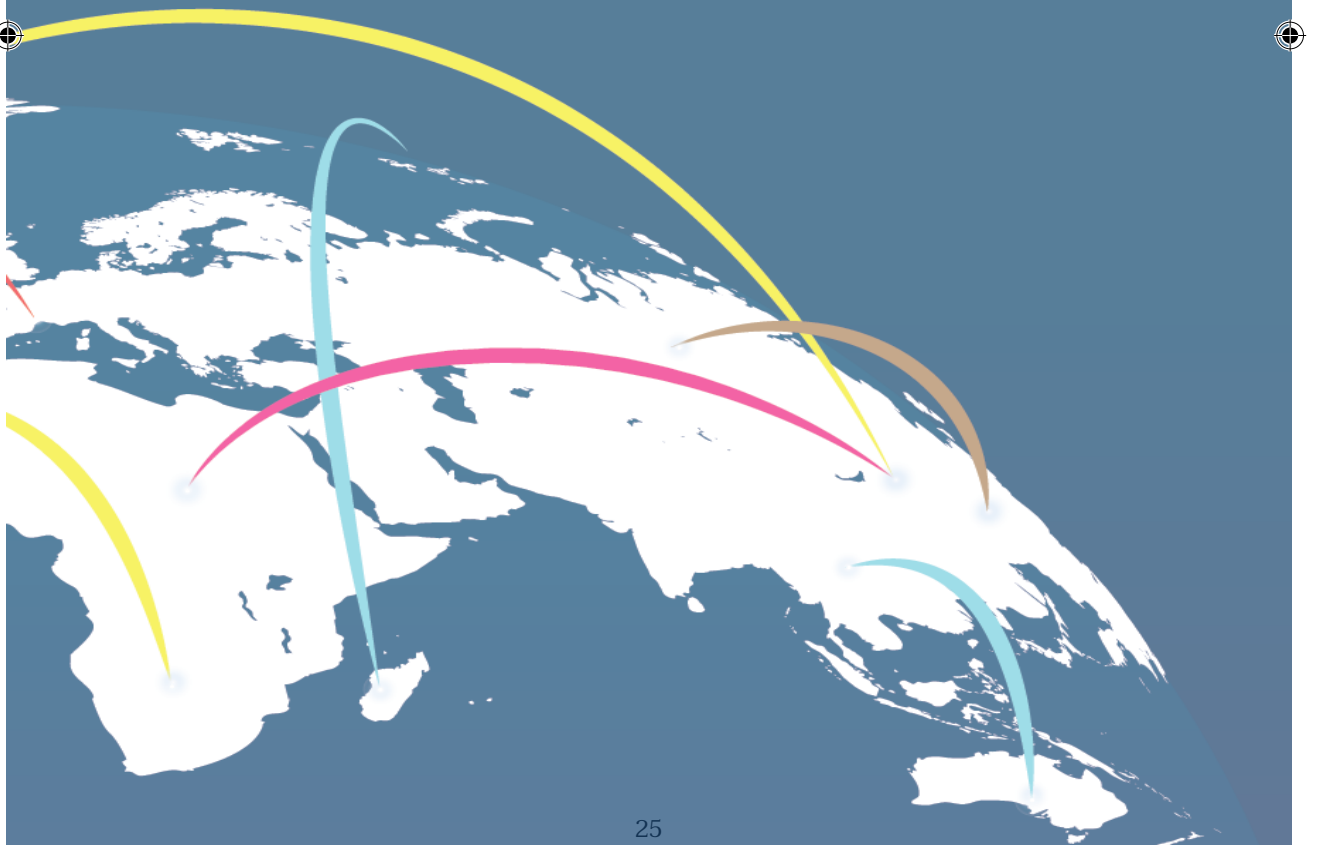


Part 1





Cultural Diversity and Interpersonal Dialogue Within the Therapeutic Group





Marcia Honig

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Expressive Arts Therapy for Teen Immigrants: a Case Study

The aim of the current paper is to examine the effect that group art therapy has on feelings of shame, self-expression, and social skills of immigrant adolescents in Israel. The presented group illustrates the effectiveness of art therapy on that population, which is caught in a complex situation of both developmental and sociocultural transition. Issues of belonging, identity, and transgenerational transmission are common among immigrants at large, and usually intensified at the time of adolescence, in which fears of exclusion, low self-esteem and shame increase and negatively influence relationships. We found out that expressive arts group psychotherapy promotes mutual identification and empathy, and leads to group cohesion as a creative container.



INTRODUCTION

“Home is where the heart is”

Pliny the Elder ~55 AD

Over the past 10 years, many migrant workers have moved to Israel from Africa, Asia and South America. It is estimated that there are currently up to 203,000 migrants in the country, mostly illegal residents (Honig, 2020).

I, myself, am an immigrant, as my family, grandparents and parents. My ancestors were among the deportees from Spain, and my forebears passed through Lebanon, Iraq, England, and Brazil in order to make *Aliyah* to Israel. They left their familiar surroundings, looking to improve their living conditions. As Jews, they experienced hostility, prejudice and a longing to motherland. I decided to cope with the challenges of immigration by developing a deep sense of intimacy with a wide range of groups from diverse cultures; this helped me replace the feeling of longing with one of belonging.

The expressive arts have always been my true passion, my safe container and that has helped me go through hard times.

The psychological effects of immigration have been extensively discussed in literature (Berger, 1996; Hulewat, 1996). Moving from a familiar environment to a foreign one often involves anxiety, confusion and disorientation. The degree of culture adaptation difficulty is determined by the difference between the culture of origin and the culture of relocation. Group therapy has been recognized for its usefulness in working with immigrants (Berger, 1996) in spite of distinctive difficulties found in adapting it for particular groups of immigrants. Relating to teenagers, topics that are part of the adolescence process are straightened by immigration. Group work is useful in treating adolescents due to their general tendency to connect in groups (Furnham & Bochmer, 1986).

Due to immigration issues, based in a multicultural background, a large population with socioeconomic difficulties has developed in south Tel Aviv. The difficulties in cultural adaptation mixed with economic complexity



create many problematic situations. The vignettes of the group I describe here are part of a municipal program to help disadvantaged families in this area. Their children, born abroad or in the new country, grow up in a challenging social/cultural environment, and very often feel confused by questions of belonging.

In this chapter, I will present a group of young adolescent immigrants using art as a common language.

I conducted this group at school, during studying time. Participants were chosen by the school consultant. The goal was to give them space to share their difficulties and feel emotionally contained. That is, to encourage them to learn and to better practice interpersonal and group communication in order to facilitate their absorption into the Israeli society while expressing (and maintaining) their identities. These children, due to their and their families' rejection experiences, developed strong defenses when communicating with others (repression, avoidance, excessive aggression), which keep them away from the feeling of belonging that is highly important to human beings, especially to adolescents. Those defenses create a negative vicious circle.

I will demonstrate how art experiments serve as a bridge to the unconscious: evoking mirroring, resonance and exchange in psychoanalytical means, and affect unnecessary defenses.

Moreover, this process enables the construction of a safe container for personal expression and affording positive connections with the others, that is, *a sense of home*.

Case study

The group had six adolescent participants, ages 11–12, from different classes, for one hour once a week, for 15 weeks.

Mary is the daughter of Filipinos who broke up when she was two years old. Despite 10 years of separation, the parents continue to fight, even though they already have new families. Mary has a brother and a sister from every parent but she doesn't feel connected to either of them. Mary speaks Hebrew very well, reads a lot and writes poetry; she talks a lot and uses intellectualism as a defense mechanism. Mary was impulsive and overly aggressive when we started the therapy.



Jane is the daughter of Colombians, foreign residents with renewable permits; she was born in Colombia and has a younger Israeli brother. Jane feels Israeli in every way, but lives in fear that her parents can be deported from the country. She is very talented in plastic arts, and started therapy because she showed many signs of emotional flooding, crying often.

Lia, born in Israel, is the daughter of Russian immigrants. She lives with her mother and grandmother; her father has not been in contact with the family for the last two years. Lia is feminine and stylish, loves trendy items. She joined therapy because she was considered childish and mocked by classmates.

Dina is the daughter of Nigerian refugees who came to Israel when she was five years old. They all are still considered temporary residents. Dina is a very good athlete, yet she refrains from participating in any competition. She is tall, with dark skin and African braids, which highlight her in the Israeli crowd. Dina was very quiet and spoke with a heavy accent when she joined the group.

Maggie is the older daughter of conservative Ethiopian and Eritrea parents. Her father was unemployed and her mother was the only provider. Maggie has five brothers, and helps her mother in the house. She joined therapy because she was struggling to develop a self-identity in her class. She is a good friend of Danny's and very protective towards her.

Zena is the older daughter of a Romanian father and an Egyptian mother. Her parents used to break up and then make up very often. Zena is smart and full of life; she is the middle sister in a three-child house. As in her home and class, she was "the glue" of the group.

In the beginning, during the first sessions, the group was divided into "talkers" (Mary, Zena, Lia) and "non-talkers" (Dina, Jane, Maggie). Mary took up a lot of space, making cohesion difficult when she defied and challenged the others.

Meeting number 1

The first exercise was presenting oneself to the group. They were supposed to introduce themselves and, through an object of their choice, they started their initial sharing.



Mary showed her mobile phone: “I take it everywhere. It is my home”. Jane showed a book in which she draws comics: “It is always with me!” Mary commented: “What strange paintings...”

Lia showed her lip gloss. Dina kept silent.

Maggie encouraged Danny to show the group a ribbon from her hair. Mary: “Stop pressuring her...”

Dina quietly pulled out a bracelet with beads, without saying anything.

Zena showed a candy bag she bought to her brothers and added: “It costs a lot of money”.

Mary: “You always think about money...”

I invited them to address each other, asking questions about their objects. Jane’s paintings and their composition became the center of attention, and Mary dismantled them, saying they were all weird, using sophisticated words on arts. The girls were speechless.

Mary asked Zena for the candies, she claimed to bring to her little brothers. Mary defied: “Don’t you care about us? It is the end of the day, I’m hungry”.

One minute to go, Mary turned to me and said: “In the personal interview, you told me the girls would be alike... what is the connection between us here?”

I kept going back to that sentence: “What’s the connection?” “I asked myself what were they hungry for?”

What kind of emotional nourishment can I provide them with?”

Meeting number 2

As an exercise for continuing introducing themselves, I used cards with hand pictures in all sorts of situations from around the world. They were supposed to present themselves with two cards: “what I usually bring to groups” and “what I would like to get from this group”. Mary couldn’t find her place, she took more cards than allowed, annoying the others.

Dina took one card and Maggie encouraged her to take another. Maggie took two very colorful cards but Mary took them from her in an aggressive way and Maggie let her do it.

Lia took five cards and Mary tried to take them from her. “These cards are exactly what I bring to the groups...” they both shouted, pulling from both sides.



I could see that the pictures in the cards were with hands caressing or holding animals: a butterfly, a harmed bird and a cat. They started fighting and swearing; I asked them to stop immediately and to choose two cards each. The cards were all over the place. I panicked; it was too early for this kind of interaction. Maggie started to pick up the cards and organized the room, Jane began to tear up; Zena came and hugged her. Jane calmed down and started to create a puzzle from all the cards, Maggie helped her. Mary stayed on the side, angry, kicking the chair.

I was afraid the group would fall apart so soon. I am over sensitive with violence in groups. Conflicts are common in my family and not once they teared my beloved apart.

I asked the group to sit down around the table, foot on the floor, and take three deep breaths together, looking at the composition of the cards they chose. They got into it, although apprehensive.

I said in a few words that conflicts are natural in order to connect, since we have both different and similar needs in the group; however, we need to find a way to express feelings and thoughts in a respectful way. I reminded them of our agreement in the beginning—of zero violence.

I invited them to share their feeling in words, but they couldn't yet; they kept staring at the cards. Mary kept kicking the chair, looking at the window.

We ended up in tense silence.

I took pictures of the cards after they had left.

I feared that I couldn't give them the space they needed.

Meeting number 3

Jane arrived sobbing since her neighbor had "disappeared". He and his family fled from the cops who came to their neighborhood looking for illegal immigrants. She was very upset; the group cared about her, and tried to support her. I encouraged them to share their breakups; Lia said she misses her father. Mary told them about the difficult separation between her parents; she added that she misses a normal family and a house that feels like home. She spoke for a long time. However, the group couldn't handle it and went over to Jane, who had already calmed down. Mary exploded: "I have no place to talk in this group!" She went outside, slamming the door, Zena followed her; Jane cried again. Dina quietly asked to go back to class and Maggie said she wanted to go out with her. I insisted they stayed until the



end, even though it was hard. Zena came back without Mary: “She ran away from me”, she said.

I looked for their eye contact. I wanted them to feel connected, and reflect their difficulties. I added that I hoped we can make room for everyone’s pain here and that we would feel safe sharing the pain. Lia said she wanted the group to be a place of being all together, having fun at a girls’ meeting. Everyone smiled. I reminded them that, at our art experiment, they chose cards with hands caressing small animals, hands in a group making dough together etc. “Some of the cards embodied creativity, others reflected pain and fragility; I understand these are the group’s wishes: being together, creating a pleasant and safe place that contains everyone’s different and similar ‘colors’”. They were surprised I remembered the cards images and a great relief was noticed in their faces.

Meeting number 4

Zena and Maggie went to get Mary from her class because she didn’t show up to the meeting—as I expected—, since she felt rejected. Mary claimed “she forgot about it”. I decided to use additional art techniques to allow the girls better self-expression.

The group started working on an individual tree, symbolizing themselves. Then, they needed to create one forest from all trees under a common theme.

Mary drew several drafts. At the general presentation, she refused to show her trees and placed them upside down on the table. Jane’s tree was beautiful, expressing her artistic skills and also her kindness and sensibility; the treetop was too rich for a thin trunk. Dina’s tree was meager, just lines in pencil. Maggie used pastel pencils and the colors were smeared on paper. She added apples to Dina’s tree and the latter gently moved the paper away from her. It was the first time Dina had set her boundaries. I reflected that Dina, probably, didn’t want any help. Lia’s tree was childish, full of ornaments. Zena dealt with everyone’s trees and, in the end, did not have time to color hers; Jane offered her help and I suggested that Zena explains her needs for Jane to be accurate. Mary told them: “Can’t you do anything alone?” She belittled all those who had presented their trees and went back to talking about her own trees, even though they were upside down: “I made some trees because I am



different everywhere, in every house... it is a very sad thing that parents are separated with new families..."

She shared her life in a monotonous rhythm, looking only at me, as if no one else was there. I tried to stop it and incorporate the group: "I can imagine how much feelings are behind each tree; any group associations?" Lia suddenly said: "It is like the story of the new king's clothes; Mary is talking about her trees but we cannot see them!" The group started laughing and talking simultaneously. Everything happened too fast for me. I felt like a stranger, as if they were speaking a foreign language. Teens speak very fast... I felt like an immigrant in this adolescent world. Mary shouted, crying: "No one here understands me! I am leaving!!" I stood strong next to the door and didn't let her go; I put my hands on her back, she yelled "Don't touch me". I apologized and said: "This is your place too. Stay with us with your overwhelming feelings". She returned and the group became quiet.

Jane dared to say: "I know why Mary doesn't show us; she's ashamed that the trees are not exactly as she wanted them to be". I feel ashamed too... many times.... that my parents are Christian; they use crosses on their chests; I hid them from my class mates.

The theme of shame had opened for the first time in the group and they shared their feelings:

Zena: "I'm ashamed of the fights between my parents... they scream..."
Maggie shared she was ashamed that her dad is at home and doesn't work.

Mary listened quietly (for the first time) with a sealed face. Jane asked her again: "What are you hiding?" Mary hesitated but replied: "I don't have my own room; my parents are busy with the new families..."

Lia listened to her, then looked at her face and said: "I've always had a home but... by the time I was seven, I thought grandma was my mom and that my mom was my sister. They lied to me. Mom gave birth to me when she was 16". Mary started crying silently. Others too.

I told them we shared important things. "We are all trying to figure out where one can find a restful place even when everything is chaotic around; you are a group of strong and brave girls".

Meeting number 5

They all arrived on time, the meeting began in a quiet atmosphere. I was also quiet, trying to express calmness, but worried about the continuation



of our last significant encounter. I couldn't avoid having expectations. The group was supposed to create a *common forest* this meeting. During their discussions about the location of each tree on the common sheet (base of the forest), Mary's tree was torn up. It was too much for her. Although she didn't run away like she used to, she burst into tears. Zena stood up, tore her own tree and said: "I've got a torn tree, too, so what? In the woods there are all kinds of trees!" Lia took scissors and cut hers too. Maggie did the same. Jane, insecure, cut her beautiful tree into four pieces; then, she puts the pieces of her tree close to each other, freaked out of her own action. Dina was silent, paralyzed. Maggie told her, "You don't have to cut yours", in a protective voice. Then, Dina cut her tree into small pieces in a rebel way. I kept observing how the group managed the situation and faced the difficulties. After Dina's act, there was a long silence. The torn trees were all on the table in front of us, over the big, brown paper sheet. I broke the silence: "as in life, we have a forest consisting of all kinds of trees; everyone needs and deserves a fertile ground to flourish. Are you ready to create a common forest? Besides the damaged parts there are so many special details, forms and colors... there is a lot in common and you also complete each other".

Jane took the leadership, caring about the overall design, and suggested that each one of them would put their tree pieces wherever they wanted to. Mary didn't cooperate. Jane didn't give up: "Please Mary, come on! It's our forest and we want you with us". Mary, audaciously, agreed to put half a tree inside. Dina was undecided and Maggie tried to help her, like always; Dina said: "you don't have to care about me". This was a completely different behavior. The group has shifted to a new development stage.

Those were meaningful encounters. Later, the girls opened up and could bring other inner voices. Afterwards, they worked on the topic: my own room. It was then, inside their room painting, when Mary wrote the quote: "home is where the heart is"; all the girls' eyes (and hearts) met in that precious moment.

After 15 sessions, there were considerable changes:

- Mary became more trusting. She also shared that she had asked her mom to make a space just to herself in their house.
- Dina shared that she felt ashamed of her parents whenever they come to competitions and, hence, she refrains from participating; the group suggested her to gently tell them not to come.



- Jane came out strengthened by practicing her artistic abilities and got more involved in school projects.
- Lia has become very attached to Julia; they even prepared costumes for a school show together.
- Maggie and Zena began to care more about themselves at the group meetings, and, hopefully, they will continue it outside.

In the described case study, it is possible to identify the transition from the fighting/escaping position to one of deep work and great reflectivity due to the other.

Mary, who experienced herself rejected by her parents, having no home, was used to use aggressiveness to get others' attention; that destroyed any possibility of a real connection. The encounter with the tenderness and pain of the others, who had not given up on her as a member of the group, allowed her to bring her weaknesses to the new relationships. By sharing, she won the group's empathy, that softened her.

Jane, who used painting to escape from social connections, started to make small steps in using painting as means of communication with the new society.

Dina, the athlete who was ashamed of her parents, gained confidence in being more independent.

Lia, whose artistic character caused her isolation, protecting her from the family mess, began to better communicate in groups, using her sense of aesthetics.

Thoughts on the whole process

For a long time, this group had deeply occupied my mind, leaving a special mark on me, perhaps due to the sensitive issues on my counter-transference. Could I be a good enough mother even as a foreigner (my own children are Israeli and I am a Brazilian living in Israel)? Could I deal well with SHAME issues connected to immigration?

The presented case shows how expressive arts facilitate mirroring and resonance among the young members, what led to building the group's cohesion. This process allows the building of a safe space among the girls; the usual inefficient defenses could be put aside (like neglect, avoidance, devaluation etc.). In addition, the girls started to connect in a more positive manner: exchange and learning processes could take place. Thus, both group



members and conductor had been experienced as providing caregivers rather than depriving ones.

Mirroring and resonance through art—common language

Psychology sets an important role for mirroring. Winnicott (1985) conceptualizes that through the mother's eyes, the baby sees himself reflected in the maternal good-care mirror.

For Kohut, mirroring is a fundamental transference attitude, one that underpins the child's ability to feel valuable under the simple law: I am reflected—therefore I exist. Since immigrants are occupied with adaptation challenges, not once their children experience a lack of good mirroring from them (Schermer, 2021). This seemed to happen at the presented group: they all arrived striving for *positive mirroring*.

At the very beginning, Mary mirrored the girls in a negative way, defying and attacking the links—her usual way to connect. She couldn't "believe" in groups, based on her family experience. The girls reacted according to their common defenses: not reacting, shutting up, avoiding.

Mirroring in the group entails also negative sides; Pines (1984) wrote that *negative mirroring* can allow emotional and social growth if worked-through constructively. For Zinkin (1994), in extreme situations, it is necessary to *sacrifice* participants in the group. Negative mirroring may result from a particular developmental stage of the group, like here. I tried to understand my initial silence regarding Mary's negativism from the beginning: "Why didn't I stop her in a stronger manner?"

I believe it is connected to my mother. She used to get involved only in specific fights in our house; towards my immigrant father's provocations, she used not to react; towards my brother and I, she used to say "just don't hit your lungs and enjoy the fight". She believed in us and this empowered the relationship between me and my brother.

I tried to encourage the group to explore the "hall of mirrors", by experiencing art, believing that it allows an important encounter, and that mirroring reactions are tools that enable the restoration of important issues, suitable for processing and development. Art was a new space to rest, to create and to hold the conflicts. The group work, through arts, allows intangible feelings to become tangible and expressed (Liebmann, 2004).



Later, the cards conflict mirrored to the girls' common aspects from themselves: the emptiness, their "strive for attention", the fear of being left "with nothing". Mary had no self-control and was unbearable; yet, her aggressiveness led to cohesiveness of the others, who united against her.

As therapists, we risk repeating common behaviors when we automatically establish rules and engage in a verbal dialogue. For young immigrants, such formality just gives them a place to hide or to rebel. Mothers instinctively know that children learn best from modeling, experimenting or from spontaneous interactions. As Schermer (2021) suggested, I see that it is important to invigorate the meetings with ways of relating beyond words to the deeper earliest roots of the child's acculturation. Sitting down in silence around the cards puzzle, after their big dispute, was my way of modelling relaxation and protecting the group from scapegoating.

Resonance on shame issues

At our first meetings, Mary mirrored the hunger for attention to the group, the deep need for belonging, and at the same time the fear of "getting it but then losing it". Despite the dramatic way the group dealt with those fears, acting in FIGHT or FLIGHT mode, literally, the group succeeded moving to another stage, checking intimacy between members.

Mary didn't turn into a scapegoat; she ran away from the group, but surrendered to the reaching out of her friends, and returned to the sessions. Working on her personal tree piece of art, Lia, the "childish" one, used her impulsiveness in a positive way and confronted Mary when the later hid her trees, ashamed. Lia's spontaneity inspired Jane, who dared to open up about shame. This was a turning point in the group process, when they all shared; it was empowering.

Listening to the personal stories of the others and the sensitive issues they have gone so far was not only a reconstruction of experiences from the past, but also a recreation of a new reality of the group. Art sharing evoked resonance: remembering one story in the context of the other's story, and finding the similarities and emotional echoes between them makes it possible to find additional angles of observation and create new references (Ashbach & Schermer, 1994).



According to Foulkes, as cited by Thorton (2004), understanding the group resonance makes it easier for the conductor to relate to destructive development and the formation of narcissistic character.

As an immigrant mother and daughter of an immigrant father (from Iraq, living in Brazil), the girls' personal stories felt close to mine. I remember being ashamed that my father was bold, looking different from common Brazilian men. The girls sharing resonated with my past experience on shame and guilt feelings towards my dad; they couldn't connect with their parents regarding that—as I couldn't. Hence, they avoided social situations. I believe that deeply understanding them helped me trust the therapeutic group process.

Shame relates to how we imagine we are seen by others, and a concern regarding disruption in creating social bonds. It is a common experience in relationships, affecting group settings. It can have deep effects on the group matrix as a potentially safe container (Birchmore, 2017).

It was risky; but although the vulnerability they brought when sharing their shame issues, group cohesion trespassed the fear of exposure. Their belonging needs were stronger.

Exchange and identities empowerment

According to Foulkes (1975), the uniqueness of the group is that it enables encounters with differences without judgment. According to Nitsun (2006), the variance in the group invites intense comparisons and discomfort: There is a great potential for Envy.

At the beginning, Mary acted out her envy towards the group members, while mirroring them the needs (and fears) of belonging. The group resisted her attacks and the artistic setting promoted a playful and common language for better communication and further connections.

Group cohesion kept growing and the girls could feel more spontaneous, daring in their creativity. The catharsis occurred in the fifth meeting, when they could create a forest for all their harmed trees. It was moving to watch them modelling and learning from each other, giving up perfection, and realizing that, not once, togetherness demands sacrifices.

This is where the role of the exchange comes in. Foulkes defines exchange as one of the important therapeutic factors in the group.



Although the girls were immigrants, dealing with similar social difficulties at school, they were different both in their qualities and defenses. Their trees were different too, even in the manner in which they were disrupted. According to Zinkin (1994), exchange and mirroring aspects in a group are both opposite and complementary to each other. Mirroring enables growth and insight through similarities, while achieved through differences (when one has what the other lacks and vice versa). Consciously and unconsciously, the girls moved from their usual roles based on the others' behaviors. This situation created a corrective process, with opportunities for mutual learning.

After this dramatic phase, the six initial meetings, the girls could explore new connections in a more intimate way, also other progresses occurred outside the group.

Exchange within the group process allows identity development. Members can discover new possibilities through one another, which leads to the development of a sense of more inner freedom inside and outside the group. As Dalal (1998) wrote, the individual identity is rebuilt and reshaped by the group experiences.

SUMMARY AND CONCLUSION

Therapy with immigrants requires maintaining the emotional connection between people of distinct cultures. As culture is initially transmitted in pre-verbal interactions between mothers and infants (Schermer, 2021), the field of expressive arts research can be utilized to provide models for mutual attunement in group psychotherapy for immigrants: arts are a primary language (Noy, 1999).

One's initial sense of security develops from caregivers at childhood. Mother is the provider of nurturance, security, and assimilation into the family and culture. Especially in immigrant groups, the maternal aspects of the group and leader are extremely important in creating a safe place for self-expression that is beneficial to the members (Ashbach & Schermer, 1994); as described in this group. However, its primordial trying not to "be stacked" in basic assumption of dependence, in which the members implicitly believe the conductor can fulfil all their requirements (Bion, 1959). It is challenging and it requests self-reflection and supervision for the therapist.



Some points to acknowledge from the case study

- The unspoken mirroring, resonance and exchange, through arts, are important parts of the therapeutic process, as many immigrants experience chronic difficulty in expressing themselves into words. The use of art can be resumed in four steps:

1st Opening individual creativity: inviting group members to create personal imagery from art materials.

2nd Spontaneous creation of visual imagery, mirroring feelings to each other in a symbolic/artistic form.

3rd Verbal communication through their art pieces: promoting members' interaction, which primarily facilitates resonance and, further, group connections; conflicts may arouse but art mirrors common aspects and allow members to communicate while “resting and enjoying”.

4th Deepening verbal communication through art common work: feelings become more tangible, not once, less scary, as resonance and further exchange processes can take place in the group.

- Shame issues are part of immigrants' feelings in all ages and it seems to take place for generations. Since it is a delicate topic in psychotherapy (Birchmore, 2017), group conductors may be alert to group defenses, needs and readiness when getting to those issues. Cultural sensitivity and awareness to the group rhythm are a must.

- Usually, when planning groups for adolescent immigrants, aiming to improve social skills, the basic thought is integrating natives and immigrants. According to my experience, it is important to allow immigrants to be in a group with other immigrants in order to promote sharing of similar experiences and further self-esteem improvement.

The aim of group therapy for immigrant children is not to suppress cultural differences, but rather to build proactive connections in a context of cultural diversity: a container which holds differentiation in a respectful and creative way.

Group art therapy seems to be an effective mean for psychological and social support for immigrant adolescents, as it enables them to address issues of belonging, identity, self-image and self-control.



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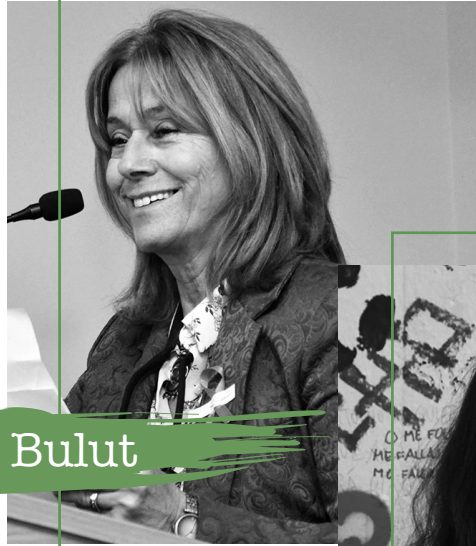
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CHAPTER 2

Group Work with Syrian Refugee Women: An Example of Turkey

As a result of the civil war that started in Syria in 2011, many asylum seekers and refugees immigrated to Turkey. During and after this migration, women asylum seekers and refugees constituted one of the vulnerable groups. The traumatic experiences of these women led to the need for psychosocial support. In this context, a group work was conducted with Syrian females who migrated to Turkey. The aim of this chapter is to give information about this group work. The objective of group work is to empower and increase the relations between female Syrians who live in Ankara province and to evaluate the effects of group work. The group was formed from 16 Syrian female refugees and a total of 14 sessions were held. During the group work, techniques such as empty chair, daydream, story building, group and individual story building techniques, and changing roles were used. In the group where cultural diversity came to the fore, a therapeutic relationship was established and empowered and increased the relations were achieved.





INTRODUCTION

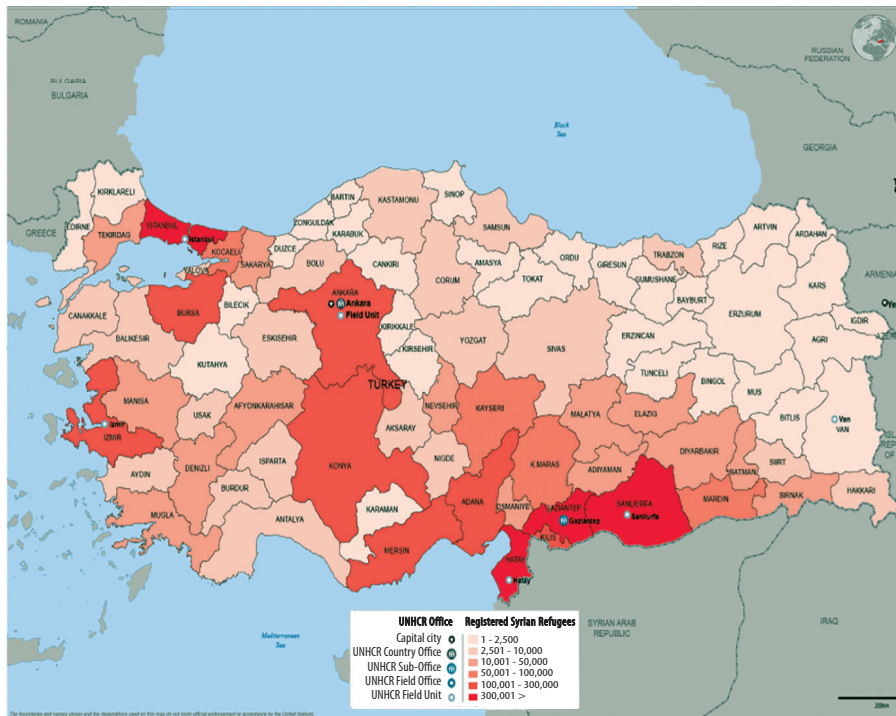
Syria is located on the eastern end of the Mediterranean Sea. It bordered by Turkey on the north, Israel, and Lebanon on the west, Iraq on the east, and Jordan on the south. A civil war broke out in Syria in 2011. This war adversely affected the lives of women and children. These challenging conditions led to the migration of local people in the region. In October 2017, the three-year conflict in Syria has displaced nearly 9.5 million people, more than 40% of the country prewar population. Of these, over 3 million have found temporary asylum in the neighboring countries of Lebanon, Turkey, Jordan, Iraq, and Egypt. About 6.5 million are internally displaced. In addition to adverse conditions like malnutrition due to the war in their own countries, being unable to find enough water for cleaning, Syrian refugees who suffer health problems due to the psychological effects of the war also carry these health problems to the regions they go to (İçduygu, 2015). After the arduous migration path Syrian refugees who came to Turkey for service, both in the civil sphere, began to be offered in the field of nongovernmental organizations (NGOs). These services include psychosocial services as well as basic needs (like food, shelter, security). In this study, an example of working with a group is presented (Baban et al., 2017).

Current situation of Syrian asylum seekers in Turkey

First will be looking at the general situation of Syrian refugees in Turkey; 3.64975 million Syrians registered as living in Turkey. This number has been increasing every year since 2011. Syrians with temporary protection status live in Turkey and 97.6% of registered Syrians live in cities, not camps. According to official data, Syrians live densely in Hatay, Gaziantep, Şanlıurfa, Mersin and Adana. Syria's population is 90% Muslim. Christians form 10% of the population (Fig. 1) (Directorate General of Migration Management, 2020).



Figure 1. Distribution of Syrian refugees in Turkey.



Retrieved from UNHCR Turkey (2021). In the public domain.

Syrians must have temporary protection status to manage their rights. Syrian irregular migrants are considered to act with targets, including illegal immigration to another country, and their numbers are not high compared to registered ones (United Nations Population Fund, 2015). According to the data of the Directorate General of Migration Management, as of 2019, 21,988 irregular migrants of Syrian nationality were engaged. Like many developing countries, people in the rural areas have far less access to viable economic means, social services, and medical care (Directorate General of Migration Management, 2020).

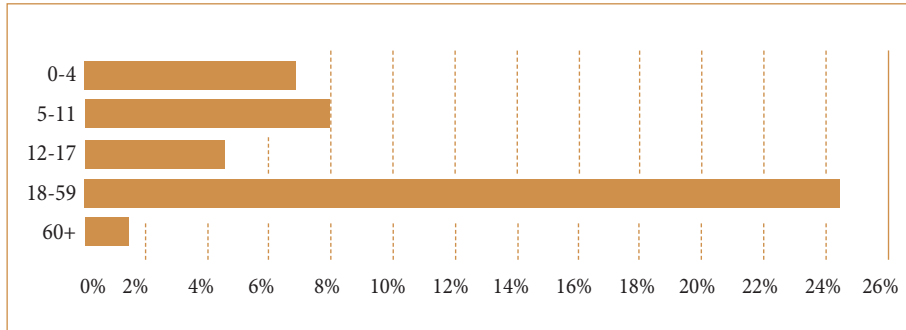
Profile of Syrian asylum seeker women in Turkey

The majority of Syrian migrant women are between the ages of 18–59 (Fig. 2).





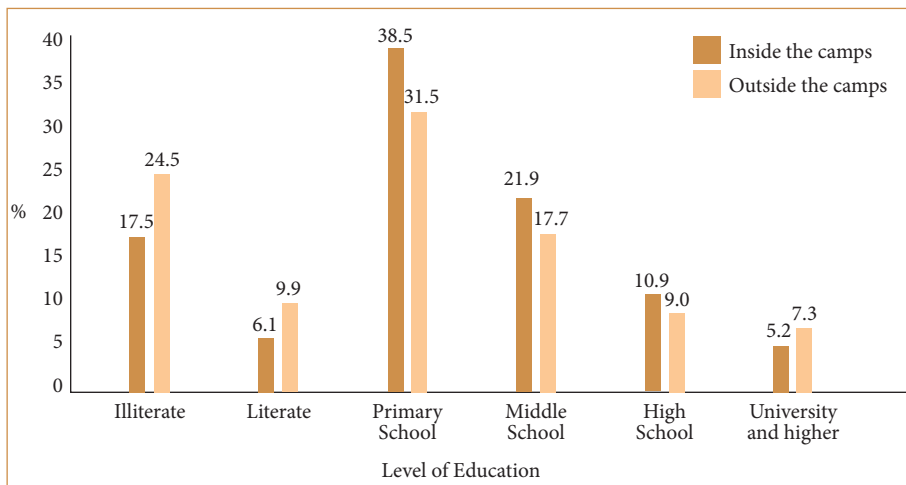
Figure 2. Age distribution of Syrian migrant women.



Retrieved from Irregular Migration. Adapted from 2020 by Directorate General of Migration Management (2020). In the public domain.

Domestic violence, early marriages, and polygamist marriages are frequently observed among Syrians in Turkey living inside and outside the camps. Most of the Syrian refugee women both inside and outside the camps are primary school graduates (Fig. 3).

Figure 3. Educational status of Syrian refugee women.



Retrieved from Irregular Migration. Adapted from 2020 by Directorate General of Migration Management (2020). In the public domain.

The majority of Syrian refugee women, both inside and outside the camps, do not work in a regular income job (Table 1).



Table 1. Occupational status of Syrian refugee women.

Occupation	Inside the camps		Outside the camps		Overall	
	Number	%	Number	%	Number	%
Housewife	1342	48.7	1195	69.4	2537	56.7
No occupation	1056	38.3	294	17.1	1350	30.2
Teacher	91	3.3	73	4.2	164	3.7
Tailor/Dress maker/Hat maker	25	0.9	11	0.6	36	0.8
Hairdresser/Barber	15	0.5	12	0.7	27	0.6
Farmer	9	0.3	97	0.5	18	0.4
Farm Worker/Assistant	7	0.3	7	0.4	14	0.3
Nurse/Midwife	8	0.3	4	0.2	12	0.3
Other	202	7.3	116	6.7	318	7.1
Total	2755	100	1721	100	4476	100

Retrieved from Irregular Migration. Adapted from 2020 by Directorate General of Migration Management (2020). In the public domain.

Women and children constitute the most problematic group in the immigration process. These challenging conditions include areas such as not being able to benefit from humanitarian services, coping with problems, and not getting along with the local people in the region (Çevik et al., 2018). They must navigate in a recent cultural system, which will result in feelings of disconnection. These women must overcome cultural, and language barriers must seek employment and medical attention while making other decisions regarding their lives and families (Freedman et al., 2017).

Due to the conflict in Syria, women have faced and continue to encounter many difficulties. There are arrests for losing their relatives, from physical and economic difficulties to gender-based violence. Especially young girls are faced with various risks like violence, disruption of education, early marriage, and pregnancy (AFAD, 2014). More than half of the Syrians living in Turkey are children and youth under the age of 18. More than one-third of them are children and women in need of protection (Sahin et al., 2021). The problems faced by Syrian refugee women are as follows: lack of humanitarian aid, resettlement, security, relationships with local people (negative and positive attitudes), political reasons, health conditions, economic reasons, educational reasons, psychosocial problems, women who lost their husbands in battle, women whose husbands cannot find a job even though came to Turkey, surviving in unhealthy living conditions, the profession acquired in Syria cannot continue in Turkey, having the responsibility of their children who are



exposed to violence and discrimination within and outside the family, direct exposure to or witnessing violence, sexual assault and gender-based violence, torture and detention, disruption of family and community, lack of access to basic resources (food, water, medical care, shelter), and long journeys on foot, living in refugee camps (Acarturk et al., 2018; Ekmekci, 2017; Narlı et al., 2020; Samari, 2015).

Social acceptance of Syrian refugee women

During the most massive humanitarian crisis in the world, countries neighboring Syria, Turkey particularly, have been left alone by the developed Western world. Although they constantly express sensitivity to the open doors and temporary protection policies of Turkey. Western societies are far from showing sincere support. Each family supported by the Emergency Social Safety Net (ESSN) receives a debit card (called Kızılay Card), loaded monthly with 120 Turkish Liras (almost 33 USD) per child.

The Hacettepe University Migration and Politics Research Center (HUGO) conducted research on the social acceptance and integration of Syrians in Turkey. The study conducted with people who escaped from the initial conflict, which is ongoing in their country since 2011 and who sought refuge in Turkey within the framework of the open doors policy and are provided with temporary protection (Erdoğan, 2014).

The Turkish Red Crescent and the Turkish government to deliver a cash assistance program helping vulnerable refugees cover basic needs like food, rent, utilities, medicine, and clothing. Results of the research showed that living together with Syrians is uneasy. Because there is a huge cultural gap between Turkish society and Syrians, where the former is not sympathetic towards the conferment of citizenship on the latter.

Although the Syrians in Turkey state that they may eventually return if a peaceful environment is established in their country, they admit it is becoming impossible in short and middle terms. It means a significant number of Syrians will not turn back. This reality is growing tension in society.

The crisis over Syrians is one of the severest crises faced by Turkey and the world. The efforts at the authorities from the Ministry of Interior Affairs, Disaster and Emergency Management Presidency, and The Turkish Red Crescent are worthy of praise.



Syrians are content and satisfied to be in Turkey. They want to return to their country, when possible, nevertheless they know that such possibility remains less likely day by day. It is observed that if Turkey confers citizenship on them, they will instantly accept. They are displeased to be defined as guests.

One of the most important predictions of this study (Erdoğan, 2014) is that day by day Syrians in Turkey are getting further from being temporary to becoming permanent. Social acceptance of Turkish society is immensely extraordinary on the issue of Syrians in Turkey, though certain limitations are evident as hospitality may turn into hate and enmity, which is a potential occurrence to be taken seriously.

Some of the Turkish citizens are not thinking good for the Syrians. Their ideas are like that (İçduygu & Diker, 2017):

- Syrians took the jobs of local people. This is the serious concern within the region.
- They are an economic burden for Turkey.
- Syrians may disturb peace and order.
- Serious problems may arise if Syrians stay in Turkey.
- 30% of Turkish people expressed that they directly or indirectly supported Syrians morally or materially.

Problems are increasing rents (unable to pay rents, 15–20 people in the homes); fear of losing jobs (competitions-labor supply, resigning their jobs, hospital emergency rooms filled with Syrian crowds disturbs local people), and disruptions in receiving local services mainly healthcare (priority is given to Syrians rather than Turkish people) (Erdoğan, 2014).

Economic issues: The economic issues appear to remain a key point of contention for both communities. Perceptions of being undercut in the labor market are strong among the host community, while the refugees feel underpaid and overcharged. Unemployment remains a severe problem not only for Syrians but also for Turkish people. The unemployment rate is around 14% in Turkey. It is severer for the university graduates (around 25%). Many people are suffering absolute poverty. For this reason, it is challenging for the Syrians to find jobs. Syrians who consider a profession should prove the equivalency of it with the Turkish same profession (Erdoğan, 2014).

Gender issues: A camp authority stated that they investigated a complaint about women who reportedly have been working as prostitutes in



Syria and continued in the camp, in which they took the necessary measures (Erdoğan, 2014).

Educational issues: Syrian's educational level is remarkably low in Turkey. Education for children is a severe problem. 350,000 Syrian children are going to public schools within inclusive education. But the language gap is an urgent problem. In the schools at the camps, education is Arabic. Around 170,000 children are attending these schools (Erdoğan, 2014).

Healthcare issues: Newborn babies in Turkey around 330,000. They are increasing not only migration, but also by birth. There was no polio, measles and tuberculosis in Turkey. After the migration, these diseases are being shown in Turkey again. Addiction (i.e., drugs, alcohol, etc.) is increasing in every city. It is a kind of coping strategy for the Syrians (Erdoğan, 2014).

Marriage issues: Another problem is child marriages, which are common, and most of these are in the form of polygamous marriages involving several wives. The marriage of 13–16 years old girls is perceived as normal by a large segment of Syrians. Marriages are taking place on religious terms inside the families without being registered (Erdoğan, 2014).

Two group studies were conducted on Syrian refugee women in this study. The first of these was focus group work. The problems and needs of Syrian refugee women were identified in the focus group study. Then therapeutic group work was applied.

The focus group

The focus group was conducted by Bulut and Çoban (2018) in a province in Ankara. The population of the province is around 366.000. The Turkish Red Crescent Society has a community center there. Bulut and Çoban (2018) had a focus group meeting there with the Turkish people about their Syrian neighbors. It is a qualitative research, which purpose represents the interactions and relationships with the Syrians around and the problems encountered with them. Two focus groups are held (with nine and 19 members). Planned questions were asked to the group members. Groups took approximately 2 h each. Groups were organized by the Turkish Red Crescent Society. All the group meetings had different participants. Age of the participants were 28–67 years old. Most of them were graduates of



elementary school. The themes obtained from this focus group study express as follows that it is clear that the Turkish government has to take precautions to uncontrolled migration for the refugees. For the adjustment of permanent Syrians, humanitarian needs—like education, healthcare, employment, etc.—must be provided by government in lights of human rights. It is necessary to plan and practice some interventions for Turkish and Syrians to accept each other.

Therapeutic group work with Syrian refugee women

The group members find inspiration and motivation in the stories of other Syrian female refugees and obtain a unique kind of support that helps them gain social functions return to their lives. Group therapy is uniquely powerful for refugees. Syrian female refugees constitute a significant and growing proportion of the national population. Syrian female refugees come from culturally and linguistically diverse backgrounds and have needs that may well not be adequately met by existing health or human services. Syrian female refugees are likely to include subgroups that are at significant risk of mental illness or dysfunction due to pre- and post-migration stresses and challenges. It gives the client the opportunity to share her feelings with other female refugees. It provides an environment in which female refugees can share their experiences.

The objective of group therapy is to empower and increase the relations between female Syrians who live in Ankara province and to evaluate the effects of group therapy. The group was formed by researchers with female Syrian refugees who get services at the community center of the Turkish Red Crescent Society. Fourteen female Syrian refugees get services from a community center by the Turkish Red Crescent Society in Ankara. The participants were preferred according to the needs assessment procedure and by the feedback of professional staff performing full time at the institution. All the group members were living in different neighborhoods in Altındağ, Ankara. All the group members continued all the group meetings. Age is minimum 23, maximum 55. All of the participants have been in Turkey for at least one year. Many of them have lived in different cities in Syria, for example, Aleppo, Humus, etc. The sociodemographic characteristics of the participants can be expressed as follows (Table 2).



Table 2. Sociodemographic characteristics of participants.

Nickname	Age	Occupation	Working status	Marital status	Children number	Living with
Ğunva	24	French translator	–	Single	–	Her family
Alya	30	–	–	Married	2	Her husband, mother-in-law and children
Şükriye	48	Teacher	–	Widow (husband died in the Syrian War)	6	Her daughter
Vaad	25	–	–	Married	2	Her husband and children
Maha	24	–	–	Married	4 (and pregnant)	Her extended family
Fertin	43	–	–	Married	1	Her husband, children and children-in-law
Aişe	40	–	–	Married	3	Her husband and children
Saniye	43	Nurse	Working with a Syrian doctor	Married	2	Alone (her husband is in Aleppo and children are in Europe for education)
Imer	36	Lawyer	Working part time as a director in a school	Married	4	Her husband and children
Nahla	49	Engineer	Working in NGO voluntarily	Widow (husband died in the Syrian War)	6	Her children
Alya	30	–	–	Married	4	Her husband and children
Semer	50	Lawyer	–	Married	2	Her daughter (her husband and daughter in Syria)
Ğunva	23	–	–	Divorced	1	Her mother and daughter
Kevser	43	Nurse	–	Married	3 (and pregnant)	Her husband and children
Umeyye	55	–	–	Widow	4	Her son and children-in-law
Benen	33	–	–	Married	3	Her husband and children



The group was conducted by a leader and a coleader. The leader was working in the department of social work (PhD). She was a social worker and also a psychodramatist. All the group process was recorded by the coleader, who was working in the department of social work (PhD). She was a social worker and also family therapist. The group process conducted with a Turkish–Arabic translator. She is a native speaker in Arabic and she is citizen of Syria and also Turkey. The notes taken by the coleader were used to evaluate the weekly process and to guide the following session goals and activities. Fourteen weekly sessions were conducted by the authors in order to meet the intended aims. Some of the techniques used during group work can be summarized as follows:

Empty chair: Everybody puts somebody (important person) on the chair and talk with them. They put Esad, Erdoğan, her dead husband, son or daughter, and grandfather. They are angry with Esad. Because their life conditions are not good in Turkey. They are unemployed and, some of them, unhappy.

Daydream: They are sitting comfortably, shutting their eyes. After the meditation session, we gave them time to go somewhere imagining. Many of them went to their countries. They remember their life before the war.

Story building: After the distribution of postcards, they tried to write a story about the picture on the card. Stories were about helping each other, relationships with the husbands.

Group and individual story building techniques: It helps understanding the current situation of the participants and their expectations for the future and to get to know the participants “here and now” experiences. They named the group as “Nahya Min Cedid” (let’s live together again).

Changing roles: For the empathy, it is a very useful technique. When the group member changes the roles other important person, she feels his or her feelings and understands her better. They change the role with their relatives, nurses and psychologists at the hospital and also their Turkish neighbors.



CONCLUSIONS

The objective of group therapy was to empower and increase the relations between female Syrians who live in Ankara province and to evaluate the effects of group work. The group was formed from 16 Syrian female refugees and a total of 14 sessions were held. Within the limitations of the number of participants who could continue the group process, it is found that group work had important implications for Syrian refugee females. Group work with Syrian refugee females for 14 weeks has some characteristics. These features can be listed as follows:

Universality: Members noticed that other members share similar feelings, thoughts and problems.

Altruism: Members gained a boost to self-concept through extending help to other group members.

Instillation of hope: Members recognized that other members' success can be helpful and they develop optimism for their own improvement.

Imparting information: Education or advice provided by the therapist.

Cohesiveness: Feelings of trust, belonging and togetherness experienced by the group members.

Interpersonal learning: Members gain personal insight about their interpersonal impact through feedback provided from other members.

Existential factors: Members accepted responsibility for life decisions.

Socializing: The group provided members with an environment that fosters adaptive and effective communication.

Catharsis: Members released strong feelings about the past or present experiences.

Cultural diversity represents a crucial issue in group work in an age of globalization characterized by widespread migration and cultural



contacts. This study is an example of a practice where cultural diversity is at the forefront of group work. In group work, cultural diversity includes beliefs, values, customs, religious background, sexuality, and socioeconomic status. The suggestions can be carried out for group work involving cultural diversity. During the group work process, the group leader must try to appreciate cultural values. This improves the therapeutic relationship. In the group process, the leader should recognize, appreciate and encourage the unique talents and contributions of the participants. The group leader should explore how the culture of the participants relates to the problems and needs they share in the group process. It should also consider how the culture of the participants helped make them who they are today. The group leader should do self-reflection after knowing about the culture of the participants. The leader must examine how effective he or she will be to interact with another different person from himself. The group leader must meet the ever-changing demands of cultural diversity. For this reason, they should receive training on cultural diversity and conduct interviews on this issue during the supervision process. The language barrier of group works dominated by cultural diversity can cause a significant problem. To cope with this problem, it is necessary to cooperate with translators.

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CHAPTER 3

Working with Cultural Diversity in Group Therapy Settings in India

This chapter describes the various multicultural and diverse issues that come up during group sessions in India. It discusses the various nuances that affects families and communities and its consequent impact in a group therapy setting. The vital ingredient for a therapist is cultural competence and cultural sensitivity to understand what is very often not addressed because of caste or class hierarchy within the group. Every therapist has to be especially sensitive to the 5000-year-old caste hierarchy which permeates the entire Indian society and that the therapist is also often a part of. The chapter also discusses the use of psychodrama and other expressive arts therapies which are close to rituals practiced in the community as a modality for treatment of groups.





INTRODUCTION

India is divided into 29 states and seven union territories, with each having its own languages, rituals, food, festivals, and customs. Actually, more than 19,500 distinct languages and dialects are indigenous to India (PTI, 2018). India also has a 5,000-year-old caste system. Caste (or *jati*) shows one's lineage, which community or kinship group one belongs to. People tend to marry and live-in areas where they are surrounded by people of their own caste. In big cities, people live more according to their convenience and not their caste. The group therapy sessions I conduct in Chennai (which is on India's southeast coast) and New Delhi are attended by people coming from different states and cultural backgrounds, and, of course, different castes, classes, etc.

In this chapter, I share my experiences of conducting group therapy sessions with various groups, such as:

- **Lesbian, gay, bisexual, transgender, queer, intersex, and asexual people, and anyone who identifies as queer (LGBTQIA+):** This community often moves from their place of origin to big cities in order to leave their past lives and families—to seek anonymity, better education and employment, and more preferable lifestyles.
- **Parents of LGBTQIA+ people:** This group began in 2009, out of the sheer necessity that issues of parents were not being addressed and there needed to be a way in which family members could connect with one another, especially to deal with shame and guilt, which they were experiencing.
- **People struggling with depression and/or anxiety:** This group meets once a week and started to meet online during the pandemic.
- **Activists who are:** (1) fighting caste politics, (2) working in sex workers' associations, or (3) advocating rights of LGBTQIA+ and/or HIV+ people. Activists come to these groups to address common issues that affect them.
- **Prisoners:** This group is composed of young men aged between 18 and 22 awaiting judgement. These groups are conducted with two armed guards in the room.



- **Psychodrama or expressive arts therapy training groups:** Here the participants are therapists, counsellors, NGO workers, case managers, and others in the helping professions.

From my experience, group therapy has provided opportunities for people who are very different from each other, but who face some similar circumstances to share a common bond of humanity and feel connected.

The field of group counselling must begin to develop its own body of literature, techniques, interventions, and skills to function in a culturally diverse world (Delucia et al., 1992).

Caste and class issues within groups

India, while it is one country, has numerous sub-cultures. One thing that is present all over India is the caste system. For example, during the long period India was colonized there were many conversions to Christianity because the converts wanted to get out of the oppressive caste system. However, even after these conversions, and even 70+ years after independence, most Christians, like the rest of India, still have managed to hold on to their castes. It is almost impossible to drop one's caste, community, and family. The counselling profession has its own hierarchy:

Since its inception the counseling profession has been dominated by a monocultural approach, which is entrenched in social privilege. The dimensions of social privilege include racial privilege (white), gender (male), sexual orientation (heterosexual), socioeconomic status (upper class), age (in constant flux, but benefits or oppresses persons to whom the attribution is ascribed), "ableness", religion (Christianity), and geography (urban) (Harley, et. al., 2008, p. 239).

In India, the most privileged person is the formally-educated, upper caste and upper class cis gendered male. In the groups that I work with, while there may be cultural differences within the group, aspects of Indian culture are shared by all.

When a child is born, the birth is celebrated by the parents, grandparents, siblings of the parents, siblings of the grandparents, and the families that each of these siblings has married into. All of these individuals



become extended family. Even today in India, many children often do not distinguish between first cousins and their own siblings, they often consider a cousin to be their own brother or sister. And since marriages are more or less organized by the family, the entire family assembles as one community. There are many rituals within the first year of birth, including: the naming ceremony, a cradle ceremony, a ceremony to give the infant solid food around four months after birth, and an ear-piercing ceremony. Each community or caste has its own rituals regarding birth, marriage, death and the passage of life. Families are extremely important for people, while growing up as the families provides safety and membership. Enveloping the family system is the caste system. It can be very daunting for an individual to even consider going against the expectations of family and caste.

Caste membership is thus ingrained in the society and there is considerable reason to claim that caste as a type of social identity would probably be one of the most salient identities in the Indian context (Sankaran et al., 2017).

Broadly, India is divided into four major castes. The priests and scholars were traditionally from the Brahmin community, which is on top of the hierarchy. Then there are Kshatriyas, who were warriors and kings. Lower in the hierarchy are the Vaishya, who were merchants and traders; and Shudras, who were laborers and farmers. Then there are those who are so low that they are not even considered to be part of the caste system. These people are called “out-castes”. They performed menial labour. They were the sweepers, toilet cleaners, and such.

In the not-so-distant past, people were forced to keep to their caste professions and were severely admonished and the whole family was punished if one dared to do another task associated with any of the upper castes. But with affirmative action, such as job and education reservations by the government over the years, many of those belonging to the lower castes have had access to education and jobs, which have allowed them to climb the social ladder. We have almost 50% of government jobs and higher education places reserved for people from the lower cast and community. Which means that there are now some lower caste people who have high social status because of their wealth, and upper caste people who may be lower in terms of social status because they are poor, and various other combinations of caste and class.



Therefore, attention to diversity, and cultural competence, have become of great importance in recent years as our society has become increasingly diverse. (Barnett & Bivings, 2002).

Having been introduced to family and caste groups very early in life, people living in India tend to be very group-oriented, and to feel comfortable and safe in groups. Everyone is expected to maintain the secrets of their own families and not allow any embarrassing information relating to the family to pass on to anyone beyond the close family circle.

One-on-one psychotherapy is affordable only by the privileged, and the process is perceived by some to be alienating and threatening. Group therapy, on the other hand, provides familiar senses of belonging and security. But it also means that group members are going to be expected to share some of their family secrets. The group therapist must work to help each group member feel a sense of belonging in the group, and to help the group members to go beyond their loyalties to their family, caste, and class. Caste affects every social system in India.

Ambedkar (1916, para. 4), a great Dalit leader and one of the architects of the Indian Constitution, wrote “If Hindus migrate to other regions on earth, Indian Caste would become a world problem”. Ambedkar was *prophetic* about this, according to an article in the New York Times that reported a lawsuit regarding two high caste Indian men who denied an employee, a low caste man from India, promotions and a raise in their California-based company (Dutt, 2020).

Within the prison setting, where violence can erupt anytime, caste is also an issue which needs to be taken into consideration. Typically, a lower caste prisoner would be serving an upper caste prisoner. To avoid this, prison authorities must house prisoners separately, sometimes based on caste.

The caste issue appeared to me on the very first session of the group, while I did different sociometric exercises to build cohesion and set up norms of working together. It became obvious there were at least three different gangs within the group, the members of these gangs stayed together and maintained sullen silences. Towards the end of the session, while I was thinking that getting this group to work together is going to be a huge task, one young man from the upper caste suddenly announced to me that he was willing to work with the “others” within the room. This was a breakthrough. I immediately asked the other young men in his group if any of them agreed with him and



three young men grudgingly raised their hands, this was to show support to their own gang. This immediately set the pace for everyone, particularly for those coming from the other castes, to be more at ease and to develop a truce, but within that room only.

In every group in which one works in India, the theme of caste is deeply rooted. This is usually not declared openly. It usually becomes clear to which caste a participant belongs by the person's family name and the way the person speaks. For instance, in the Tamil language certain words are spoken only by the upper (Brahmin) caste. When people coming from the lower castes understand that a group member belongs to the upper caste, they may allow the person from the upper caste more group time or they may also subtly seek for the upper caste person's approval in the group or fall silent and wait their turn to speak, which could be for many days. Transgenerational trauma that caste brings is an issue that all group therapists need to actively address rather than pretend it does not exist. It is difficult for therapists to address this because it touches on the therapist's own caste, and the therapist's feelings about this often very uncomfortable topic.

Mata, Pita, Guru, Deivam

Another theme that comes up often in groups in India is the importance of the family. The extent to which parents can be a part of an adult's life can be extremely toxic. In many cases the conditioning since childhood is to respect elders, beginning with the parents. The adage, "Mata, Pita, Guru, Deivam" (mother, father, teacher, god) is taught when we are very young. This literally means: a child's first allegiance is to his/her mother. It is the mother who introduces the child to the father. The parents together raise the child and introduce the child to a teacher, and it is the teacher's responsibility and duty to help the child understand God or consciousness, thereby bringing self-awareness. Thus, one's loyalty, responsibility and duty are first to the mother, then the father, then the teacher, and then God, in this order of priority.

A person's responsibility or duty to the family is considered the highest obligation for every adult. People are expected to do what their parents tell them all their lives. So much so that even after being married, one needs to follow one's parents' wishes. This unspoken rule must be followed all the more,



in a heterosexual marriage, where the match was facilitated by the parents of the couple. Conflicts that happen between the members of the couple often arise because one or both partners must follow the expectations of one set of parents. Usually, the parents of the husband have more authority than the parents of the wife.

Mother–child affections are glorified and even worshipped as normal and natural. Any differences or deviations are viewed as sacrilege. Filial piety or parent child bond supersedes all other forms of interpersonal relationships (Venkatesan, 2016).

In group therapy, the topic of parents is generally avoided and expressed very tentatively, especially in a group that is new. This is due to the unspoken rule that one cannot talk about one's parents behind their backs because this would show disloyalty. When a group member expresses how unreasonable his/her parent is, it is not unusual for other group members to quickly defend the role of parents as being loving, nurturing, and protective; perhaps making comments that parents sacrifice a lot, and they don't intend to hurt you. Through many years of running groups, I find that when the group members begin to share about their parents, it shows that the group feels safe enough to do so. It takes a group therapist a lot of effort to create this safety where group members are able to safely, with the help of each other, process what it is to be a son or daughter to their parents.

This process of finding and expressing themselves can be very emotional and stressful. As a group therapist one of my responsibilities is to support group members who begin to express their frustrations with their parents, to role model for other group members to listen, and to ask the other group members if they may have had any similar experiences.

Interdependence rather than independence is expected to be in harmony with one's social context. Dependency, especially of women, elderly and children, is considered normal, natural and expected (Venkatesan, 2016).

Rituals within groups need to be close to cultural practices

According to Sue et al. (2009, p. 3),

If therapists or counselors are generally competent to conduct psychotherapy, they should be able to demonstrate their skills with a range of culturally



diverse clients. Proponents of cultural competency, however, believe that competency is largely a relative skill or quality, depending on one's cultural expertise or orientation. Their definitions of cultural competency assume that expertise or effectiveness in treatment can differ according to the client's ethnic or racial group.

I find psychodrama to be an effective way of working with communities as it seems like it is close to some rituals that are practiced in India. One community in India still follows a practice of finishing unfinished business, especially regarding the demise of a close family member, which is similar to psychodrama. An example of this was related to me by a participant, Meena, in a training group. This participant had lost her mother two months before she attended her first psychodrama workshop. She was the protagonist and she spoke to her mother in psychodrama. In her drama, she chose an auxiliary to be her mother and part of the psychodrama was where she set the scene in which she spoke to her mother, telling her she missed her. After the sharing with the other group members was completed, she shared that her family did a similar ritual a week after her mother's demise as was the custom of her community.

A local shaman performs a ritual involving talking to the person who has recently left the world. This shaman is usually a woman. The shaman is well respected and supported by her whole community: community members provide her with a house, food, money, etc. She lives outside the village, which allows her to concentrate on her religious practices without being called to duty by her own family. When a member of the community meets with an untimely death, the shaman plays the role of the dead person and becomes available for people to talk to the dead person and say proper goodbyes to that person.

In this case, the shaman was given the clothes of Meena's mother, Shyamala, to wear. The shaman, appearing as Shyamala, entered what had been Meena's parents' home, where Meena, her brothers, and her father sat down together with this woman, who was now in the role of Shyamala, mother to Meena and her brothers and wife of Meena's father. The family members were encouraged to ask questions to Shyamala, such as: "why did you leave us so early?" and "is there something you would like us to do?"

The shaman answered as Shyamala and, after all members of the family talked with her, she said it was time to go and she left, with a quick goodbye.



She did not turn back even when her family called after her. This ritualistic practice of finishing unfinished business is practiced by some communities even today.

Psychodrama session with young prisoners

The young men have very stereotypical versions of how to respect mothers. They have learned some of these ideal stereotypes from movies. Indian movies often portray a mother who sacrifices everything for her children and, therefore, all her children have a duty to respect her and spend the rest of their lives keeping their mothers happy. The young men in prison like to believe that they have not disappointed their mothers. In one of the first psychodramas that I directed in prison, members of the group were taken through a guided imagery and then were directed into working on their imagery.

Ranjit, a young man who volunteered to be the protagonist, created a scene in which he was in heaven, surrounded by beautiful soft clouds. People were gathering flowers for the *puja* (prayer) that was about to begin. He saw an image of God and, in this scene, Ranjit was sitting with folded hands in front of God. He apologized to God “for making my mother cry”. In the drama, he depicted his sorrow and guilt not of the crime he had committed, for which he was in jail, or that he had jeopardized his future, but rather the guilt of being a disappointment to his mother.

The protagonist (Ranjit) had chosen another young person (Diwakar) to play the role of God. However, Diwakar could not stay in role and refused to continue to play God. Thus, in the middle of the action, the protagonist chose someone else to play God.

During the sharing, Ranjit apologized to Diwakar, whom he first chose as God, saying that he thought Diwakar was the best person to play God for him. There was a moment of complete shock for Diwakar, who froze for a few seconds. Something about Diwakar changed that day. He was more present and participative in the sessions that followed. Many of the prisoners were coming from families in which their fathers and grandfathers had been gang members. In other words, from birth they had inherited enemies and needed to protect themselves and their families as they grew older. Many of the young men in the sessions fantasized that when they would get out of prison, they



would take their mothers and go away to a place where no one recognised them and they could start their lives again.

A high premium is placed on family unity and cohesiveness, which are necessary for family stability and survival. Any behaviour that threatens this cooperative spirit and unity is discouraged. Sharing and mutual dependence occur at all stages of the family life cycle, thus contributing to a sense of safety and security in the family fold (Carson & Chowdhury, 2000).

Group therapy session for LGBTQI+ people

A 30-year-old gay man who had *not* come out to his parents about his sexuality had nonetheless conveyed to his parents that he was not interested in being married and they should not seek a bride for him. He shared how his parents considered him a failure and a disappointment to them because he was not going to get married, and as a result of this, they were not going to have grandchildren. He felt that his parents were very concerned about how they would be judged by the society and community as parents who had not raised their son well as they were not performing their responsibility to society properly.

When he shared this, the other members of the group became agitated because this client, by articulating his concerns, had managed to express the difficult and in some ways taboo topic of speaking against one's parents. Various group members then discussed their own concerns and frustrations about being a failure in the eyes of their parents. One group member said:

Another group member said he was considered “*useless*” by his parents, “We are not just their possessions; we are their *failed possessions*”.

This topic seemed to be something that the group members felt free to articulate without worry about being judged for complaining about their parents. There was shame and guilt for not bringing children and continue their family/caste, etc. This sense of having failed the parents had left a deep psychological scar on many group members. Anger is an emotion that children are not permitted to direct to their parents in our culture. Psychodrama allows this expression. I have found psychodrama to be a method that has helped several group members express their sadness, grief, and anger and experience a catharsis of abreaction, as Moreno would have said.



Groups for parents and siblings of LGBTQI+ people

In the groups I run for parents who have recently learned about their young adult children being of a different sexual orientation or gender, parents share their frustrations in relation to their children. Acceptance of children who are different is not easy for parents.

Each individual's ways of construing are highly idiosyncratic and complex yet they are not randomly determined. People's ways of knowing are a product of a consensual validation process within the various social systems they engage in such as their family, community, and country (Ahmad & Reid, 2009).

Parents often discuss their frustration that, as a family, they have been invited to several weddings as guests and have *eaten* elaborate meals at the festivities and they have to return this obligation to all these families, friends and the community they belong to. These parents are talking about various aspects of social capital.

Social capital broadly refers to connections among individuals on their own or as part of social networks who participate in a reciprocal network of social interactions which holds them together (UKessays, 2018).

A wedding is a way in which people pay back to each other. Even today, in many traditional weddings, each gift received by a couple at the wedding is listed and noted. Mostly, these gifts come as a return to the gifts given by the family to various family members and friends in the past. Now this family must make sure to return gifts of equal value to those who gifted their children. The culture of giving and receiving or paying back cultural debts is a cycle. This is something that elders in families know and they miss. Parents of LGBTQI+ children often stop attending weddings to which they are invited. They do this because, after they know their children are not going to get married, they often feel they do not have the right to attend weddings and partake of the food, companionship, and camaraderie when they are not going to be able to extend these experiences to their hosts.

Parents come from different parts of India to attend this group. They discuss aspects of social capital that they cannot use anymore and feel morally responsible for incurring social obligations that they cannot fulfil. Not attending weddings or family gatherings is regarded as a self-inflicted



punishment for the wrong they believe they have done to the other members of the community by not hosting wedding feasts.

Such collective systems provide members with a view of morality and purpose, and these views are reflected in, as well as perpetuated by, the ways in which people think, feel, behave, interact, and experience (Ahmad & Reid, 2009).

Weddings are also situations where there is a large amount of networking taking place, whether by people planning expansions of their businesses, or by parents seeking to find a bride or groom for their own children. Moreno talks about the catharsis of integration, in which not only is there a release of much emotion, but there is also a way to integrate this as a part of their life.

Group sessions with people working on depression and anxiety

This group has been attended by numerous people migrating from villages to cities due to employment possibilities. This group had a wide age range, the youngest being 17 years old and the oldest being 56 years old. The oldest member of group had been diagnosed with depression and anxiety and had been taking medication for over 20 years. He had a history of having been severely physically abused by this mother, and this trauma was something that played out in every aspect of his life. He did not recognize that this was a trauma he was suffering from until he began sessions with psychodrama. In the dramas he played, he discovered that this was his core issue.

After every drama he would ask in a very perplexed way, “how could a mother be so abusive?” He shared that, in the 20 years he had gone for therapy to different therapists, whenever he had mentioned that he was abused as a child, his therapists had often told him that his mother loved him very much.

Ignoring these culture-specific factors during assessment and psychotherapy may lead to breakdown of the therapeutic relationship and failure of treatment (Bhargava et al., 2017).

He had never explored the fact that he might have been carrying this trauma for so many years. In the psychodrama method, he found the ability to express his deep hurt, frustration, and anger against his mother. He experienced a huge catharsis. This drama encouraged other members of the group to see and think about their own relationships with their parents.



Group sessions with activists

This is a particularly sensitive group, because in the public eye, these group members are often considered to be strong. Often, they are asked very personal questions as representatives of the communities with which they work, or they are attacked in front of groups, media, etc. Members of this group often hold a lot of anger against society as a whole. One activist who holds a key position in a federation for sex workers worked on her anger. The anger which she often whips up in front of the media to talk passionately about her cause, but this anger remains and continues to get directed against her own family. This was a powerful piece of action as it touched all the activists present as being true for them too.

Activists often are people who represent various castes, subcultures, and practices. They migrate to cities to keep members of their family safe and to live life without causing embarrassment to their families. Psychodrama helped them express their anger without allowing it to hurt themselves or others.

CONCLUSION

Any group therapist who works in a large city in India must contend with the subcultures and practices which are different for different members of the group. India has thousands of people who migrate from villages seeking education, job opportunities and anonymity in big cities. No matter with which group a therapist works within India, it is important to address diversity of caste, class, language, cultural practices and rituals. Every group therapist must practice group rituals in order to be inclusive and show equality between all members of the group.

Diversity exists not only across cultures in India but also within cultures. A competent counsellor should develop and evaluate specific counselling techniques for specific cultures, i.e., culture-centred counselling.

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Trauma and Empathy in a Supervision Process in Guatemala

The article explores theoretically, and with the help of a case study, difficulties and possibilities of understanding complex trauma in supervision. Focusing on an experience in a post-conflict Guatemala, it is shown how empathy can be transformed into an in-depth understanding of underlying conflicts in a supervision group by using and applying countertransference images.



INTRODUCTION

Extensive psychoanalytical debates and scientific studies have shown that trauma neither ends nor vanishes with the ending of the traumatic experience. Khan (1963) as well as Keilson (1979) were among the first to point out that trauma has to be understood as a continuing, ongoing and cumulative process. Keilson's empirical evaluation of the therapies he provided to Jewish children in the Netherlands, who had survived the *Shoah*, clearly showed that trauma continued even after the atrocities had ended. He came to the conclusion that trauma is not the result of any single event, because it emerges and is reactivated and even aggravated in consecutive sequences. Unresolved it "will remain an insistent present" as Varvin (2003, p. 209) emphasized. Consequently, trauma might be transmitted from parents to children and even to grandchildren in a transgenerational process (Gampel, 2006; Kogan, 1995; Laub, 2000).

Clinical investigations and psychotherapeutic treatments of traumatized war veterans, victims of torture, survivors of genocide and terror (Becker, 2007; Bohleber, 2000; Herman, 1992) have reconfirmed these early findings of Khan and Keilson, leading to some alterations of the diagnostic formulation of post-traumatic stress disorder (PTSD). Even though the formula of PTSD has assisted in unifying previously disparate fields of inquiry in trauma research, it soon became evident that PTSD fails to capture the protean sequelae of prolonged, repeated trauma (Herman, 1992; Silove, 1999). Despite the fact that an expanded diagnostic concept of "complex PTSD" (Herman, 1992) was eventually introduced, the psychopathological view of a traumatized individual remained to be the core focus of the concept. However, the validity of a concept based exclusively on individualized clinical health criteria, inevitably appears inadequate (Hopper, 2003). Therefore, psychoanalysts like Becker (1992), who worked with victims of torture in Chile and Martín-Baró (1990) from El Salvador, insist that it is impossible to understand trauma only in terms of the clinical diagnostic formulations of PTSD, because trauma often enough is the result of "man-made disaster" and, therefore, a social and political issue that affects society as a whole. That is the reason why they prefer to speak of "psychosocial trauma". Their



understanding of trauma reconfirms and amplifies Khan's cumulative and Keilson's sequential model of trauma, arguing that there is no *post*-trauma and PTSD is a completely default terminology.

This perspective is highly significant for psychosocial experts working in post-conflict societies, since they often have to deal with traumatized individuals, groups and populations that live in ongoing traumatizing situations. These experts cannot avoid being involved with people who suffer under the prolonged effects of psychosocial trauma, but their task does not include psychotherapeutic support. Nevertheless, they need profound knowledge about the psychosocial effects of massive trauma in order to deal with trauma in a professional, but nonclinical and nontherapeutic way. However, more important is—under these circumstances—supervision, which is not a “luxury” as Becker (2007, p.102) stated, but an essential health saving prerequisite. Otherwise, the risk of secondary trauma will increase, as Figley (1995) pointed out, eventually traumatizing helpers and experts themselves.

Taking these considerations into account, supervision turns out to be quite a challenge, because dealing with trauma in a supervisory group process could turn out to be a journey into the “agony of anxiety”, as Ferenczi (1932/1988, p. 81) once called it, getting close to “feelings of death”, as Becker (2007, p. 64) added.

With the help of a case study, I would like to explore now what kind of supervisory skills are needed to contain, to understand and to deal with traumatic situations arising in the course of a supervisory process. The central question is: how can supervision, as a nontherapeutic and nonclinical tool, deal with traumatic material in a group supervisory context?

First, let me briefly outline the political and social context of the workshop.

The social and political background

Just a few years after a devastating war had ended in Guatemala in 1996, the German government established a peace and reconciliation program to support the fragile peace building process in the country (Rohr, 2012). More than 200,000 people had died in a war that lasted more than 36 years, one million lived in refugee camps in Mexico and more than 600 massacres had been officially recognized (Rohr, 2009). Two truth commissions concluded



that the majority of the indigenous population had been traumatized (CEH, 1999; ODHAG, 1998).

Although the armed conflict had ended, violence continued. Lynching increased, criminal youth gangs terrorized the cities, and homicide of women reached one of the highest levels in all of Latin America (Amnesty International, 2013). Epidemic violence threatened the society's stability (SEPAZ, 2009).

This was the political frame for the group analytic supervision training, which had been initiated as part of the peace and reconciliation program and as a reaction to the psychosocial needs of professionals, working in difficult and often enough "traumatizing situations" (Rohr, 2013). Evaluations had shown that many psychosocial experts were engaged with extremely traumatized Mayan populations. These professionals were left alone with their agonizing experiences and with the extreme suffering of the people they worked with. A strong identification with the victims of war, combined with political commitment for those who had suffered most under the genocidal strategies of the army led to a high risk of burnout and symptoms of secondary traumatization. At that time, no supervision in the sense of counselling professionals existed in the country. Therefore, supervision workshops were organized in addition to the training, aiming to improve community mental health services, qualifying psychologists and social workers to offer professional counselling services to indigenous communities.

Offering workshops in such a vulnerable, social and political situation and in a culturally and ethnically diverse environment requires from a foreign supervisor a lot of cultural sensitivity, professional experience, skills and the disposition to venture into unknown transcultural spaces. However, what was most needed was "simply" empathy and a strong relational desire wanting to get into touch with this group of people.

A few thoughts about empathy are presented in the next section.

Psychoanalytical understanding of empathy

Looking into psychoanalytic literature, it is obvious that there has been a considerable amount of writing about empathy, starting with Freud, who acknowledged being somewhat ambivalent about this topic, because he could not deny its "mystic character" as he once wrote in a letter to Ferenczi (Grubrich-Simitis, 1986).





In relation to this ambivalence, Kakar (2008), an Indian psychoanalyst, points out that until today psychoanalysts seem to avoid the scientific challenge, which is connected with empathy, even though they work with it daily in their psychotherapeutic practices. He is convinced that this has to do with the very nature of empathy, because empathy, he reiterates, seems to function much more like a meditative practice than a scientifically proven technique. Freud seemed to be aware of this “meditative” nature of empathy, when he wrote:

Experience soon showed that the attitude which the analytic physician could most advantageously adopt was to surrender himself to his own unconscious mental activity, in a state of evenly suspended attention, to avoid as far as possible reflection and the construction of conscious expectations, not to try to fix anything that he heard particularly in his memory, and by these means catch the drift of the patient's unconscious with his own unconscious. (1923/1975, pp. 238–239)

Freud's advice to the psychotherapist is, therefore, to liberate himself from all conscious thoughts and emotions in order to be able to receive messages from the unconscious of the patient.

Ogden speaks in this context about “day-dreaming experiences” (1997, p. 719), referring to the capacity to allow oneself to inconspicuous thoughts, feelings, fantasies, daydreams and body perception in the course of a psychotherapeutic process.

According to Kakar (2008, p. 117), many psychoanalysts today try to minimize the transcendental character of empathy, saying that the identification of the therapist with the patient is temporary, not regressive and under the self-control of the therapist and contains cognitive elements. There is obviously a lot of fear that empathy—and that is what Freud and Ogden are talking about—could only be a projection of the psychotherapist's feelings, an empathetic fantasy or a projective distortion. These definitions in combination with these objections and potential risks are, according to Kakar (2008, p. 118), responsible for the ambivalence found in the majority of scientific publications about empathy, because empathy seems to be connected too much to unconscious, mysterious psychological states of mind.

However, Bion (1967) reconfirmed Freud's explanation and described the ideal psychotherapist as someone who could give up, for the sake of the psychotherapeutic situation, memory, desire and understanding. He states



that psychotherapists should block off the noise of the material world and all sensuous perception in order to be able to receive the messages from the psychical world. According to Kakar (2008, p. 124), empathy only will grow when the functions of the self can be given up with greater ease and when fears to drown can be handled less defensively.

Neither Freud nor Bion mention the term “empathy” in these excerpts of their writings, even though both seem to explain how empathy develops. Yet in *Group Psychology and the Analysis of the Ego*, Freud already had offered quite a unique definition of empathy: he referred to empathy as a process that “plays the largest part in our understanding of what is foreign to the self of other people” (Freud, 1921/1975, p. 108). But the translation of the original “*Einfühlung in das Ich-Fremde anderer Personen*” (Freud, 1921/1975, p. 119), has to read “to feel oneself into, what is alien to the self of other people” (Zepf & Hartmann, 2016, p. 742).

This definition seems extremely helpful when dealing with traumatizing contexts, because it helps to define the task we have to accomplish, to find access to that, what is alien to the self of other people. However, in a supervisory group process, it means to find access to that, what is alien to the self of the group or as Lorenzer (1986, p. 27) puts it: that what has been excluded from the social consensus.

The case study is presented in the next section.

Pedro's case

Pedro, the only man in a group of women, volunteered right in the beginning of the supervision process to present a case that still was disturbing him, as he said. The workshop participants seemed to be grateful that he volunteered to present a case and encouraged him to start. He started to talk.

Together with a colleague, he had travelled to an indigenous village, way in the north of the country, to organize an exhumation process of a mass grave. It took them more than five hours to get there. They had travelled there many times already, because it turned out to be a rather complicated process that developed after the exhumation had taken place. An indigenous family who had lost the father during the war and suspected him to be one of the bodies in this mass grave had fought for years to get the authorization for an exhumation of the grave. Finally, the forensic anthropologists started with the



exhumation. In the mass grave, they not only found the dead body of the father of this family, but the body of an uncle and many other dead bodies as well. This uncle's family lived in a refugee camp in Mexico. Since Pedro and his colleague were in charge of the exhumation, they decided to search for this family to inform them about the exhumation, asking, at the same time, where to bury the dead man. After a lot of research, they managed to find the only living daughter and travelled to visit her in Mexico. When they arrived, she told them that she wanted her dead father to be buried in Mexico, close to where she now lived. Returning with this message to the village in Guatemala, her aunt and cousins rejected this idea, arguing that it was them who had fought for the exhumation and that the body of the uncle should be buried in the village, where he had lived and died. Pedro and his colleague kept on travelling back and forth to Mexico, but the positions on both sides remained rigid and it seemed impossible to find a solution.

Weeks passed and Pedro and his colleague felt exhausted and hopeless. No matter what they tried, nothing seemed to work. Moreover, the judge in the nearby city urged them to organize the funeral, since the dead bodies had to be buried soon. The judge told them, if they would not be able to reconcile the families, the dead father of the young woman would be buried in a community mass grave. Pedro was desperate; he could not understand the daughter or her aunt and cousins. He and his colleague had tried everything, now they were at their wits' end. What to do now was his question to the supervision group.

After a short silence, one of the women in the supervision group asked him, somehow reproachfully, why he was engaged in such an emotionally difficult job, adding that she thought this was too much to bear. She continued by saying that, as a psychotherapist, she had learned that it is necessary to protect oneself and not to trespass one's boundaries. Pedro looked at her with a contemptuous smile, no, that was not his problem, he considered it his political duty to be engaged in this type of work and he knew, he added, how to take care of himself.

Anxieties connected to the case and strong defenses in the supervision group were obvious. This woman represented the fears and anxieties of the group, insisting that it was important to protect oneself. She obviously felt the urge to protect the group, maybe feeling insecure, not knowing if I, as a stranger, would be able to protect the group or if I might



push the group too far with this unknown method of supervision. However, underlying these anxieties, a conflict emerged between Pedro and this woman: Pedro was known to be a man of political ethics and of strong, left wing political beliefs. Whereas the woman obeyed the stereotype of the upper-class psychotherapist, keeping out of politics, making sure to protect herself by not getting involved or voicing her own political convictions. There was a lot of unspoken tension and aggression in the group. Shadows of the war had entered our supervisory space and the irreconcilable conflict with all its unresolved hatred hovered around, scaring everybody.

While listening attentively, associations were racing through my mind. I simply felt shocked listening to the story, not knowing if I really had understood everything. I had serious doubts if we would ever be able to understand this case. I noticed that resistance, fears, anxieties and aggressions were dominating the group and I felt overwhelmed with feelings of helplessness. Nevertheless, this uneasy countertransference sensation helped me to understand the underlying feelings of helplessness in the group. Then someone in the group dared to ask Pedro about more details and he talked about the exhumation and the difficult situation in the village. Again, I had the feeling not to be able to follow his words; I just could not imagine this village. It felt like a blurred picture, as if a photographer had trembled when taking the picture and even though I tried very hard to get a clearer image, I did not succeed. Feeling irritated and profoundly disturbed, I missed most of what was said. I felt as if I was on a journey into nowhere and I noticed my Spanish vanishing. I just could not think of anything to say anymore. Then someone asked again about the massacre and I heard Pedro talk: he described what had happened. Now I could follow his explanations, even though the images he described were simply horrible: the father of the daughter, who now lived as a refugee in Mexico, had been denounced to the army as a supporter of the *guerrilla*. The army invaded the village, captured him and many others to be tortured in front of the whole village. Every woman and child were forced to watch. After all the men had died, the guerrilla came and killed those who had denounced these men. Pedro finished by saying that dead bodies lined the streets, leading out of the village.

There was silence, pain and agony in the group. Then someone said, with a breaking voice, how shocking this was to hear and to imagine these atrocities. I think we all were caught in this village. I virtually could see the



dead bodies lying alongside the dusty streets, leading out of the village. It was an almost unbearable image. My strongest motion at that moment was to flee, just to get out and get away, far away and back home to Germany.

Then I suddenly thought, well, that is exactly what this girl's family did, flee and go to Mexico. Now I could see this girl coming to life in my mind, seeing her as a young indigenous girl standing in the crowd of the villagers, dressed in her brightly colored indigenous wear, forced to watch her father being tortured and seeing him die. I could barely imagine what she must have felt at that time: agony, excruciating pain and infinite suffering, but also shame, feeling so utterly helpless, not being able to save her father and being left alone with these feelings in the midst of this crowd of people, all of them paralyzed in utmost fear and terror. Nobody did anything to save her father, not her mother, not her relatives nor her neighbors.

Even though these images were almost unbearably painful, they helped me to think again. Now I understood why the daughter insisted on having her dead father buried in the place where she now lived. She simply wanted to have his dead body close to her as a late compensation and reparation to have left him alone in his agony. At least she wanted to offer him a burial in dignity and according to Mayan indigenous, religious rituals, to save his soul and to reconcile with her own feelings of shame and guilt.

I shared these thoughts with the group. Immediately the tension left Pedro's face and some of the participants leaned back in their chairs, relaxing a bit. Yes, now they could understand the young woman's desire and her unyielding wish to have her dead father buried close to her. That was her only possibility to find some peace with the past and to maybe soothe her pain and partially resolve her trauma. Still, what about her aunt and cousins back in the village in Guatemala? Well, we now could understand their situation as well: they thought that they had done everything to get the authorization for the exhumation and now felt resentful towards the girl's family, who had fled after the massacre, whereas they had stayed. Not allowing her to have the dead body of her father seemed like a late revenge for having left the village and having left them as well—with the dead bodies lining the streets and the horrifying political conflict that separated the village. On one side, the supporters of the guerrilla and, on the other side, the supporters of the army. Exactly the conflict that was mirrored in the beginning of the supervisory process in our group, here and now.



Now we could see Pedro's smile coming back: yes, now he would know how to talk to the daughter, to her aunt and her cousins and he felt sure that now he would be able to reach an agreement between the two families. Because now he understood the trauma that both parts of the family had experienced and he realized that the trauma was still alive, having been reactivated through the exhumation process. Although both parts of the family had lived through the same traumatizing event, they had found different ways to deal with it. But in both cases, their wounds had not healed, even many years after the war. Now Pedro would help them to reconcile. He felt great relief, he would be able to fulfil his mission and he would be able to bring some peace back to this village.

He thanked the group wholeheartedly and we all headed outside, very hungry and happy to have a break with lots of coffee and sweets.

Reconstructing the process of understanding

Reconstructing this painful process of understanding is not easy. Because to be emphatic in this case meant to go on a journey, a journey into unknown emotional spaces, which turned out to be an "agony of anxiety" and finally a confrontation with trauma and death. The process of understanding did start with floating attentiveness, as Freud (1923/1975) mentioned, and the material as well as the cognitive world vanished as Bion (1967) pointed out. My command of the Spanish language disappeared and a state of mind developed that could be compared with daydreaming experiences. Blurred images allowed no rational thought and intellectual and professional orientations, aims and directions simply disintegrated. Slowly floating turned into something Kakar (2008) called "drowning". All knowledge vanished; there was no desire anymore and certainly no understanding. In contrast to Kakar's insinuations, there were, however, at least temporarily, heavy regressive motions in this process of "drowning". Feelings of emptiness, as well as overwhelming feelings of helplessness, of impotency and of shame are, without any doubt, indications of regression. These were not easy feelings to bear. Somehow, unconsciously, it was possible to persevere, instead of fighting it off. Moreover, by bearing the feeling to almost drown it became possible to transcend boundaries, to find access to the unconscious and traumatizing material of the story and to finally



identify with this girl, standing there in the midst of the crowd, being forced to watch her father suffer and die. The identification with this girl was the turning point in the process of understanding. This emphatic understanding of the girl, just experiencing trauma, opened the door to an emotionally based understanding of the whole situation: to that, what was alien to her and her people, mirrored in our supervision group and in my countertransference.

This step from empathy to an emotionally based understanding cannot be described only in terms of transcending boundaries. Because what is missing here is the notion of conflict.

Focusing on conflict and looking at the above-described case from the perspective of conflict, it becomes immediately clear that the contents of the case dealt with heavy conflict. Following this thought, it can be stated that the core conflict was mirrored and experienced on five different levels throughout different stages of the casework.

- The initial scene in our supervisory workshop produced a clash of two radically opposed political positions within the group, thus opening up the stage for further conflicts. This initial conflict mirrored already the core of the conflict that later on was dominating the scenery.
- Conflicts shaped my countertransference reactions when it was not possible anymore to relate or to connect to the group, neither hearing nor understanding Pedro's words. There was silence and a complete breakdown of communication, producing an enormous amount of fear.
- Finally, there was this terrible conflict in the village, eventually uncovered during our casework. It turned out to be the central political and national conflict between the supporters of the army and the supporters of the guerrilla, ending up in mutual denunciations and the brutal killing of numerous indigenous men in the village.
- This past conflict found a continuation in the present conflict of the two families, not being able to agree upon the burial place of the dead father and uncle. Polarizations and fragmentations of the war, effects of a cumulative and sequential trauma were still alive, not allowing wounds to heal.



- At last, the conflict showed in the working relationship Pedro and his colleague had established in this village as an impossibility to fulfil their mission. They were not able to find a solution to reconcile these two families and bury the dead father and uncle. The tragedy and the resulting trauma were still alive.

In this case, trauma showed itself in the group as a basic and permanent state of conflict, producing symptoms and fears of “drowning” and finally a severe crisis. In this process, resistance as well as defense structures partially broke down, allowing flexibility and—most importantly—new ideas and new perspectives to grow. Only through crisis and the loss of knowledge and memory, an empathic understanding of that, what was alien in the self of the group, became possible.

CONCLUSIONS

Psychosocial experts working in traumatized societies have to realize that “trauma will not only persist as an insistent present memory of what happened, but will affect how the world is perceived, how relationships to others are experienced, and how the person relates to self and others” (Varvin, 2003, p. 209). This, of course, is true also for the work place, therefore traces of trauma might surface in any professional environment, as well as in supervisory casework, where it might least be expected.

Psychosocial experts, working in post-conflict societies, have to be well aware of this fact and have to be prepared to bear, understand and contain traumatic phenomena. This means foremost not to be afraid of conflicts and not to fight off feelings of helplessness. To acknowledge own vulnerabilities and to accept limitations helps to relate to the needs of traumatized populations.

If experts work in cross-cultural contexts, this adds some additional considerations and expectations to their portfolio. Needed is a thorough knowledge of history, politics and living conditions of the society you work in. You have to be aware of deeply embedded individual and societal prejudices and internalized cross-cultural bias that have shaped your perception and your action, unconsciously or unknowingly and that come to life when dealing with conflictive situations in any given environment. Quite



important is also to be aware of cultural transference and countertransference processes, f.e. as a white European person to be perceived and maybe even treated as a member of a society that once came as conquerors, colonizers, imperialists and oppressors. In summary, experts need extensive cross-cultural sensitivity to deal professionally with traumatized societies and populations (Rohr, 2014).

In this case, it was a huge support for Pedro to be able to rely on a self-reflective and cross culturally organized supervision group because psychosocial support in a group of colleagues is a health-saving experience and a possibility to contain the fear of drowning. This experience helped to regain trust in professional and personal capabilities and to feel reassured, not to be alone. Feeling and experiencing the relatedness to others—beyond one's own cultural boundaries—is decisive to bear and eventually to overcome fragmentations and polarizations, always connected with trauma.

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CHAPTER 5

Post-Soviet Space, Psychodrama and Family History: Challenges of Diversity

In this chapter some reflections on groupwork with post-Soviet heritage are presented through a case example from transgenerational psychodrama. The complexity of cultural contexts in a heterogenous group were taken into consideration through protagonist-centered psychodrama and an additional intervention that helped to bring more involvement and connectedness. Examples of shared feelings and family stories may give the reader an opportunity to have a glimpse at multilevel transcultural contents that challenge groupwork in contemporary Russia.





INTRODUCTION

“Everything was forever until it was no more”

Alexei Yurchak

The so called “Soviet collapse” happened in 1991 and it is still discussed, mostly in political science circles. So much has happened (or disappeared) since then in the cultural space, the lives of so many people have been affected by those events that we have not got yet any integrated analysis of the processes involved. It is of interest to note that the most thoughtful and fundamental studies have been done far away from Russia or former Soviet republics (Yurchak, 2006).

We may think of the pre-Soviet, Soviet and post-Soviet cultures as marked off by at least two dramatic events—the October revolution in 1917 and the events of the 1990s.

The “timeline” shows current contradictions between the continuity, which is one of the core mechanisms of culture, and the transformation that in our case happened to be violent (revolutionary).

A culture is much more than the sum of material objects or achievements; it is also a system of “the rules of the game”, norms of collective existence, learned behaviors, shared knowledge, images of people and their relations, symbolic reflections of the world and much more. The traces of any ruined cultures can be seen years later in many nonmaterial ways: old jokes, family stories, superstitions, old-fashioned speech or behavioral patterns, coping strategies... Some are preserved deliberately as a form of “counterrevolution”, some comprise a shadow part of collective symbolic representations, some fade and disappear little by little, but no one can deny their presence and, from time to time, their power. When we work with groups in any particular culture, we deal with this type of “culture introjects” and have to be aware of them.

Speaking of the post-Soviet space, we understand its complexity in terms of national, linguistic and ethnic problems too. The Russian empire was multiethnic in many ways (for instance, the government often hired foreigners from European countries to do skilled work, and some of them stayed behind). In the Soviet period, ethnical issues were sugarcoated with a metaphor “the



family of the peoples”, and at the same time ethnic deportations were common practice (more than two million people during 1939–1945). Later, many Russian people who had lived long in former Soviet republics lost their jobs and had to leave—some moved to Russia, whom was not happy about these “migrants”, and some left for other countries. That was a major loss for many of them, and some still hate Mikhail Gorbachev for the “Soviet collapse”. Hard issues of the recent history are often tabooed in groups, and it is really difficult to create a safe space to work with loss and trauma of exile and segregation of the 1990s.

This chapter offers a modest example of dealing with the mixed, rich, vast and sometimes toxic post-Soviet heritage by means of psychodrama.

Russian psychodrama is 33 years old, and there already are some preliminary reflections upon its specific features (Mikhailova, 2013). Here I have only to mention our long-lasting interest towards transgenerational psychodrama introduced by Anne Ancelin Schützenberger in the early 1990s, when we were not yet fully aware of many aspects of our culture current transformation (Schützenberger, 1998).

Our training group was fascinated by her method and powerful personality. There were questions that are still unclear: Anne (we called her “Anna Semionovna” because of her Russian roots) said she usually refused to work with clients who did not know their family history during more than 200 years. Our context was very different and we tried to explain it:

- Anna Semionovna, we cannot afford that! People who know it are very rare and maybe need our help less than others—the absolute majority know very little.
- What happened to their knowledge?
- Wars, revolutions, repressions, a strong urge to hide at least part of one’s roots for the reasons of safety, or because of fear, shame, a desire to change identity... It has been a long story.
- Well, do what you can.

It was the most unsentimental blessing, but we did. Many of my Russian colleagues have been using elements of transgenerational psychodrama since then (now we have access to the original version thanks to the long-term course taught by Manuela Maciel and Leandra Perrotta in Moscow, and we



are happy to be part of it). However, for practical reasons, years ago we had to adjust the system to the needs of short-term groups where full sessions with extended “family tree” were hardly possible. The case example described in this chapter is related to that kind of group work. We do what we can.

Most of us travel a lot to run different groups on a vast territory of the former Soviet Union and it is often a challenge to be sensitive enough to group diversity issues. Eva Leveton (as cited in Wiener et al., 2011) wrote about this kind of challenge:

Working with diverse groups means adapting our own roles to a different context. While I have no illusions on being able to blend into another culture, nor of completely shedding my personal and social bias, I want to establish warm, personal relationship as soon as possible. (p. 174)

Sometimes you need not even travel. In a disturbed society any group may easily stumble over diversity issues and fall into blaming or isolating “the other” be it representatives of a different generation, social class, ethnic minority/majority, gender or profession. As group therapists, we have to be prepared and rely upon our methods and their ideas and tools. We are not the first to meet the challenge. Group psychotherapy was born to an imperfect world and was aware of it. J. L. Moreno wrote in 1940 as cite in Fox (1987): “The world in which we all live is imperfect, unjust, and amoral, but in the therapeutic theatre a little person can rise above our everyday world. Here his ego becomes an aesthetic prototype—he becomes a representative of mankind” (p. 59)

Let us see some scenes in a post-Soviet therapeutic theatre.

Case example: “where have all the flowers gone?”

Group context

The group of 22 participants, three men and 19 women, was trained in psychodrama for 15 months. There were people with various professional and cultural backgrounds: several medical doctors, former teachers, psychologists, business trainers; many of them came to Moscow from different regions of Russia and still felt alienated in this huge and sometimes unfriendly city. Most group members were old enough to remember the Soviet Union period,



and these memories “bubbled up” from time to time in their psychodrama sessions—usually people had a lot of both bitter and sweet feelings to share and found the very phenomenon of the common memory valuable (“at least we were born in the same country and lost it at the same time”, as one group member said). Most of the participants had no clear religious identity, some belonged to the Russian orthodox church, there were also two Muslims, a Catholic, a Buddhist and a Neopagan—different confessions religious holidays were sometimes mentioned, but the very issue of different religious feelings was a “soft spot” in the group—it had never addressed that, at least consciously. The group’s ethnical background was rich and complicated, which is typical of Moscow groups: mixed marriages were quite common in the Soviet period. In this group we had a wonderful mixture of ethnical backgrounds for several generations of the participants’ families of origin: Armenian, German, Jewish, Korean, Polish, Tatar, Ukrainian roots, let alone Russian ones, were mentioned from time to time, especially in the “Ancestor’s psychodrama”. Linguistically, however, most of the group were native Russian speakers—with rare exceptions. The case below was exceptional in many ways. According to our curriculum, we were working on the connection between today’s needs or problems and the family history.

Ravil’s psychodrama

Protagonist: one of the three male group members, a middle-aged Tatar—let us call him Ravil—was chosen through sociometry. It is important that his wish to become a protagonist had been gradually growing since the moment we started in the morning: he was obviously getting more and more warmed-up and active. That was not quite typical of him—he did not often seem eager to work on his personal issues, though he took an active part in structured exercises in subgroups and enjoyed that kind of activities. My trainer’s hypothesis was that he felt too different from the majority of the group—his age, gender, religion, subtle behavioral signs of belonging to a different culture made him a stranger in many ways. Besides, he was the only person in the group who spoke his native language fluently (his Russian was perfect too). The group accepted and respected him for his maturity and professional attitude, but when he happened to be a protagonist, there was more polite interest on their part than emotional involvement.



Warm-up: Ravil was more warmed-up than usual—we had had three vignettes before he made a step forward to claim he wanted to be a protagonist. Interestingly, all three of the vignettes explored the “big issue of the other” in family histories. Nina through psychodrama met with her grandmother, a post-war orphan who looked Caucasian but never knew for sure and never tried to find out. She was given a Russian name and brought up within the official myth of equality but never believed in it... Igor worked on an endless conflict between believers and atheists in his mid-Russian family, and for him it was not a story of spiritual search but rather an exploration of scapegoating in every generation. Anna brought up the topic of “ideologically based generation gap”—her grandparents were communists and knew by heart whole pages from Lenin and Marx, and their son-in-law (Anna’s father) was a dissident in 1970s... more than that, she grew up in the atmosphere of bitter disappointment: neither communists nor their antagonists could foresee the “hypocritical years”, when they faced what we now know as “post-truth” culture. Sharing after each vignette was charged with deep and sometimes uncomfortable feelings, personal insights, family stories of partial exclusion, splits and hopeful reconciliations.

And then we did Ravil’s drama. He needed to meet with his great-grandfather Abdulla who was “not like the others” and made wise decisions that brought him not only success (relevant for his time and circumstances) but also inner peace and connectedness. He was also the last successful man in the family: later survival became the main achievement for the following two generations. What Ravil wanted was a kind of father’s permission or blessing to achieve, to be visible, to earn fair amount of honest money. As a group, we knew the bitter story of grandparents and their children: they lost faith and rituals in the 1920s, struggled with severe poverty in the 1930s, during the war, and later they could not even move to a city where one could make better living (soviet peasants could not leave the places where they lived from 1935 till 1974).

Ravil certainly lived much better than his family of origin: he became the first educated man in the family, moved to the city, had private practice. But he never felt it was “legitimate” as if he were a kind of a refugee—or, perhaps, an impostor.

Action: Ravil chose to enact his drama alone, without auxiliaries. As his director I was not happy about this choice: it seemed to be a symbol of isolation or even alienation (“not like us” in the family of origin—and here in



the group). But somehow there was hope: groups do not choose protagonists just by chance, and Ravil's theme was about healing, not trauma (both indeed, as we will see soon).

We used the technique “meet your ancestor” that can be a part of full psychodrama with many scenes but can also be useful as a special tool separately. Ravil made the scene simple: a place for himself (with his back to the audience), a place for Abdulla (facing the audience). In his polite and reasonable manner, he said hello, asked for permission to speak and spoke: “may I change my life to the better, like you did, and still be a part of our family, even if I live a different life?”. He took then the role of Abdulla and seemed to be ready to say “yes” and perhaps finish his vignette, but with all respect and at distance, the director asked him to say a few words about his “wise decisions that brought success”.

Ravil as Abdulla:

I was a soldier in the first World War. I could understand nothing—me, a Tatar peasant, why Poland? What were we doing there? I was badly wounded by a German shell (his right arm becomes unnaturally limp) and they said in hospital I had to lose it. Then I fought, cried, pretended I didn't speak Russian, I had to save my arm at any cost. Ugly and crippled, it still could do some work at least, see, my fingers can move. They left me alone, me, a stupid ignorant Tatar man. I prayed. I knew already that everything has its higher meaning and we have to be patient to understand it. And I went home. With two arms.

Director:

Abdulla, you are back home. What do you see? What do you do?

Ravil as Abdulla (making several steps and simple gestures with one hand):

It is 1915... all men are gone; nobody knows if they come back home. I see feral fields full of wormwood and thistle... no good food, no holidays, dark windows... exhausted women, underfed kids... What a shame I cannot be the real master in my own household! (*covers his face with one hand, then stops and straightens up—we can see his face again*) It occurs to me... or the God Almighty helps me to realize: I cannot manage a plough anymore, I cannot ride, but I can keep horses so that people could rent them. I have one



to start my business. In a year we have three, I hire boys to help with them. My wife would do it without complaint, but a woman shouldn't, too hard for a woman. I am honest. My prices are reasonable. People now can work in the fields, they respect me, they pray for me.

Now (*a big step forward*) it is 1917. Eight horses, I have to rebuild the stables, I work hard. There are 11 villages around—some are Tatar, some Russian or Chuvash. They all know their fields will not stay unpowered.

If a horse is to be slaughtered, a Tatar village will buy meat (smiles at the director). Are you Russian? You, Russians and Chuvash, you do not eat horsemeat. We do.

Director:

What happens next?

Abdulla:

The red comes. They take away my horses. People try to protect me and my family: they hide my horses so that I could pretend I am poor. Sooner or later we all fail, me and my neighbors. I will never be wealthy again; my sons do not even know what good life is. I know. I had it.

Director:

Now, when we know your story, are you ready to tell your great-grandson Ravil if he has a right to change his life to the better like you did, and still be a part of your family? If you need to see a human being, not just imagine him, choose someone to be Ravil.

He thinks a little and then chooses Igor to play himself. Igor repeats the lines very, very accurately. Abdulla nods while listening to him and then gives support, permission, blessing to his great-grandson.

However, after the role reversal, Ravil seems uncertain as if he needs something else or more.

Director:

Tell your great-grandfather what is in your heart and mind when you listen to him.



Ravil:

I am full of gratitude and respect to you, great-grandfather, but still, I am sad. You seem so lonely there after everything you've done for your family and your village.

By this moment the group is very much involved, there are smiles, tears, deep sighs—group members seem to recollect the stories of their ancestors, and there is a lot of energy. We know as psychodramatists: all that happens on the stage has to do not only with the protagonist, but with the group as well. Usually, people express it overtly while they share their feelings after the action phase. This time the director offers a “special intervention” to make this process more visible and more powerful. Ravil's sadness could be about his own isolation in the group, and the moment seems right.

Director:

Ravil, may I ask you for something? I'd like to offer our group to do something about their ancestors. This is your drama and your space. But what if we take that part of our big room and make a second stage there? It will be separate and still close at the same time. You can watch it as your great grandfather or in your own role, or both. Does that make sense for you? After this short “drama within drama” we can go back to your personal work and finish it with what you need.

Ravil:

Yes. I want Abdulla to see people he could not see in his time! It is unusual, but seems...I don't know...a right thing.

Director (to the group):

Think of someone who may seem very different from Abdulla, but made wise and uncommon decisions and also had courage to put them into life. Think of the impact of this ancestor on your family history. Those who are ready may stand here in the roles of these people. Introduce yourself and just say what you did, when and what for. We have 15 min or so—now we do not explore, it is a kind of short action to remember their lives.

Little by little, the whole group is coming onto the second stage—their space was parallel to Abdulla's. Let us listen to some of these voices keeping in





mind post-Soviet space, challenges of diversity, Ravil's drama and the group context mentioned above.

I am Algis, Sasha's Lithuanian great-grandfather. I am a blacksmith. After the deportation in 1939, we badly needed warm clothes here in Siberia. My wife could make clothes but there were no sewing needles here, in a small Siberian town. I learned to forge needles. Thick and rough they were, but my family got clothes. And people came to buy needles they needed all the time we were in Siberian exile.

I am Vera Lvovna, Irene's great-grandmother. I was in Leningrad blockade with my grandson, Irene's father in future. I was so good at extinguishing incendiary bombs on the roof that the district authorities rewarded me with a frozen horse skin. We were eating it all winter, me and my dear Andreyka. That is how we survived, both of us.

I am Yegor Sukhov, Olga's grandfather. I was captured by the Nazi in 1942 and escaped, captured again and escaped again. I was clever enough to understand that nobody should have known this—otherwise GULAG was my destiny with no escape. And I got right papers. If someone says it was dishonest, I don't care. My children were not born yet, I told them the true story in the 60s, after Stalin's death.

I am Narine, a doctor. I am not Valya's granny by birth, and I am Armenian. It happened that I took three children from a children's home and brought them up. They were war orphans; their serious faces and old eyes broke my heart. One of them was Ilya, his parents died when their echelon was bombed. He inherited curly blonde hair from them and Armenian accent from me. People always were curious, some made wicked jokes, but we laughed, me and my three children. Ilya became a doctor too, he got married, and I was happy to see little Valya and sing Armenian songs to her.

I am Lev Solomonovitch. Yes, a Jew, so what? Sonya's grandfather. I was too young to go to war. Short-sighted, biology was my passion, as a student I admired one scientist... helped him in the laboratory. He worked on genetics; you understand. 1950, to be clear. Genetics is a crime, they search the lab, they arrest my teacher, they interrogate the stuff—where are the papers, a certain manuscript, printed matters? I hid everything. They found nothing.





My teacher survived the camps. He was very much astonished when I brought him an old suitcase with almost all the writings he had in the lab. Why not all? Mice, you know.

The limitations of this chapter make us stop here, though there were more voices of different social classes, nations, professions, religions, political views. Some of the stories may seem “blind” without a serious insight into the Russian history of the 20th century, but we do not have time for that. Instead, we go back to Ravil’s drama.

The figures of ancestors are still there but the action is over (Ravil reversed roles with Abdulla in the middle of the “second stage enactment”).

Director:

Do you want to say more to your great-grandson?

Ravil as Abdulla:

Oh, yes. My boy, I am not alone here. God is with me, my ancestors are with me, and these good people live in the same country and do what they can. I am honored to be one of them and to give hope. We all gave hope to those who came later. And may you never have to hide your horses.

(Role reversal)

Ravil:

I will not hide my horses, Abdulla-babay. Rahmat.

Ravil makes a few steps forward and politely, with much tenderness, shakes both Abdulla’s hands (in Tatar etiquette a young man should take both hands when he thanks the older man, “*rahmat*” means thank you)

Director:

Can we stop here?

Sharing gave the group another powerful experience of connectedness. Typically, when we work on family history, sharing takes more time than usual: family stories need some space, and in the session described above group members had a lot to share. Here, the reader may have a look at some utterances that deepen the theme of this chapter.

Ravil, you know, I am from a family of dissidents, my parents were happy when the Soviet empire fell. And today... What was absolutely unexpected...



when the ancestors spoke, I felt so touched and so connected to everyone, as if we were from one family. Do you remember the official propaganda “a family of the brother peoples”? I felt embarrassed: was I so brainwashed in my childhood?

But the feeling was real. Those who exploited the feelings of brotherhood should have been ashamed, not me. And I felt free from the obligation to fight every slogan only because it was Soviet by origin.

I was proud to belong to such a rich, strange, entangled, complex culture. Post-Soviet culture often denies fifty years of being together, but it is not fair. We had something to share and to be proud about. And your work gave me the access to this forgotten feeling.

Thank you, Ravil, for a message of hope. You know, I am seriously ill. For me the most important message was about saving one’s arm. I felt courage and hope.

I feel much closer to you and to the group and at the same time I feel as if I got a permission to be different in my ethnicity, family culture, personal issues. Now I feel ready to work on my Korean roots.

I chose your drama because the theme of the “stolen blessing” is painful in my family too. It is amazing how much we have in common, though (with a smile) I don’t eat horsemeat. There is some magic in the possibility to cross the borders and barriers in psychodrama.

We can see a lot of interconnected subthemes in Ravil’s personal drama, in a vignette on “stage two” and in the process of sharing. More than that: all the three protagonists who worked in the morning were exploring subthemes that can be found in Ravil’s drama too: clear ethnic identity versus unclear, equal or unequal rights, religious identity, “the red” and their antagonists.

And it is not by chance that the distant family history gave Ravil and the group a chance to name, mention, accept different and sometimes contradictory aspects of transcultural practice in the former Soviet Union. It is much easier to narrate when you deal with a family legend: many more repressed or disowned feelings can be projected on a distant, relatively simplified figure—myths create a clear message, family myths are no exception.

When you read carefully you can see that the theme of the post-Soviet heritage is often mentioned with reference to Ravil’s main theme. The “great



project” failed but it left strong memories full of deep contradictions. Working with more “epic” themes and subjects in a group, we invite a wide range of differences of all sorts: usually four or five generations of any town family show so many cultural varieties that the very idea of diversity comes naturally.

Another reflection on this case reminds us of Yalom’s therapeutic factors in psychodrama (Holmes, 1992). We can see, for instance, “universality” that provides a resource to accept differences.

One can say that any transgenerational work can be a good laboratory of intercultural sensitivity, it evokes sincere interest to other cultures and creates opportunities for reconciliation. Clinical aspects and objectives of this type of group work are more or less obvious: trauma and delayed mourning, dysfunctional family scripts, recurrent events, somatic suffering and some other well described parts of transgenerational psychodrama.

In our view, family history psychodrama in disturbed societies can also be a resourceful instrument to better understand “the other”.

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Online Transcultural InterVision Group

It is the concept of continuing improvement of professional development and of equality without judgement that made the author curious to explore if the method of InterVision would work with a diverse group of colleagues online. Creation of a safe space by meeting first face to face one day turned out to be beneficial for the group process that unfolded online. Beside describing the vicissitudes of a transcultural InterVision group such as challenges, pitfalls and wider perspectives I provide practical guidelines about the set up and administrative management of this type of group.



INTRODUCTION

In the summer of 2018 during the XX International Congress of the IAGP (International Association for Group Psychotherapy and Group Processes) in Malmo, Sweden, I facilitated a one-day workshop for seven colleagues; one from Northern Europe, two from Southern and one from Eastern Europe, one from South America and three from Africa. One person cannot participate because of the time we meet online after the workshop. The group consists of seven members, me included. The goal of the workshop is to spend one day face to face to get acquainted with each other's professional situation and background but also to learn a bit about the challenges and pitfalls that this kind of work creates, besides being interestingly exposed to people from other cultures. The workshop consists of a didactic part and case presentation. We discuss two cases participants bring in. All participants sign a training InterVision group agreement to participate for one year and to be aware of online etiquette. Such as being visible, audible and have no other creatures walking through the screen. Confidentiality and showing up on time as well as cancellation in advance are emphasized. After 12 sessions of two hours once a month online I will stop being a facilitator and the group will decide if and how to continue. All participants are invited by me, selected on living in different regions of the world and because I know that they are interested in transcultural issues. Most are members of IAGP or became one. All have experience in working with groups and or systems.

Motivation

The reason I want to start this project is that in my home country, The Netherlands, InterVision came up at the end of the 80s in the previous century and I build up a lot of experience in and with InterVision groups. I have come to value this way of continuing learning as crucial for keeping up quality and change in one's professional work. In my two InterVision groups there are sometimes colleagues from different parts of the world that cannot find a group where colleagues are willing to speak English. In my practice in Amsterdam, I speak more English than Dutch due to the fact that the city has



180 different nationalities. Over the years, I worked during IAGP conferences with many colleagues from all over the world and noticed the palpating eagerness to get in contact with each other's ways of working. Especially during my three years of being the chair of the transcultural section in IAGP I noticed the value of sharing cultural values, differences and similarities. Currently in my role as senior member on the executive of IAGP, I want to make use of my transcultural experiences to create stronger ties between IAGP members from all parts of the world. Most people connect during congresses but there is a need to have contact on a more regular basis and get the chance to learn new methods. Especially colleagues living in more remote areas, who have not easily access to exchange with other professionals. Within our world right now, I see InterVision as a great method for creating safe spaces for colleagues from different cultures to learn from each other in a focussed meaningful way.

INTERVISION

InterVision is a method to preserve quality in the working field of psychotherapy. InterVision aims to learn to keep balance between professional norms and the current way of working as a psychotherapist in regular exchange with colleagues. It is not didactic and it does not involve official judgement. The method of InterVision, developed from practice, consists of systematised experiential knowledge. The concept practice theory can be defined as a connected whole of insights, techniques, guidelines and values generated from practical work and reflection upon that work. In this light, InterVision benefits from the possibilities of a small group setting. In a small group everyone can bring in material and it is easier to organise regular meetings and reach a more profound level (van Praag-van Asperen & van Praag, 1993). In the last two decades, many groups of caretakers in the field of mental health discussed alternating their way of working based on equality. For some people the term peer supervision is more known. In my opinion, the word super means not equal, therefore I opt for the word InterVision. In The Netherlands everyone who finishes his or her professional training has received supervision to learn a specific approach and theory as to treating patients/clients. After that training period, one still needs to have a place for exchange and continue learning. InterVision is not a didactic method like supervision. The focus in InterVision



is on clarifying together complicated problems. Solving problems as soon as possible is not a priority. Exploring and looking for other perspectives and taking into account different cultural backgrounds is helpful and sometimes that contributes to solve a dilemma. It implies that one reflects on one's approach, method and attitude as a therapist or group leader in order to improve the quality of performance. There is no official judgement involved. Just sharing difficult or stimulating experiences or dilemmas in one's professional work, giving feedback in the shape of specific information, ideas, associations or literature. Favourable conditions for InterVision are: not too many participants especially when one starts online 6–8; equality this means everyone is his or her own leader and carries responsibility for his/her work. Privacy and safety are necessary to build a deeper level of connecting. Therefore, I refuse to record the sessions for the ones who cannot participate because of safety and trust issues online, instead I send to a WhatsApp group a synopsis of the session.

InterVision groups run also into pitfalls. Most common are babbling and gossiping, not asking for clarification of questions, saying just “me too”, overloading of information and advices, jumping from one topic to another and last, but not least, focus too much on the client and not on the therapist group leader. As contra indications I would mention thinking and being convinced that: one is not allowed to make mistakes and having problems means one is not good; one is responsible, so one has to do everything alone and what does InterVision mean for evaluation and judgement about me? Professional organisations require that caretakers have InterVision for accreditation purposes and preserve professional quality. In mental health organisations in The Netherlands, InterVision groups are formed and in private practice colleagues flock together to create their geographical bound space for InterVision. Besides healthcare organisations, InterVision is also applied as a useful approach in educational and business areas. Managers and consultants discover in the same time period the strength of so-called learning organisations. Only the difference is that more structured methods of doing InterVision are common according to the book by Bellersen & Kohlmann (2012).

Transcultural aspects

What makes this InterVision group transcultural? Not only the fact that group members are from different cultures. Group members have to work





together and that means that one becomes more aware of cultural differences. It does not automatically imply that group members will be culturally sensitive and behave as such. It takes time and practice to share and deal with differences and confrontations in mutual interactions.

My definition of culturally sensitive working in general is that, in contact with clients and colleagues, one is aware of aspects that are culturally dependent not only for the client but also for oneself. Those aspects have impact on intake, diagnosis, guidance and attitude. It requires that one develops a wider view on the social context of clients as to issues as gender, hierarchy, role of family and life transitions. Colleagues Jessurun & Warring (2018) define in their book intercultural competence is a quality of a professional which develops constantly nourished by study, InterVision and practical experiences. This competence encompasses a continuous enlarging and changing accumulation of knowledge, skills and attitudes. A professional acquires this by falling and rising. In everyday life I use a tripartite division as to culturally sensitive working (van Noort, 2012).

- Knowledge. What do I know about my own culture and what about the culture of my clients and colleagues? Which theories do I value and which theories do my colleagues prefer? I rediscover the importance of thinking systemically and the knowledge of anthropology. For example, the model of Kluckhohn and Strobeck about relation with oneself, with the other, with time and with nature/super nature. Religion and spirituality need to be taken serious in professional exchange, not judged.
- Methods. Which methods does one use as a group therapist one or a mix? Such as use of genograms which helps with looking for sources of strength within the extended family and society and figuring out who are important authority figures with a lot of power. Important addition for people who are born in more collective cultures. Or initiating a warming up exercise before starting a psychodynamic group process.
- Attitude. How do I react towards clients and colleagues and vice versa? I know that I have to speak slowly in English and use short sentences, but I still need to be reminded when I am enthusiastic to slow down. The more I work in not Western individualistic



cultures the more I learn as an addition to pose contextual questions. Psychodynamic (asking for causes): what do you want? Contextual (asking for results): who knows about your complaint? Psychodynamic: what do you feel? Contextual: who is doing something when you have your complaint? Psychodynamic: what does the complaint mean to you? Contextual: who in your family has similar complaints? Experience with this division helped me in my role as facilitator.

Themes discussed

In the whole day introductory workshop in Malmo, I explain that a transcultural InterVision group can run into specific issues that reflect the impact of a wider social context. These issues are put in the acronym social GRRAACCEESS. This stands for: gender, race, religion, age, ability (dis), class, culture, ethnicity, education, sexuality and spirituality. In our discussions, some of the here forementioned GRRAACCEESS appear direct or indirectly. We run during a case presentation into misunderstanding and confrontation about different views on a case and ambivalence is vented about how much this would have to be a process group or just a place where, in a structured way, we only focus on cases. Openness in sharing helps us to deal with this phenomenon along the way.

First, I will give a general impression on what topics we covered and after that I will describe some specific vignettes within the context of our development as a group. The cases we share have to do twice with problems around starting new groups and anxious fantasies in the mind of group leader and tensions around behaviour of the cotherapist. The exchange enhanced by different contexts like starting groups in institutes or in private practice. Just as different ways of working like more psychoanalytic or psycho dramatic or system oriented and educational. The discussion runs parallel with our own starting InterVision group with stress and insecurities as to handling technological connection issues, time differences and dealing with real life insecurities. Other topics during our year are complicated situations with cotherapists and strong examples of transference and counter transference with clients in complicated systems. Sometimes we reflect on top of that traumatic issues in our countries that have great impact on our work and personal well-





being. As one participant frames it as if in this small chatroom, the whole world politics is passing. Sharing of viewpoints on the effects of economic, political, social and natural systems with focus on mental health brought us closer together and made us feel less isolated despite our differences.

Vignette 1

In the fourth meeting online, one member presents a situation where a cotherapist with whom she works in several groups left the groups and she asks the InterVision group specifically to share feelings in similar situations. She tells us the best thing I got from the group is the feeling of togetherness and also the individual sharing from every group member. The importance of anger and the matching process for cotherapists; the impact of anxiety for the future, as well as the perspective of parents. The difficulty of letting go of a cotherapist and the idea of doing double work in a group. The concept of a good divorce and from everybody a child perspective. As a facilitator, I asked everyone to imagine to be a child in her group and share what you experience.

In the fifth meeting I ask for some evaluation of how we are doing so far and a need is expressed to have more structure and several suggestions are offered, such as record meetings for people who miss a meeting or to come back to what was told previously. Give a minute to each participant for personal sharing after discussing a particular topic. I remind them again of what was agreed upon in the beginning, if there is someone with a crisis case that goes first, otherwise two people prepare a case because practicality shows us that two cases are reasonable to address. The funny thing is that when a case presenter forgets, there is always someone who has a case. The power of the here and now sharing is so apparent. Interesting is that concern and worry about disasters in each other's country gets expressed on the WhatsApp, as well as wishing well for holidays with short stories about local rituals.

In the ninth meeting, the case that someone brings in is about difficulties to start a new group of 10 people working in here and now. This group is supposed to start with a colleague who gets ill while the group leader has planned a needed vacation. The case presenter expresses the need to get support from the InterVision group in containing anxiety. We explore together





fears and anxiety and realise that, no matter what kind of group we have, they will always oscillate between life and death. Scary fantasies and negative feelings are coming out into the open. This stimulates a passionate discussion about how to manage the balance between fantasy and reality and to stay open and transparent also with the cotherapist and work on trust. A second case in this meeting focusses on the issue of the humanity of a therapist and the deeply felt need and right to take good care of oneself by taking a sabbatical year. The question comes up what does the hardship of our profession mean for one's health and soul. It is different from leaving a group or individual clients for a simple holiday. This theme resonates and flies over to the tenth meeting. We hear that one member stopped his business and takes rest for reflection and orientation as to another direction for work more in the area of groups around climate issues. Two other participants reveal their struggle with balancing work and study and work and a too big caseload due to not enough other colleagues to refer to. What are our limits? Do we wait till our body or soul tell us this is enough? We agree how crucial it is to make time for ourselves and listen to the soft voices deep down. Even interesting projects and activities consume energy. Everyone agrees to take care of our hearts, heads and souls.

Group dynamics

In InterVision, I try to do the same as in training or in therapy groups and that is facilitating first safety and cohesion. There is no clear distinction of phases in the group, more general ones like forming, storming and performing. Group dynamically, I move along the axis of containing and gaining understanding of the group while working on cases and themes which arise in the meeting. Sharing and helping each other on an equal base with complicated situations works to build a cohesive and safe group climate and takes away some stress and tension that prompts to bring in a case. Along the way, the group becomes quite independent. At the end of our working term of 12 sessions, I will leave the group to start a new transcultural InterVision group. The independency of the group results in a decision that all members except one want to continue, while one member is willing to take over my role as facilitator. What is a surprise for me is how fast we reach together a deep personal level of sharing. As if people were waiting so long for an experience like this.



Role of facilitator of the InterVision group

InterVision takes place in a group of colleagues where everyone is responsible for their own work. The InterVision will be online, I ask everyone first to sign an agreement form. The experiment will continue for one year once a month, for two hours and an internet etiquette is offered to make the experience safer. I need to facilitate the technical side especially when the InterVision is online. The facilitator makes sure everyone gets connected visible and audible and sends a link to a WhatsApp group we have. We work with a program called Zoom. Everyone downloads this program and the facilitator takes care of sending an invitation to participate and notifies changes in time zones in order for everyone to start and finish on time. This is similar to the administrative role of a group therapist as to arranging place, room and good conditions. Some facilitators also share their own cases. I did not because many of the participants have no experience with InterVision and I want to “teach the method” and first create a safe space to share. I mention sometimes an example, but that is mostly to offer another perspective or because group members want to know how others handle issues in their countries. In the beginning at the face-to-face meeting, we already plan that we will work on Friday early evening 2 h online. Each time online we chose which Friday most people can participate. The WhatsApp group is used for technical issues and planning meetings with summer and wintertime differences and halfway I start to send brief synopsis of themes discussed after every meeting. The other role I take is actively fostering the group process by giving everyone a chance to speak by picking up nonverbal signals from the screen, which is limited. I recognise very much what Weinberg (2020) mentions in his article about the disembodied environment of a group working online and the importance of trying to get through the screen and being present as group facilitator. We miss many nonverbal clues, which are so crucial for creating a feeling of being connected. Therefore, the expression of the face becomes so important. I realise that facial expressions are more picked up than in a life group. Group members will pick up your subtle facial expressions like tiredness and being puzzled. Besides this, I get quickly annoyed when there are disturbances in sound transfer because I lose the ability to pick up clues from people’s voices. I developed a tendency to speak more in metaphors and people associate to that. In this light, I can see the spontaneous initiative



of the InterVision group to use images to underscore or clarify the topic or maybe because many participants are of a younger generation. After a meeting there are many visual images on the WhatsApp group, which turns out to be very helpful for the ones who could not be present. These images form together with my synopsis of the themes discussed, a sort of bridge between meetings. Sometimes I pinpoint to other perspectives as to case presentations because not all cultures have the same way of approaching things. Not every country uses, for example, a diagnostic system. In some countries, the role of religion in mental health or education is very different than in other places in the world. I look if feedback given to a case presenter is helpful. Or I try to formulate a common theme. Crucial for the group to make space for building their own workable atmosphere. In the process, participants spontaneously make use of the writing button to provide data of a book or article around a topic. Last but not least, the education committee of IAGP organises every two months a meeting for all InterVision group leaders to share and discuss their experiences with each other.

Remarkable points

- The importance of group diversity lies in the exposure to different perspectives in dealing with work dilemmas. This can lead to discover sources of strengths in other cultures when it comes to existential issues, such as life and death, revenge and forgiveness and acceptance of transitions in life. The possibility to dip into a well of diverse rituals, family bonds, customs and support experienced from spirituality and nature make group members realise sources of strengths in other cultures, as well as appreciate and discover forgotten sources in their own culture.
- Make time as facilitator to let group members get acquainted with each other and hear about their professional backgrounds. When it is not possible, have a meeting online where people can communicate with each other, ask questions and then you explain what transcultural InterVision is before starting with presenting cases.
- Be aware of the intensity of a transcultural InterVision group where impact of the diverse contexts with trauma, political instability and



spiritual orientation on members life and profession. This requires for keeping a good balance between content and process. Afterall, InterVision is not therapy.

- Pay more attention to nonverbal communication online, such as using nonverbal signals, putting hands up for wanting to talk or hands against ears meaning cannot hear you; using the chat button to a person that has problems with sound or vision. It takes time for everyone to get accustomed to this.
- A WhatsApp group is very useful besides the InterVision session, not only for administrative purposes but also as a creative way to compensate for the lack of nonverbal clues. Group members send symbols and images such as pictures of hearts, flowers, muscled arms and funny faces. I think it helps to let concepts and suggestions sink in and give some notion of what was going on for the people.
- It is recommendable for transcultural InterVision to have facilitators who have experience with different group modalities because some modalities are easier to grasp for some people than others. I found it an advantage that I have a lot of experience with InterVision in small and median size groups, even online. The difference between teaching supervision courses and being a supervisor helps to keep the boundary between supervision and InterVision. The main difference is equality, everyone is equal in contributions. No one is the expert.

CONCLUSIONS

Transcultural InterVision is a tremendous learning experience for becoming conscious of one's prejudices and privileges. Questions and stories can be confronting and shake members out of their comfort zones. It is a real challenge to stay curious and open and eager to know what is behind some charged reactions instead of drowning in guilt and shame. Curiosity can help to overcome ingrained judgements so that cultural knowledge can lead to adjustment of attitude and variation in methods and use of different theoretical concepts. The experiment was a more challenging and connecting exchange of similarities and differences than was expected in advance.





It seems a valuable method to teach and let people experience themselves in a meaningful way with colleagues from different cultural backgrounds. This is affirmed because all participants would recommend transcultural InterVision to a colleague/friend. All had a positive learning experience. One member formulated in a compact way what was helpful. “Realise, one more time, a human being is the same all over the world, although there are different cultures. That means the professional who works with mental health has to have a safe place to share about his/her own subjectivity and own professional practices with other people”. Another participant said:

My goal was to connect with people from several cultures with different perspectives to enrich my learning process and to widen my perspective about other backgrounds and cultures. This group enriched me so much and it met my goals, except that I expected more focus on differences and similarities of backgrounds. The most important and helpful was the deep authentic connection that we had as a group and to experience this. Being seen, heard, felt and supported as a human being despite all differences in culture, language, models in therapy and background, we could all share the deepest connection as human beings and the support of the group.

There was some ambivalence about structuring case presentations and group process. We spoke about it and I will be more alert to this in the next InterVision group and be alert to discuss boundaries. In my view, this transcultural InterVision group has been experienced as a safe place where one can share with colleagues from different cultural backgrounds the intricacies and vulnerabilities of working as group leaders.

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Supervision in a Transcultural Setting

Supervision is necessary for professional and personal development of the group psychotherapist. It is a skill and an art. In group analytic supervision, the supervisor will look for parallel processes between the reactions of the supervision group and the group brought for supervision, and uses this as a tool for understanding the themes of the group. To supervise in another culture and in another language is specially demanding. The supervisor works outside of their comfort zone, that is in a different foundation matrix when it comes to the social, historical, political and often religious structures. The common shared ground is the basic humanity and the wish to work in and with groups. Thus, the supervisor must interact with not only the material brought for supervision but clarify the context of the therapy group and the working conditions of the group therapist—the expectations and challenges. The interpreter is crucial here also for cultural “translation”. Examples from supervision in post-communist Czech republic and from contemporary China are given as illustrations.



INTRODUCTION

“It was impressive to see how great and deep-going was the influence of the doctors’ personality and approach on their group of patients [and] how change in him in relation to his group particular changes on an unconscious level would alter the course of events in the therapy group.”

S. H. Foulkes, 1964, p. 86.

The initial quotation states the fundamental belief in the power and necessity of supervision for continuous therapeutic group work. In a transcultural setting it is not only the individual personality of the group therapist that influences the work with the patient group. The social and political context in which she works affects the social unconscious, (Hopper, 2018) not only her own but that of the group as a whole. For a supervisor from a foreign culture, it is of the utmost importance to be aware of this influence and to realize that much will remain obscure, and much will be incomprehensible. But you need to listen, and allow yourself to be confused, to explore and seek clarification.

As a supervisor, you must make an effort to develop your cultural sensitivity in a nonjudgmental way. You cannot count on what you have read and heard beforehand, because the patient’s lived experience will often be quite different from what you imagine. The supervisor from a foreign culture must be aware of the cultural limitations of her ability to understand and acknowledge the need to enter with an open mind into an exploration with the supervisee and the group, based on this necessity. The supervisor knows about supervision. The supervisee and the group members know the culture. The supervisor puts herself in the service of the material and the presenter and is using the supervision group as a mean to gain better understanding. The initial important position is to be “not knowing”, but at the same time capable of reacting to the conscious and unconscious material. Firmly rooted in her theoretical and professional experience, she will need to have confidence in her intuition.

In this chapter, I will describe work as a supervisor with group diversity and give examples from a training program in Prague, Czechoslovakia, from



1995 till 1999 and a recent program in China. Key concepts in group analysis, and the supervision process are presented with reflections on how to adjust in a transcultural context. That includes the use of translators.

Case story: group analytic training program Prague

This is a personal account based on memory, case notes and not least the papers the participants wrote at the end of the training program.

The institute of group analysis in Copenhagen ran a five year block training program in Prague, Czechoslovakia, from 1995–1999, where I was one of two supervisors.

The trainees, who wanted to receive an international recognition as group analysts, were all highly skilled practicing professionals, with years of “underground” psychoanalytic training. They included descendants of Jewish holocaust survivors. Psychoanalysis were forbidden during the Soviet communist era, considered to be a threat to the political system, because of its ideas of individual freedom, and the understanding of the human being.

Social structures in Czechoslovakia, as elsewhere in East Europe, were turned upside down with the breakdown of the communist authoritarian system. The world seemed open to be explored and conquered, and there was a pervasive feeling of new opportunities. But, at the same time, there was a subconscious feeling of envy towards all who came from “the West”, people who had lived lives with full access to freedom and information as members of the international world.

In our national complacency, we thought our Czech colleagues would perceive us in this way.

We, the two supervisors, came with our professional and personal background, some knowledge about Czechoslovakia, its culture and recent political history. But no inside knowledge of what it had been like to live in opposition to the totalitarian state or to live in this period of transition with expectations for a freer life. We came from a homogenous Scandinavian social democratic welfare system, a small country based on trust, and, as most Danes with skills in negotiation and diplomacy, with empathy, curiosity and good will. We found the challenge of exploring this new world an intense and invigorating experience, but with no idea of what we would learn.



The first step of the work was to create a working alliance with the participants. We expected this to be easy, but it was not. In our naivety, we had not considered how we, as Danes, would be perceived by the Czech participants. The participants knew each other well from way back. They had been in a therapeutic group together, shared the ambition of developing their professional skills further through interaction with the outside professional world, and they put in a lot of effort and responsibility to achieve this. As in all closed groups, they, of course, had conflicts and alliances of their own. They were in charge of the training program, they had found a venue, they organized accommodation for the supervisors, paying for our flight tickets and even provided a small fee. We entered their closely united group, it turned out that we disturbed the system because of our roles, our power and our foreign language.

In the beginning, we were blind to the differences in the foundation matrix, but found out that we had to spend time getting to know each other, familiarize ourselves with the social context of the participants and their previous experiences and skills to adjust and negotiate the conditions for the training program in order to respect the skills the group already possessed, but also to live up to the requirements that had to be fulfilled in order for them to become qualified group analysts.

Post-communist Czech society was characterized by widespread mistrust in any form of authority, and this was deeply embedded in the social unconscious of the supervision group. We had the authority as gatekeepers to the longed for international professional world, and with the power of accepting or refusing to acknowledge their skills. So, we had to redefine ourselves and our roles. Together, we and the participants began the process of establishing and maintaining a working alliance to create a common foundation matrix for the supervision group, to develop a shared feeling of cohesion, that included us all, even though we, the foreign supervisors, at an unconscious level, were felt to be intruders.

To make boundaries clear, we established an administrative meeting at the beginning and the end of each supervision weekend to catch up on what had happened since last time, to bring up issues they had discussed among themselves during the intervening period, important new focus points, and to evaluate the progress and making plans for the next weekend. This cooperation on more equal terms changed the climate in the group for the better. In the



supervision group that followed, the dynamics changed to a “work group” in the Bionian sense with a mutual wish to understand each other.

As an example of the circumstances in which they had been living, the participants told how, during the communist era, they had developed two report systems at the hospitals where they had been working. One consisted of the official files on psychopathology and medication to be put on display when the quality control inspectors visited the hospital. These files were spotless. The other, unofficial files, contained psychodynamic case notes on the personality structure of the patient and on the psychotherapy progress which they used as another part of their work. These files were hidden. This habit of keeping double accounts later turned out to be part of the social character in Czechoslovakia and would appear time and again in the groups brought for supervision. It implied that they always had to be on guard and were very selective as to whom they would trust. It became an unconscious part of the entire supervision project.

The theoretical part of the training took place in self-study groups based on a list of required literature specific for group analysis, and with a final paper demonstrating clinical material in a theoretical context. At one of the administrative meetings, they told us that the group had *not* met (as agreed) in order to discuss the theoretical literature. When we reacted to this information with curiosity and not as expected with reproach, they told us their confession was very significant as they through it broke years of playing “hide and seek” with the authorities and, instead, took open responsibility for their actions. During the communist regime, they would pretend to have done as agreed and as demanded and openly admit that they had defied the authorities.

The first cases brought to supervision were chaotic. It was difficult to get a grip on what happened in the groups. Why were the patients referred, what was the therapeutic contract, where did the groups take place? Boundaries were blurred as group sessions took place in the form of seminars in the countryside with a lot of social activities at the same time. The feeling of being free and able to do what you wanted was prominent. This contrasted with the supervisors more rigorous understanding of a group analytic group in a training program.

Before delving more deeply into the development of the supervision group in Prague, I will introduce a few key concepts of group analytic theory in order to shed light on the theoretical background of the supervision process.



Some key concepts in group analysis

The founder of group analysis, S. H. Foulkes, was of German origin with a Jewish background. He went to Great Britain in 1933 and stayed there for the rest of his life. He worked as a psychiatrist in the British military during the Second World War and witnessed how much evil groups could and would do under the command of destructive leaders. In the postwar era, there was an optimistic belief in the necessity of respect for humanity, human rights and democracy in order to prevent a new world catastrophe. Foulkes was very much part of this optimism. During and after the war he developed group analysis based on the idea that groups are living organisms with an existence of their own. Symptoms of the mind were seen as failed communication and failed interpersonal relations. He also stressed the point that no action could be understood outside of their social context. He saw human beings as social creatures and considered the group as the basic psychological unit, the individual being the basic biological unit.

Group analysis is a theory of the interaction between the individual and the group as a specific entity. The group functions as a whole. Every stimulus will create change in the system of the group and through that in the individual members, thus systems theory is vital for the understanding of group analysis.

Foulkes talks of the *figure/ground perspective*, with a shifting focus between the individual and the group itself. This is a key element in the therapeutic process, and thus also important for the supervision process. An example of this is the “scapegoat”, quite often found in groups: The one group member who “disturbs” the group process by creating irritation and anger amongst the other group members. It is often accompanied by the fantasy that if only the group got rid of this particular member, everything would be so much better. From a group analysis point of view, the behavior of this member is a behavior on behalf of the group, as well as on behalf of the individual. The therapist will look for the affects which the “scapegoat” is carrying as part of the group dynamics. She will make it part of the group process and interpret it in this way, subsequently shifting her attention between the individual and the group.

In one of the groups in Prague, it was revealed that a member X had belonged to the communist party and been an informer. The therapist had known this all along, but, as a request by X, chosen to keep it a secret from the group. It took some time during the supervision process to uncover this. X



had been perceived as narcissistic by the other group members. Not listening to the others and always seeming to know what was right. The rest of the group reacted strongly, accusing him of destroying the group and actually wanting him to leave. The supervision group encouraged the therapist to see it as an example of scapegoating. Through this insight, the therapist was able to address how secrets and destructiveness was carried by everyone in the group and how this was a part of the social unconscious of the former communist regime. Little by little, member X revealed his past to the group. For him and the group this was a very important step.

One of Foulkes' most important theoretical is the matrix. It signifies a social network in which the individual forms a nodal point.

“The Matrix is the hypothetical web of communication and relationship in a given group. It is the common shared ground which ultimately determines the meaning and significance of all events and upon which all communication verbal and non-verbal rest” (Foulkes, 1964, p. 292).

The foundation matrix is our common shared ground, social, political, historical and religious. We use it as a tool for the basic understanding of each other. However, when we work in cultures very different from our own, we are in unknown territory and must act as explorers. What we share universally in the foundation matrix is our basic humanity with feelings and reactions towards our fellow human beings. The more we share, the easier it is for us to think we understand each other because we have the same frame of reference. And the less we share, the more important it is to explore the differences and find out what they mean. During a supervision process, it is important to be especially aware of differences in the foundation matrix. In the supervision group in Prague, we enlarged the common foundation matrix and came to share the feeling of being pioneers in developing the training program, developing a common understanding based on a more trusting relation.

The dynamic matrix is Foulkes' term for what is created in the therapeutic and in the supervision process. It signifies the underlying shared meaning of the processes, and how to see it as a unified whole. The dynamic matrix and the development of the foundation matrix cannot clearly be distinguished in the transcultural supervision process because of the influence of the social unconscious.

In any group, conscious and unconscious communication is constantly taking place. *Communication* is the main tool for therapy and supervision. Foulkes described four levels:





- **Common sense.** The group represents society, and everyday talk on a more factual level. The clarification of the organization, boundaries and conditions for the group work are all part of common sense dialogue. Sometimes, however, it is problematic to achieve clarity, which shows that unconscious processes also take place in the course of this type of dialogue.
- **Transference.** The group represents the family (father, mother, siblings). Repression and other semi-mature defense mechanisms tend to dominate. In the group, transference to the therapists and to other group members may occur. During supervision, a strong positive and/or negative transference to the supervisor(s) can be found, but also to other participants, especially when the supervisor comes from another culture and one of the participants acts as the informal group leader. In the Prague supervision group transference to the supervisors shifted between positive and negative reactions, and countertransference followed the same path.
- **Projective.** The group represents early internal object relations from part object to the formation of whole objects. Primitive defense mechanisms such as splitting and projective identification are dominating. When during the supervision process the feeling of chaos and “not-knowing” becomes overwhelming, the projective level of communication is taking place. To understand this helps the supervisor to regain her capacity to think, enabling her to understand the chaotic process as a message from the material being presented and from the unconscious of the supervisee. This was, at times, very prominent in Prague, as in the example of the scapegoat.
- **Primordial.** Here the collective unconscious, universality and archetypes are dominating. In group analytic therapy this level is not often addressed.

Notes on supervision

Groups have the potential for development and healing, but also for destruction. Groups make heavy demands on the participants, as well as on the therapist. Therefore, supervision is an essential and sensitive part of



working professionally as a group therapist. Supervision is a learning process in that it creates a space for the supervisee to demonstrate and reflect on what actually goes on in the therapeutic process and explore how to think and act analytically. Conscious and unconscious processes are laid bare in order to gain a deeper understanding, at the same time exposing the supervisee's talent, competences and weaknesses, and showing the capability of putting oneself in the service of the analytical process (Lindhardt, 2007).

Supervision takes place somewhere between therapy and didactic teaching. It is an essential part of a continuous professional development, and it will never stop, because no one will ever be in command of what goes on in any therapeutic situation.

On a didactic level, Foulkes is describing the aim of the supervision as well a way to throw light on the therapeutic relation as a method to aid the professional and personal development of the therapist and thus enhance the skills.

The supervision model in group analysis

This model is based on the understanding that the processes in the therapy group will be mirrored and resonated in the supervision group. The supervisor pays attention to the way the material is being presented, how the presentation is structured, its emphases and its omissions, the emotional attitude of the presenter, as well as the supervisor's countertransference reactions. Furthermore, how the members of the supervision group respond to the presentation, and how the group reacts during the presentation.

The supervisor works with the perspective of figure and ground, and part of the work is to gain an understanding of the foundation and dynamic matrix.

The supervision takes place in a group setting. The task is to mirror and reflect the work of the group brought to supervision. It creates a space for dialogue between the different parts—the group members, the group members and the supervisee, the supervisor and the group and the supervisor and the supervisee. The supervisor should create a climate of enquiry in a supportive atmosphere, facilitating the building of trust and with a focus on the task—the therapeutic process—and the supervisee's ability to facilitate the process.



The supervisor

The role as supervisor is to be the practical and dynamic administrator of the supervision group. To create a space where the culture can unfold, to be transparent in the work, to show an attentive listening attitude in order to make the material unfold. To teach, which means provide information about technical and therapeutic principles and dynamics; to use interventions like clarification, exploration and confrontation in order to focus on the social context and the social unconscious; to use oneself as a role model. There exists an interface between teaching and supervision, where the supervisor can give more direct advice and be more explicit and transparent about the theoretical model.

The supervisor from a different culture needs to be a skilled professional, flexible and attentive to the culture she is working in, and openly acknowledge cultural differences.

How to structure and compose a supervision group

As in other types of dynamic administration of a group, there should be an agreement about the aim, the structure, the frequency of meetings, leave of absence, the required material for supervision, and the need for confidentiality. There should be a plan for turn taking and space for emergencies. In other words, the boundaries should be clearly stated from the outset, and violations of the boundaries understood and interpreted in the light of the dynamics of the group.

The importance of boundaries: an example from supervision in China

In a transcultural setting, it is essential for the supervisor to grasp a little of the organizational boundaries of the group work. This can be rather challenging.

In recent years, I have taken part in a psychoanalytic training program in China. In collaboration with a Chinese colleague, I was responsible for the group part of the program. China in the 2010s provides a different challenge from Prague in the 1990s. The Chinese market economy now exerts a strong influence on psychotherapy. Counselling centers have been set up serving



the educated and affluent middle class. They grew up in single child families with parents who had typically left a mainly rural background to live in the huge cities where the family structure is much frailer. One of the legacies is the cultural revolution with its collective social norm. And the single child families favored the male child and disrespected the female. Often these young people's upbringing was authoritarian, demanding and harsh. They are under the double pressure of strong social control alongside with their individual struggle to obtain material goods. This conflict has resulted in a more narcissistic social character among young adults who suffer because of the difficulties they experience establishing stable intimate relations.

The counselling centers are providers, and if you can pay, you can "own" your therapist for many hours a day. Criticism is taken very seriously, and if a client complains, the administrator of the center will comply with the client's wish without consulting with the therapist about the dynamic meaning. For the supervisor this is a social fact seriously limiting the scope of her interventions, but not preventing dynamic reflections with the supervisee and the group.

Thus, it is of outmost importance to clarify the working structure and conditions for the supervisee before you dig into the clinical material.

On one occasion in a supervision group in China I, as the supervisor, started to feel very tired and lost account of what was being told. I could see how the group members started yawning, doodling or looking at their mobile phones in their laps. After a while I asked the group why they seemed to be so bored, and they answered that they felt the group completely lacked energy, and one even had the impression that the therapist was scared of the group. Then, the climate of the supervision group changed. The therapist confessed that she felt useless and was afraid she could not meet the demands of the counselling center where she worked because one of her clients had complained and was leaving the group. Her mentor had told her to try to accommodate his wishes, which she found was part of his usual line of defense when contradicted. This episode enabled the group to think and we started working again.

Even though the supervision group is created as a work group (Bion), it often turns into a basic assumption group not least in transcultural settings. The members start to get bored or to fight with each other or with the therapist (if they dare). This must be understood as a flight/fight group. At other times the supervisor is seen as omnipotent with the right answer to every problem as in a dependency group. In such cases there is strong pressure on the supervisor



to provide definite solutions to a clinical problem. Not least in the beginning of my experience in China, I felt the pressure on me to provide authoritative answers. To fall into that trap is very tempting for the supervisor as her own feeling of powerlessness is never far away, so the need is strong to restore some kind of authority. However, this will be counterproductive for the purpose of the supervision, which is to empower the therapist by supporting her containing and reflective ability in order for her to find her own way, leading the group forward. Sometimes I have been challenged with the question of what I myself would have done in a specific situation. Before giving an answer, I always try to engage associations of the members of the supervision group. This can be very useful and in this way the supervisor act is as a role model. In supervision, it is important to balance the level of anxiety in the group with the need for safety and transparency.

“Lost in translation”

As S.H. Foulkes viewed mental symptoms as failures to communicate, language is of the utmost importance. I trained in group analysis in Copenhagen with colleagues from the London Institute of Group Analysis. The working language was English with trainers working in their mother tongue, while the trainees had to manage in their second language. In the Prague case, supervisors and supervisees were equals, both having to work in a foreign language. When the work went smoothly, there was an atmosphere of everyone wishing to help clarify possible misunderstandings. Sometimes the work failed completely and nothing made sense. Such breakdown of communication had partly to do with language, but was more likely caused by its mirroring the process in the therapy group. Thus, it had to be understood as a defense against uncovering the unconscious meaning of the communication in the group and/or in the supervision group. These linguistic difficulties became an important part of the whole supervision process.

Working with an interpreter presents a special challenge. Ideally, she is proficient in both languages, generally with a good grasp of professional terminology, and some understanding of psychological processes, and the ethical aspect is very important considering the sensitive material she is translating. Confidentiality must, therefore, be a part of the contract with the interpreter. She is a part of the dynamic matrix, working in a specific role at the boundary of the group, i.e., she is simultaneously part of the group and



an outsider. Sometimes the interpreter is almost invisible, at other times transference and countertransference reactions are directed towards her. It is important that the supervisor becomes aware of these reactions, tries to understand them in light of the material presented and gives her understanding back to the supervision group, while at the same time protecting the interpreter. The process of understanding the hidden content of the material is often highlighted by the supervision process. Sometimes the supervisor feels totally lost and useless during the translation. Reproaching herself that she doesn't understand a single word, or in her mind blaming the translator for not being professional and/or skilled enough. Very often neither is the case, but the reaction is always a sign of underlying unconscious, and often destructive, processes.

The good enough interpreter must at times act not only as a translator from one language to another, but also be sensitive to the supervisor's cultural ignorance and occasionally supplement her translation with a cultural footnote. It can be useful for the supervisor and the interpreter to have some private space to follow up on the process after the supervision, to discuss the difficulties and highlight what went well. The supervisor can ask the interpreter about her emotional reactions, because naturally no interpreter can remain totally neutral, but will invariably react to the material and the emotional climate in the group. In this setting, the interpreter can contribute by raising the supervisor's awareness about cultural misunderstandings.

In transcultural supervision groups, I have several times experienced group members starting to talk among themselves in their own language, shutting the supervisor and the interpreter out of their communication. This can be understood as an attack on the authority of the supervisor, but may also reflect their difficulty to communicate in the therapy group. The intervention, which often—but not always—helps, is simply to point it out and inquire why there is a need to exclude the supervisor.

Prague revisited

I will end this chapter by returning to the participants in Prague and their developments as group analysts.

During the supervision sessions a number of themes emerged. Most important: socialization during totalitarian regime, dominated as it was by fear and mistrust, created a "false self". As there was no room for individuality and





personal development, a group under pressure would come together either to create a safe space as a protection against perceived danger, or it would be full of mistrust with no one daring to expose their inner feelings. Such groups could create a “false we”. In the process of group therapy, a “group as a whole” might slowly emerge with better cohesion, a genuine search for meaning, and the gradual development of mutual trust. This eventually leads to new forms of socialization through a corrective experience during which a “true we” could be established (Klimova, 1990).

The question of authority and the exhilarating feeling of abolishing authority was an overriding issue that was also played out in the supervision group. Groups were perceived as the road to freedom, and to begin with the therapists were afraid of taking authority and maintain the boundaries of the groups. Slowly it became clear that authority is not always a bad thing, but can be appropriate in order to create a space for cohesion and trust, allowing the individual to develop in the group. Another prominent question was how to deal with the “bad parts”, i.e., former communists and secret agents who sought forgiveness and potential reentry into civil society. The therapists had to work hard in their groups to gain access to the destructive sides in all human beings, without letting go of their professional authority.

At the end of the training course in Prague every participant produced a paper which was subsequently evaluated by an independent evaluator. They presented clinical material from a group together with relevant literature.

In these papers they demonstrated the learning process that had taken place.

All papers described the personal development of the therapists as well as of the groups brought for supervision. For the supervisors, it was a very fulfilling experience to see the successful result of five years of mutual and hard work.

CONCLUSION

In this chapter I have tried to give examples of how to work as a supervisor with group diversity in different times and cultures. The theoretical roots of the work is the group analysis. I have shown how the supervisor from the figure/ground perspective can apply techniques of group analysis, like mirroring, resonating it within the social context and social unconscious, adjusting it to the diversity of the groups.





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CHAPTER 8

The Group Pictogram and its Use in Traumatic Situations: The Subject Spoken by the Group

Group work is essential, especially when an individual faces suffering that stems from a traumatic situation. We are born and become individuals thanks to groups that comes before us (family and society). When the individual experiences a devastating situation which leaves them adrift, taking back what was lost requires a holding and containing environment. These are unspeakable experiences. They remain nameless. One possible path to them is the use of some group therapeutic mediators, such as the group pictogram. This form of mediation could facilitate being able to register, name and understand what has been foreclosed from lived experience. When individual pain becomes collective it is possible to signify the experience. A vignette is presented of group work with women who experienced traumatic situations during the armed conflict in Peru and group of women who immigrate to Brazil.





INTRODUCTION

The group with its history and laws precedes the birth of the subject. The subject becomes an individual in the encounter with the other. Within the interwoven alliances, contracts, and unconscious pacts, the individual becomes a group subject. It is in the encounter with otherness that leaves traces of the diverse, the new and the different that the subject constitutes a social subjectivity.

It is important that Kaës (2002, p. 5) emphasizes in Freud that psychic suffering of social origin does not occur as an “extension of the psyche” experience. It also belongs to the realm of the social, which has its own autonomy. Social life has its own demands, and it is these demands that are imposed on the psyche.

Returning to Freud’s idea that psychic suffering of social origin is not an “extension of the psyche” is fundamental since many psychoanalysts have explained the social as a projection of the internal world, as if it did not have a different status. The social has a presence through what we call the culture of a people, with its myths and rituals, its social organizations and its educational, religious, legal, and health institutions. The social marks its presence, questions, challenges, produces, provokes, allows to develop, to grow. On other occasions, instead of allowing growth and creation, the social imposes suffering due to experiences of violence or natural disasters. Suffering that, in general, cannot be named due to the perplexity about the “nonhuman” nature of some social coexistence; and to the environmental failures due to disasters and/or the impossibility of the environment to serve as a source of containment and support. At the present time, the social has been impacted by the presence of the COVID-19 virus that interferes with and break up routines, forces social us into isolation and brings anguish and fear.

When thinking about the world we live in now, Kaës (2012) considers that those characteristics proposed by Freud in 1929 for the civilization and its discontents are insufficient to describe the current situation. We live in a time of pain, of helplessness, discontent in the very being of humanity, which produces the feeling of uneasiness, insubstantiality, which Kaës calls a “*malêtre*”. In creating this neologism, he describes the feeling of dissatisfaction



characterized by psychic life being “shaken up” due to the weakening of social ties, which calls into question the very capacity to exist. I think that it is about existing humanly, because what we are losing is the capacity to be moved, to show solidarity, to empathize with the other. It seems that we are losing what is properly human.

I create the neologism “*malêtre*” [our emphasis], without a hyphen, mistreatment or malformation is said or “of being” (*désêtre*) [our emphasis], because it is about pain, helplessness, and evil in the very being of humanity. Undoubtedly great words, but also great evils that force clinical analysis, metapsychological construction and ontological interrogation to coexist (Kaës, 2012, p. 4, our translation).

What has changed, since civilization and its discontents, written by Freud between the two wars, are what we would call, following innumerable thinkers, the socio-historical conditions of the world before and after Auschwitz. According to Kaës (2014, p. 209) “the intersubjective and intergenerational contract” that could function as guarantor or social meta-frame, the feeling of belonging to a group, a collective is weakened, “smashed”. The social spaces, the contracts, and the organizing stories (i.e., myths and beliefs) that could serve as protection are broken.

The traumas, the social traumas

The conception of trauma that we want to emphasize here is not that of the trauma described by Freud. He has its impact in the intrapsychic and in the psychopathology of hysteria. Instead, we are interested in recognizing the existence of experiences shared by a certain group or a community that are characterized by the breaking down of what made them safe and sustained. In 1979, Kaës claims that man’s life is spent between crises, ruptures, and sutures. It will be in this space that the vicissitudes of the social, the mental, and the psychic are at stake (Kaës, 1979, p. 11). In the crisis situation, Kaës observes that the articulated and the linked are broken, and continuity becomes discontinuous. Where faced with paradox and compromised formations, there is an increase in antagonisms, disorders, and catastrophic conflicts. In the face of ambivalence; splitting, instead of organization; disorganization, instead of creation; dispersion, instead of union, joining, grouping; individualism. Commenting on social subjectivity, Puget (2015) emphasizes the following



as characteristics: the feeling of discontinuity, fragmentation, uncertainty, indeterminacy, unpredictability of ties in today's world. A question arises: is it the case that what Kaës (1979) characterized as "crisis" is nowadays daily experience.

Another aspect of social trauma is that it can be a political social event that affects a population, e.g., a sudden or recurring event, or an accident of nature that is characterized by unexpectedly breaking into and disorganizing a group. The impossibility of naming what has been lived is characteristic and proper of the experience, as if there were no words to state it. Another way is to live as if existence had little sense or meaning. Something that circulates "rattles" the mind, paralyzing thinking and preventing sleep. The subject lives as if there were not a multiplicity of senses for the purpose of living, e.g., living as if life had frozen or been carried away by rapture. The witnesses at concentration camps show that survival consisted of not picking up on some signs, such as, for example, absence of companions, violence, and rather suddenly concentrating mental effort on eating a certain piece of bread, being the last of the row that waits for a tablespoon of soup, and thus be able to ingest, the most nutritious, as Imre Kertész (2006/1975) comments in the novel *Without destiny*.

The experience of immigration in many situations can be considered a social trauma when the person who leaves his/her country experiences immigration as being "uprooted" from their space. I use this expression narrated by a patient who experienced leaving his country in this way, as a disruption, a rupture, a violence and not as a way to continue life, seeking to integrate the life experience with the new culture of the receiving country. Everyday experiences can become very painful, turning the life experience of immigration in a way that cannot be incorporated into the new culture. Some of the people we serve individually or in groups have brought everyday experiences such as racism, the non-acceptance of the accent, the disregard for what is said as forms of suffering, which prevent them from living the country's new culture.

It is evident that social trauma brings with it memories, both an intrapsychic memory and a shared, collective memory that needs to be activated in order to be able to elaborate on what has been lived and create strategies so that it is not repeated. When we intervene in this type of situation, it is essential to be able to exchange words, to build together what has been





experienced. Elaborating and giving a voice to the unspeakable produces not only relief, but also invites you to think, feel and act by preparing to continue living, to turn meaningful living expanded with multiplicity, with the diverse shared in the encounter. You visualize not only what was cut and interrupted by the traumatic event. Living with pain is not forgetting, it is using what has been lived to build something in the creative, productive and life orders. In this moment of global pandemic, changes in solidarity and changes in the way of living together and meeting each other arise in the face of events, like COVID-19, that are unexpected.

Specific interventions: group devices-frames

It is essential to our work to think of devices that allow us to address the pain and suffering that has its origin in the social. Undoubtedly, if the subject constitutes himself as such, thanks to the presence of the other(s) and is, in Kaës's words, a group subject, it will be fair to offer him spaces of welcome and continents, as a group capable of restoring what has failed and which is shattered in his environment. In the COVID-19 moment we live in, we are working with listening groups that meet weekly at a specific time through a platform where we can share the experiences produced by social isolation. These are young people who feel the absence of their grandparents, of the loving presences of these encounters. There are also grandparents who have similar feelings. Sharing dreams, drawings and stories allows us to elaborate and share what we have lived through.

We consider it necessary to offer specific interventions that can be called group and/or family therapeutic consultations. I use the Winnicottian proposal of therapeutic consultation, characterized as an intense, deep, but brief encounter, with the use of a therapeutic mediator. The mediator proposed by Winnicott (1953) who calls the "*squiggle game*". Inspired by this game, we introduce the *group pictogram* (Pezo, 2009, 2014). This therapeutic mediator facilitates through drawing, building, and creating together with other drawings scenes that bring memories, and unique and shared dreams.

The *group pictogram* allows for the emergence of the word that, when allowed, can express pain and describe what was lived which is not stored in our memory. The words found may also show that which did not happen





when it could have happened, as it would be an act of love, care or support. Therapeutic mediators have the function of allowing the word to circulate.

It is thanks to the presence of “the other” and the activation of the preconscious that the group favors. Thus, the word and the feelings come out of their encapsulation to go to meet the multiple, the diverse, and the polysomic.

When we work with therapeutic mediators it is important to facilitate talking and interjecting about what we live, feel, think, do, and experience. Attentive listening, perceiving, associating with, and carefully investigating replaces what would commonly be the psychoanalytic task of interpreting. Winnicott suggests that what is more important than interpreting is that the patient be able to get to some essential point. To intervene or to interfere, as Puget (2010) proposes, is “to interfere in the mind of the other, in their system of thought without this implying to explain; [to] only [produce] an action that questions and interrupts a type of thought” (p. 4).

About group devices-frames

We work in interventions with group device-frames that have two simultaneous purposes: to welcome each of the subjects and to mobilize the psyche intensely and deeply. We use therapeutic mediators with groups of populations that experience crisis situations, social trauma, psychosocial vulnerability, psychosomatic patients and young people who cut their own bodies. In general, subjects who lived through nameless, unregistered, traumatic experiences benefit from the bonding experience. In these groups it is necessary to produce questions that allow the lived experience to be expanded. Feelings and thoughts may arise, listening to oneself and the other. We want to provoke a saying, a polysemic, creative intermingling, characteristic of diversity and discursive multiplicity that allows one to be able to get out of the drowsiness, out of the “not making sense” of living.

We understand the group, according to Kaës (2015), as the place of the interfering conjunction of three spaces of the psychic reality:

- That of the singular subject, initially constituted as the subject of the group and as a member of a group.
- The group space as a specific entity.
- The one of the intersubjective bonds that form there.



Working with groups is considered an extension of psychoanalysis, since we follow the fundamental assumptions of the psychoanalytic method. We suggest that the members of the group say, draw, do or dramatize what they want according to the principle of free association, with a listening in free floating attention and being careful in regards to the transference and countertransference processes. We seek and favor the emergence of inter-discursive processes, with the use of words, gestures, body language, and dramatic creation. We pay attention to group associative chains and intermediary processes, with their points of articulation. Group associative chains are produced by the encounter and articulation of these three psychic spaces of unconscious production: the intrapsychic, the intersubjective and the group. Additionally, when we introduce a therapeutic mediator, the chain will also be linked to the stimulus caused by the mediator.

The group pictogram: therapeutic mediator

Winnicott, interested in expanding psychoanalytic listening to little-explored, social settings, finds a way to communicate deeply with a child in a space he calls therapeutic consultation. In this context, Winnicott uses a game that he calls the squiggle game. This game consists of one member of the therapist-child pair alternating and making closed-eye scribbles, which the other transforms into drawings. In this back and forth, doodle-drawings, words, memories, and dreams arise that connect and are associated with the drawings. Thus, the images speak as in dreams, they say of themselves the same, of what is built together with the other in the encounter (intrapsychic and intersubjective). Here, Winnicott stresses that what is important is not the “brilliance” of an interpretation, but rather that the patient can arrive at some important point of himself.

Inspired by this model of therapeutic consultation, of joint construction of drawings, we introduce a group game called the group pictogram as a mediator, useful in institutional interventions, in crisis situations, in family care.

This mediator consists of inviting the members of a group to draw together on the same sheet of paper, to build drawings, narratives, stories, and unique shared dreams. At the bonding meeting—of groups or families—we ask that they “draw together on this sheet of paper”. It is usual that, upon request, members of the group ask whether each one should make a separate drawing or if it should just be one drawing done by all



members; we respond that they should do what they desire. Thus, we open the space to free association, to desire, to diverse modalities of work and co-construction. As they draw, the members of the group establish connections between the lines, drawings, sayings, and what is implicitly understood. All of this leads to the need to build a story together or to talk about what they did. As soon as they comment, surprising and unprecedented encounters occur with what arises.

The establishment of associations with recent unexpected moments, memories, or dreams lived singularly or in common is very characteristic. The fundamental thing is that the mediator allows them to communicate with each other and to develop traumatic experiences. The return of memories that seemed forgotten, repressed, and denied articulate what was disarticulated, all connecting the internal with the external, and the past with the present. In this way, finding words for unseen pain that are facilitated by the use of the mediator create the encounter with the alien and the borrowing of the other's preconscious. Resulting in a bonding encounter.

We would like to illustrate a group situation of a joint creation of drawings and associations which weaved and built a construction that allowed us to elaborate on what we lived and suffered. Group associative chains show how memories emerge as members of the group talk about what they lived through and what they can now build together. They evidence processes of co-creation, co-production, and co-associativity in doing so.

We present a group made up of people who lived through various situations during the armed conflict that took place in my country. In the context of a group intervention, within an institution that welcomes them and offers various activities, such as a psychosocial care center, the group developed a drawing. The drawing seemed to illustrate the stereotype of a landscape. When invited them to speak about what was produced, they began to express:

Teresa:

Here the sun, which is shining, is a sunset and suddenly it shines. We are like this sunset. Each one will have gone through their lives and stories and perhaps we are here united in our sharing.

Maria, to continue:

The sun, hope, but we must not forget that we are losers, even if we hide, even if we find justice, and say, John Doe, 9-years-old, John Doe, 10-years-old.



Teresa:

Even if they give you gold and silver, we will continue with the memory. It is no longer the same where they have burned. When I leave, I calm down, but still see the murderers as they stick out their tongue and continue to mistreat us psychologically. “Go wash your panties, you have nothing else to do” is a mistreatment that we continue to have.

I asked them about what they were saying, or trying to say, in order to gain a better understanding. They answer:

Tadeo:

We went to a public hearing. The military was deported, but wherever we travel they mistreat us.

Celia:

I have no justice, if I was a congresswoman perhaps, they did not kill the person, they killed the relatives. When talking about rape they ask the lawyers “what is rape?” They even defend them saying “that women showed her legs” or ask “how do you know it was rape?”

Teresa:

Even if they pay us, nothing will give us back what we lost. All we want is for there to be no other killings. We have denounced the killing so that it spreads, so that there are no other murders. Since there was no law, my mother, who was only a Quechua-speaker, was killed by that fury.

Mario:

Torture has no explanation, they were abusive. Stick your nose in and I will kill you.

Juan:

Hitler was the son of a Jew, a short one. Why did he had so much hatred for his own people? What kind of brainwashing did he do to the military, to all those Nazis, he has manipulated them? If he did not give orders, he felt lost, that is how he lost. He burned so many, something like this happened in Ajumarca, but we heard so many things, a journalist said “how good that they have raped



them”, “your mother was a terrorist”, it seems that they wanted to make you feel what they were saying to us.

This is how they got together, co-thinking, cocreating, co-associating: memories, dreams, and drawings.

In this therapeutic consultation group, we observe that the group is organized in such a way as to make a unique drawing. The landscape seems to represent what is longed for, lost, a peaceful nature that was destroyed. When they say that “there are no more animals, trees producing fruit” they seem to refer to the experience that was actually destroyed was nature (a metaphor of human nature?), that when returning to this heavenly drawn land nothing is the same, that returning to the spaces of origin brings forth the feeling that nothing exists as it was before, which in turn is linked to feeling like the defeated. Thus, working in a group seemed like an experience they needed. One of the participants said so explicitly: “it is very good to be able to share a therapy together”.

Empathic listening group with immigrant women

Psychoanalytic interventions with groups and families are part of our research in the framework of the postdoctorate at the IP-USP and the Laboratory of Psychoanalysis Society and Politics. We attend groups and families that come for therapeutic consultations at the Migrant Integration Center.

Our group was formed for women from different countries and different cultures that, at one point on their lives, they came to Brazil searching for better lives. Immigrants that were living different moments in their lives, some of them were living longer, others just arrived. Even though they have the language, Spanish, in common, we find out they have strong cultural differences. Some of them have strong feelings for their country/home sick/ they miss their food, the land, the smell, the taste, etc., in the other hand, the other group left the country because the conditions were not acceptable for them to live, they feel divided, families destroyed, also because they left behind a member of the family.

A group of immigrant women from different Latin American countries attended once a month in an open group device. The group is made up in each



meeting with a mix of different populations. Some return and some do not. Present at the session is three Bolivian, one Colombian, one Venezuelan, and one Peruvian woman. All women expressing joy at having a psychologist who speaks Spanish. After introducing myself and commenting on my stay in the countries where they have lived, I proposed a group pictogram. I ask them to recall a memory, commenting on what they did that they can then draw together on the same sheet of paper:

Juana:

I made my land. This is how the fields are in my land. I like to see the green hills and the mountains and the little house. When I left Bolivia, I left my land. That is where I want to return one day.

Veronica:

I made the flag of my country. The flags of Colombia and Ecuador have the same colors, but ours is like that and it has this emblem. My country was beautiful but today it is a sad land. There are no families that do not have a member outside. The second country that has received the most Venezuelans is Peru. Our country torn, with family members fighting each other. We went out because we did not have anything to eat. Women and men going out with their children because, in the face of hunger, we must save ourselves. We did not go out because we wanted to. We needed to survive!!

Mela:

Did you leave everything?

Veronica:

Yes, with my husband, we left, now we do not know if, when we return, we will have our own. Because vigilances were created of the houses of those who left, and when one of the communes says, this house is thus empty, they get in and they put someone in this house.

Enma:

This is what Bolivia is doing, or this is the path it will go down. It is what the president wants, to stay forever. He is voting and he wants it to be like in Venezuela.





Veronica:

It is sad to see your country, your flag, your family destroyed...

Ana:

I came from Colombia because they told me that I would have a job here. I came and there was no such job. Every time I think I had better go back, but no, I got a job now. I want my daughter to come here so I will not be alone. Colombia already lives like Venezuela, divided with many problems. Today happily, it is not the same... Despite our similar flags. But I wanted to come, leaving everything.

Lucha:

I am here in San Pablo; I also made the little house that I wanted to build when I return to Bolivia. I lived in Argentina, where I worked as a seamstress, but I returned after two years, I wanted to study, and Cuba offered school for good students in a university. I was a good student, and I went back to La Paz. There is a year and then another, and nothing. There it was not the case that they were going to pay everything, and my dad said he couldn't help me, so, after two years of waiting, from wanting to go to study medicine, I came here. Happily, I married well, and I work in the same field as my colleagues, sewing, but we are fine. We do not work for anyone, only for us. We are no longer the employees of one person, we make our own clothing, and we collect our own money. Happily, my husband is good.

In this fragment of session, we find experiences of rupture, suffering, loss of hope, feelings of pain and fragility lived in each story that arises from what each one is putting on the sheet of paper, as a stroke, as a scribble that invites conversation together with the companions of the group.

Facilitated by the group therapeutic mediator, they were allowed to share experiences and feelings. They processed and elaborated on lived situations and lived aspects of their history. As well, they expressed what it was that they felt and thought. They also expressed what they wished for themselves, for their life, and for their future. To build new paths from their lived history and from what they want for themselves.

Working with immigrants entails taking care of cultural diversity, present in the different ways of speaking, the attitude towards life, the condition of being women, subjects of rights or subjects subjected to external mandates, which,



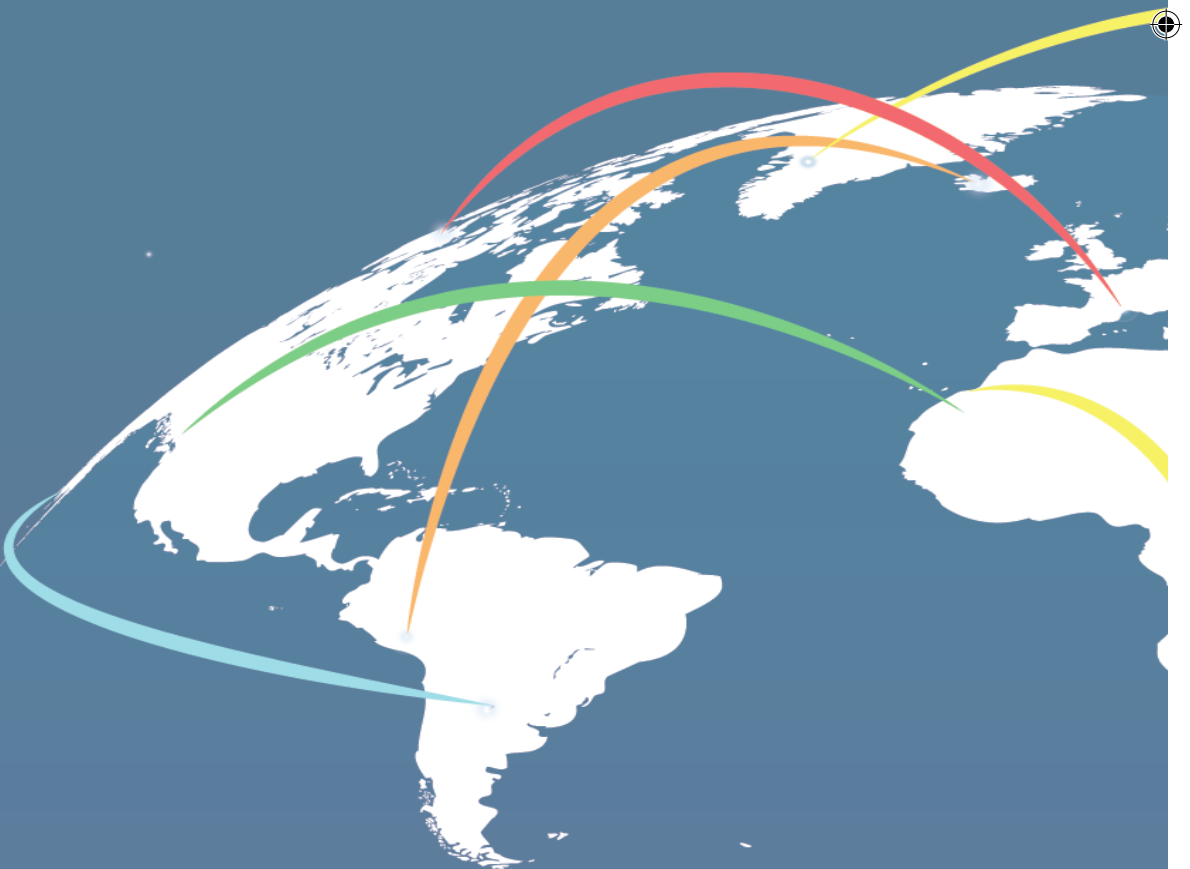
upon arrival in the host country, they need to review forms of dependency in the face of male power, or the nonrecognition of citizenship rights. Many Bolivian women are subjected to jobs that can be considered slaves, but which also refer to relationships of subjugation to male power, or to the power of the master (owner of the land, landowner, father, husband). We see that, unlike this more dependent position, the woman from Venezuela seems to bring sadness to the rupture, but she recognizes herself as a subject of rights.

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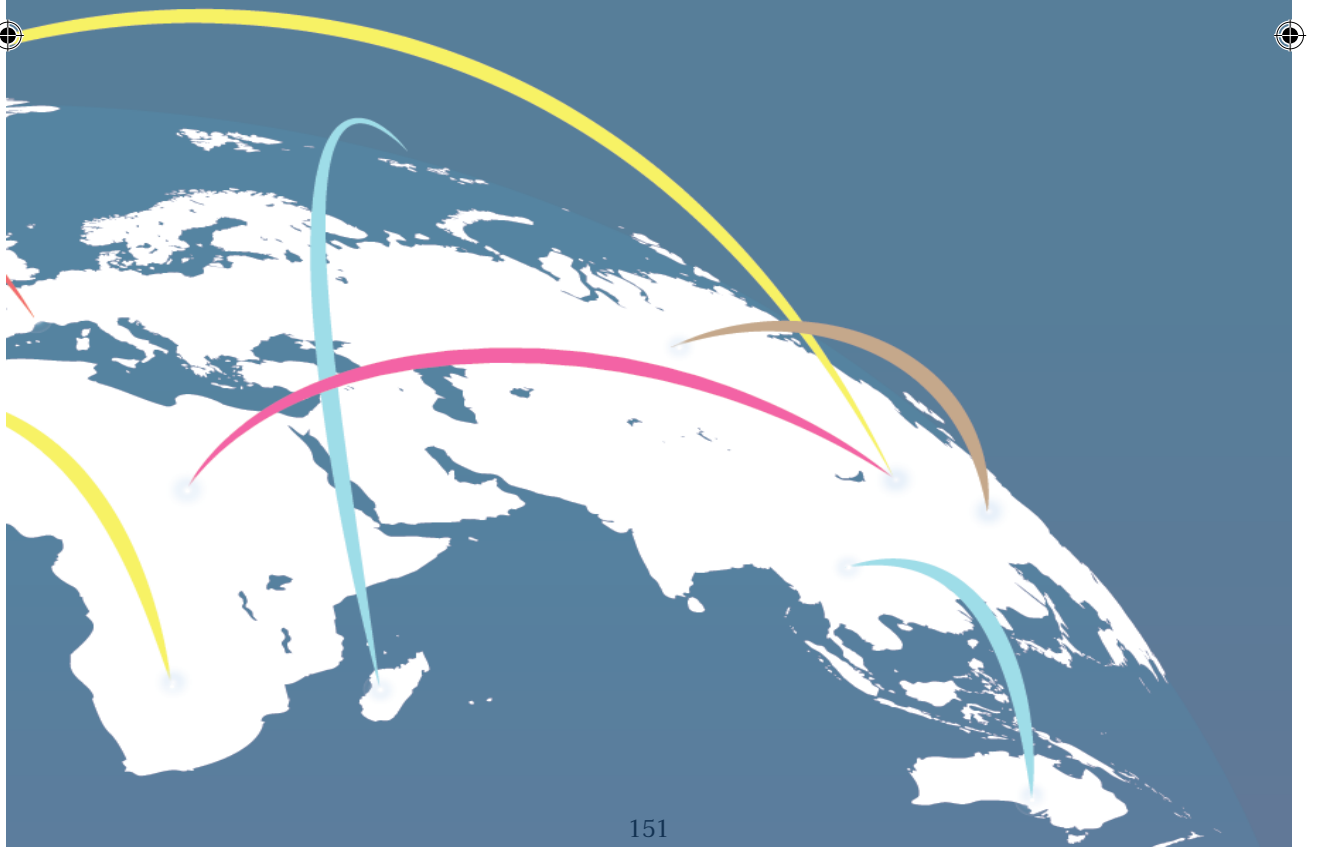


Part 2





Cultural Diversity and the Intergroup Dialogue Within the Therapeutic Group





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CHAPTER 1

Cultural Diversity, Gender Roles and Group Processes: Could you Give me your Favorite Recipe?

Migrations are the origin of cultural diversity. The objective of this chapter is to describe the impact of cultural values on the emotional construction of identity, gender, and relationships with different others using as an example two therapeutic groups with immigrant women of different cultural origins, namely: A group of Africa sub-Saharan women, who come from a collectivist patriarchal culture with a passive and obedient role towards migration. They prefer to keep their delicious recipes for themselves and thus preserve themselves in front of others. They feel insecure with an unstable social Identity. They appear as little legitimized in its cultural group of origin, perceiving themselves as diminished in front of the others and develop a defensive position with their own attributes. The dimension of social comparison and boundary creation is increased within this group. A group of Latin American women who come from a collectivist matriarchal culture, with an active gender role towards migration due to their family's support and encouragement. They feel more confident, more easily able to create collaborative strategies. They redefine positively their attributes and even share their own recipes, to diminish the subjective importance of social comparison, and cultural boundaries. The group, as a safe space, has healing resonances in both groups.





INTRODUCTION

Culture consists of socially acquired patterns of thought, feelings and actions. For that reason, Hofstede (1980, 2005) defines it as a collective mental programming that differentiates members of a group or category of people from others. It involves values, traditions, rituals and emotions that offer people the capacity for expression, reflection and the search for meaning. In that sense, cultural diversity is as necessary for “the human race”, as biological diversity is for organisms. It is a principle that recognizes and legitimizes cultural differences among various human groups as unavoidable

While this is true, migration fosters more cultural coexistence with similarities and differences. It involves contrasting knowledge and different ways of life simultaneously within the same environment. People move in search of refuge, survival and improvement. They are surrounded by unfamiliar norms, values and customs. What they have hitherto seen as the correct way of seeing and acting in the world is at odds with another reality that demands the acquisition of new knowledge, skills and cultural codes (Zlobina et al. 2004).

These are cross-cultural adaptation efforts that involve changes at surface levels of behavior as well as deeper levels, leading to anxiety, uncertainty, and psychological and social stress (Berry, 2006; Berry and Sabatier, 2010). Cultural diversity can be a source of exclusion and stress, or a source of integration and transformation.

Internal processes are transformed due to cultural contact (Berry, 2006). On the one hand, they affectively project the opportunity for growth and idealize the process (Martínez-Taboada et al., 2017), on the other hand cultural stress makes them perceive prejudice, discrimination with great emotional discomfort (Martínez-Taboada et al., 2006).

Changes in psychological and identity values, as well as circular influences, are called acculturation strategies (Berry, 1990). The most adaptive and least stressful are bicultural integration and assimilation, as opposed to segregation and marginalization due to race, gender, sexual orientation, age, physical ability, language, and/or immigration status, which generate greater stress and suffering in groups with few resources.



The intimate relationship of the identity of groups and individuals involves not only personal aspects, traits, or attitudes, but also implies the collective valuation of the group, which forms the social identity and the personal valuation or self-esteem in opposition to other different groups.

It is worth mentioning that the global estimation of the human being is based on the human identity, with universal and transcendent feelings for beings of the same species (Tajfel & Turner, 2004). Fortunately, the human and personal identities are intrinsic to the self and have a transcultural reality that allows for an inclusive type of relationship in cultural diversity. Social prejudices towards the immigrant as someone to be distrusted are minimized if he/she is seen as a human being and as a person. It should be noted that the majority or minority character of a group is always a determinant in the valuation of individuals (Sachdev & Bourhis, 1991).

If the comparison is favorable, social identity will be positive and self-esteem will be high. If, on the contrary, the comparison is unfavorable, social identity will be negative and social self-esteem will be low. It poses a threat to the social self. Shame and low confidence can affect the person's thoughts, emotions, and behavior patterns (Martínez-Taboada et al., 2006).

Cultural diversity, psychosocial stress and grief

Migration generates minority groups by origin, ethnicity, language or religion that differ from the vast majority of the host society. Moving away from one's own culture entails a certain abandonment of traditions, values, rituals, as well as a certain way of seeing the world and behaving in it. These are losses inherent to migration (Achotegui, 2000) which, together with the pain of the absence of loved ones, of the disuse of the mother tongue, represent the environment in which people must develop their intelligence and emotional capacities. The loss of referents, such as the physical land with its colors, fragrances and landscapes; the longing for the food, not to mention its preparation, music or dances, conform the social status and respect they had in their village or social context up to that moment. This distances them from their initial perspectives and places them in a lower status than they ever imagined.

Perhaps the increase in the level of psychological consultations made by immigrants implies the great difficulty of elaboration of these migrator mourning (Achotegui, 2012), which in many cases represent loneliness, depression and insecurity.



Cultural diversity and gender

Until the 20th century, female migrations simply did not exist (Lipszyc, 2004). Only the male was the protagonist of human displacements. Explanations were based on economic motives and labor distribution as the reason for departure. Thus, migrant women were invisible, nonexistent. Their presence was not relevant and had not impact on society.

What to do when one belongs to a socially undervalued minority group? How to resolve a negative social identity in one's own group, and what kind of emotional strategy can repair it? If a possibility of change is perceived, people will seek means of upward social mobility in search of improving their position, as happens in the case of migration with Latin American women.

If there is no possibility of change, and they perceive insurmountable limits due to gender, ethnicity or customs, they will seek to compare themselves with their peers from a downward position that allows them to feel better within the group and defensive in relation to the different group (Taylor & Mohaddam, 1987), as happens in the migration of sub-Saharan women.

The experience of two therapeutic groups with women of different cultural backgrounds

We describe two groups of immigrant women in similar circumstances of age and demand, but with two different cultural worldviews. They are women from sub-Saharan Africa and Latin America in Spain.

The therapeutic groups are carried out within a Red Cross support program for immigrant women. They are safe spaces where they can express themselves without fear, elaborate stress, achievements and grief without feeling disqualified. We see how the cultural background influences the evolution of the therapeutic groups, the interaction, and the processes of elaboration of the self as well as on the acceptance of others and of themselves.

The group of sub-Saharan women has a situation of family dependency in relation to income, education, social status and legal status. They feel a high and impenetrable distance from authority and power. Their attitude is obedient, submissive and passive towards migration. Culturally, they are patriarchal collectivists. Cultural distance from the host society is high, as



well as their internal family status. Social identity is perceived with stress and is associated with a double minority group.

The group of Latin American women have a precarious social situation but are managers of their income and decisions, including migration. Culturally, they are matriarchal collectivists. Their family ties are active in an economy managed by them, despite heavy burdens. They feel a high distance from the instituted power, but perceive themselves as permeable to positive change as a group. They have fewer cultural differences in terms of values and communication which translates into a more favored social identity despite their minority status.

Before starting the groups, an interview was conducted in which their life history was listened to, some homogeneity was assessed and the degree of motivation was evaluated. Cultural values may explain group dynamics, stress as minority groups, gender impact on self-esteem, identity, as well as associated grief and personal loneliness.

Sub-Saharan African women's group

It is composed of women from several countries, mainly Cape Verde, Equatorial Guinea and Mozambique. Countries with unstable and fragile politics. They are cultures of great distance from the factual power, especially in relation to gender. According to Hofstede (1991, 1994, 2005), they compose a hierarchical, collectivist and patriarchal society. Women always have to expect a man to tell them what and how to do things.

Disobedience can unleash the anger of the husband or father to the point of tragedy. Marriages are previously established and oriented to the fulfillment of marital obligations and duties. They show great respect for traditions and relationships within the family. The rhythm of their society is calm and they avoid the unknown. The host culture makes them anxious and they perceive undervaluation (Martínez-Taboada & Arnoso, 2009). Women tend to distance themselves from new ideas and new social practices.

The therapeutic group in social work is always voluntary. Members can share their experiences, address the stress of cultural diversity and reduce feelings of loneliness. The group also fosters social skills and streamlines the use of the language to express oneself.

The group is composed of 12 immigrant women from sub-Saharan Africa, with an average age of 35. They share the stress of being away from



their country. They miss the colorful streets, the traditional rites, as well as the common vision of the world. They feel undervalued by the use of another language. It is a loss of status that makes them react defensively to the language barrier. They confess to feeling some discrimination because they are black and perceive a lack of trust on the part of Spanish society. One woman says:

“I have a neighbor in my doorway... uff.... He met my daughter's friend: he asked ‘Are you going to visit those black women?’ Don't trust them. The friend answered, ‘yes, I trust and I'm going to be black too’” (Sub 4).

The initial phase of group interaction began with some anxiety and bewilderment. Direct communication showed different levels of expressiveness in Spanish, which is the language of the host society and was chosen by them. The therapists specify the norms and boundaries within the group including confidentiality. They also remark the idea that language implies a certain degree of commitment and a relationship with the host community.

It soon became clear that there was a subgroup that spoke better than the others in the group. This subgroup asserts its superiority over the others. The emotional climate is one of conflict and division. The confrontation manifests itself between those who speak better and those who speak worse Spanish. Those who assert their supremacy are clear and forceful. They express their contempt for the inability of others to express themselves. They constantly reinforce their own value by hostilely demeaning their peers. One of the participants even leaves the group with an excuse in this phase of dissatisfaction and antagonism. The initial phase of group interaction began with some anxiety and bewilderment.

It seemed that bringing together those women that shared initially the same circumstance stimulated a social unconscious related to the devalued groups. Therapists then encouraged shifting the conflict and interaction to an alternative dynamic that allows awareness of group process and reinterprets the experience.

To this end, language is explicitly left out. Spoken communication was eliminated in order to work on similarities rather than personal differences.

Different images were created to project their profiles. Icons around migration, their country of origin, its colors, its flowers, gender tasks, family, music, dance, even drawings of threats or domestic violence in their country of origin and in the receiving society. The group opened up to feelings and emotions. Identification





and trust increased within the group, generating a matrix of shared meanings, as well as a certain degree of intimacy (Martínez-Taboada & Otero, 2015).

The group began to collaborate with each other as the storm of conflict decreased. Emotions in the here and now cope with the feelings of a shared negative social identity. Differences and desires for integration with the host culture were expressed. The women were able to talk about the perception of migratory mourning, the loss of the extended family, their feeling of loneliness, and the nostalgia of certain traditions

“I miss a lot all of that, above all what I shared with my people there, yes, a lot...” (Sub 1).

It is clear that immigration has brought about many changes in these women. A phenomenon that began with the decision of their husbands has allowed contact with other cultures. Transformations in values, social practices, access to new public spaces that were not very common in origin lead them to integrate past experiences, present conditions and future expectations. Women redefine their identity as Africans, as immigrants (Castilla-Vázquez., 2017)

There are visible fragments of their cultural identity that give them esteem when it's socially approved:

“I like to wear African clothes, people love it, eh? When we arrive at the market, with the dresses, with the colorful scarves, they stop us, asking: ‘where are you from? We are from Africa. ‘I congratulate you; you look beautiful’ It’s fun and I feel good” (Sub 2).

Another example of their culture is the way they cook food. It is the core and instrument of women in the domestic sphere. They willingly share it as long as they are not strangers. It is a symbol of their role and status in the household. So, they do not like to teach their recipes. When asked what their favorite recipe is or how they cook something, they delay the reply defensively. They leave the answer for a time that will never come:

“Maybe someday I will tell you...”.

Little big things that make the social essence of being a woman in a millenary culture (Fratlicelli, 2008).



The group process continues, the women differentiate the images in which they have felt reflected and display them on different sides of the wall. They mark situations they do recognize. They are asked to put basic emotions on each image: joy, frustration, shame, satisfaction, sadness... The process is done in silence, focusing on themselves. Then, they make categories about what they fear, enjoy, wish to be or not. They begin to express deep within themselves their grief and loneliness. Some shyly express fear of their partners.

In the following sessions, the women communicate through words. They are provided with dictionaries to look up precise phrases. In case they need help, they give it to each other. The idioms are transcribed. They were asked to point out the phrase that best reflected their reality. They placed them on the floor in rows and each participant stood near the one they had chosen. Including some compromising ones, such as: domestic violence is not only a women's issue. The cross referring of answers brought the group together.

The emergence of similar situations and shared emotions allowed for a dialogue that transcended differences into more intimate and trusting communication. As Foulkes (1957) said "first, the group has to become aware of what they do, say and how they behave, then they can ask themselves the whys". They connected as a group by positively redefining themselves as sub-Saharan Africans. They felt recognized in the group and in their figurations as a cultural identity.

The group matrix created the well-being necessary to overcome some of the challenges of the process of living in cultural diversity. We could say that the group transformation did not come from an assimilation to the receiving society, but from a reinterpretation of the cultural values of their society of origin.

Latin American women group

Members are from several countries whose official language is Spanish. They have different psychosocial aspects but also a shared worldview (Pedone, 2003). Obviously, there are contrasts and common peculiarities, such as their unstable politics. All of them have clear hierarchical social structures. They have a high level of collectivism and a matriarchal sense of "belonging". The family takes on a central role and denotes a tendency towards union among its members. Men are often absent, and this means that it is the woman who assumes the roles of protection and family support. The contexts of exclusion, violence and poverty in origin make life difficult and drive them to migrate (Pedone, 2008).





There is a certain tendency to predict and emotionally overvalue future events around migration and the illusions that a better economy awakens in the new context (Castañeda et al., 2013). However, they feel a an alienation from other groups in the host society that they wish to minimize.

The so-called Latin feminism assumes the predominance of women especially in the family, although socially men have a differentiated status. Women may have children from more than one father, who often do not take care of the offspring. They are the active subjects in the decision to emigrate, thanks to the support of other women, mothers, sisters, friends, who allows them to leave their children in their care. It is a crucial decision in search of economic support, work and sustenance that allows them to promote their social and family development, as well as the subsequent reunification of their children. They became a “first link in the family migration chain”.

They come from a precarious socio-economic situation, but have had access to some education and status in their country social environment. Migration opens doors to upward social mobility where a new world of values is developed, especially with respect to gender. In principle, there is not only more equality and less oppression in the new society but also the possibility of developing a more adjusted social identity by perceiving greater cultural, customs proximity (Martínez-Taboada et al., 2006).

The therapeutic group begins by building a safe space. Ten immigrant women from Colombia, Ecuador, Bolivia voluntarily participate in the program. They represent the most frequent Latin American groups in Spain (INE, 2008). They meet once a week after individual interviews. All speak Spanish. Average age 34.5 years. The objective is to facilitate psychosocial support, share difficulties, feelings and face the challenges of acculturation.

The initial phase of the group opens as a space of listening and openness to share feelings in their particular way of meaning the world. They know that the cultural diversity in which they live defines them as a Latino minority group of immigrant women. Dependence on the therapists is present. They begin to share experiences of how they arrived, as executives or fictitious tourists, their passage through second-rate jobs, their current situation, aspirations, and problems as female migrants. The resonances become evident and the emotional climate of inclusion and support emerges spontaneously. A phase of trust develops and stabilizes the group matrix:





When I entered the group, I only looked at the coordinator, now it is the group that offers me the glances and approvals I need (L1).

Women join forces, share sorrows and emotions. One woman told to the group:

I know you understand my suffering and my joys. The therapist understands things from up here, the head, the group does it from their heart (L2).

The group goes further and talks about their longing for the land, for their family, for their children, for their own loneliness. A shy smile fills the eyes of the group when one of the women recounts in first person the ravages of a life tired from work, from the distance from her children, from homesickness, ending with:

We cry for loneliness... then we adapt... (L1).

Each member discovers gaps and supports in her own discourse and in that of the others. They are shared meanings in a group matrix that allows them to express feelings with which they identify.

For me it is important that each one tells her suffering and comforts herself, it is as if she were a part of myself (L3).

The therapeutic group, as a dynamic structure, changes as women participate and create the possibility of sharing their life experience. It becomes a place of redefinition of themselves through a bond to which they feel proud to belong. A ray of shared hope appears.

In general, they want to be valued at work;

It is more important to be well off than to earn more money and have a bad time.

They complain of a certain degree of discrimination,

The issue is... that because we are foreigners, they don't offer us good jobs, only domestic service... (a systems analyst).

They also highlight prejudices:



Sometimes, when the owner of the apartment senses that it is an immigrant person, they say that it has already been rented.

They emphasize the relevance of family support in their country of origin to develop an active role in migration:

Yes.... My family was very supportive. They mortgaged their house so that I could come (L4).

Body language accompanies the group sessions. Gestures, voice tones, movements are part of the repertoire of emotional expression in the face of cultural differences:

I remember the first time the girls went dancing and they asked me 'Aren't you coming?' and I said 'You haven't invited me', 'You don't need an invitation, you can come if you want' (L3).

They emphasize the importance of making an effort to get closer to the local population:

We are the ones who came here... (L5).

Some bring nostalgia for their country of origin. Longing for the flavors and aromas of the food remains radically important as the core of the woman in the domestic sphere. It is also a symbol of status and celebration. The recipes they make on weekends are the original ones and they respect all their ingredients. However, they do not mind sharing and exchanging the tastiest formulas or tricks to make them more delicious.

A social unconscious is becoming conscious, they appreciate female bonds, their complicities, loyalties, and taboos (Elgorriaga et al., 2012). Their search for economic resources for family subsistence and improved quality of life reinforce their personal and social identity.

The cohesion in the group emerges.

They share the idealization of the migratory project as a result of symbolic, subjective and cultural elements. The group resonance establishes communication



and a series of unconscious relationships between people, which are spontaneous and continuous. The group finally defines an emotional climate that allows an authentic experiential space in which to understand what is happening to them.

SUMMARY AND CONCLUSION

Culture is, above all, the prism through which a person reads the world, gives a meaning to life, an orientation of oneself in one's relations with others. Being an immigrant and a woman means being part of a minority group with a gender defined by one's own culture, which affirms or discriminates against the position of women, the social representation of oneself as well as one's position in a different cultural environment.

It is important to keep this in mind as group therapists in a multicultural group dynamic. A new matrix of interaction emerges as a process in formation to reflect the emotions, attitudes and identity defense derived from this relationship with cultural diversity that is expressed through communication. Cultural values and attitudes involve the contrast of perceptions, authority representations, the management of emotional differences, as well as the sociocultural aspects of the unconscious.

My experience as a social psychologist and therapist has focused on the difficulties and constant effort involved in personal and social psychological adjustment in groups facing migration, as well as the impact of specific cultural values in various situations.

The two groups of women presented are minorities in the host society. Their gender role has been defined from collectivist cultures with very different nuances. Obedience or proactivity arise from collectivist patriarchal or matriarchal cultures. In addition, ethnic and linguistic distance generated a high cultural stressor that required special attention.

The therapeutic group space for immigrant women is a microclimate of feelings and reflections that protects them from the dizzying daily events. They play with the gaze of the other in cultural diversity as well as with the elaboration of their own being. They maintain a balance between adaptation to suffering and the intrinsic capacity to develop as a healthy group (Pines, 1983) in a situation of uncertainty. However, group resonances help to heal common discomfort. They are a mirror of their reality that explores motives and desires



in a space of group containment and protection.

Symbolically, sub-Saharan women try to reinforce their self-esteem and identity by differentiating themselves. They proudly maintain their recipes for themselves in parallel competition with their group mates. They are not interested in confronting or sharing their own with other women from a different culture. They fear undervaluation as well as their own lack of resources.

However, Latin American women seek alliances with other women to enter into a collaborative process that strengthens them as women and as a cultural group in the host society.

It is worth noting that the balance on the process of coping with cultural diversity and life satisfaction of immigrant women is usually positive and hopeful (Martínez-Taboada et al., 2017). Highlighting how small cultural manifestations, such as sharing food recipes, can facilitate phenomenological understanding of cultural diversity. Knowing beforehand the socio-cultural axes can help a better understanding of behaviors, of people's need and how to generate healing group therapeutic processes to improve the quality of life in cross-cultural situations.

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CHAPTER 2

Adjusting Group Therapy to Asian Cultures

While developing a group psychotherapy program for Asian countries (Japan, China, Singapore and Indonesia), I became aware of individualistic Western tacit assumptions in group therapy modalities that might not suit some collectivist cultures that are typical of the East. One example is the way that those cultures relate to conflict. Another clear difference is the relation with authority. Some of these differences stem from the social unconscious of people in the far East. This chapter will bring case studies from training groups I led in those countries and describe how I adjusted the theories and my leading style to the social unconscious of my group participants.





INTRODUCTION

In 2008, I was invited to lead a workshop in a group therapy conference in Japan. It was the IAGP (International Association of Group Psychotherapy) pacific rim conference and the topic of my workshop was “what can we learn from dealing with conflicts in our therapy groups about social conflicts”. At the beginning of the workshop, I asked the participants: “what is your association with the word ‘conflict’?”. The answer was: “it doesn’t exist”.

This was one of my first encounters with the difference between some Eastern cultures and Western ones. Not that I did not know in theory that these are different cultures with different customs and different traditions, but the personal encounter and the experience that there might be deep differences in the ways of thought were almost shocking. Later, in 2009, I developed and directed a doctorate program focused on group therapy, under the auspice of the Professional School of Psychology in Sacramento and opened a branch in Singapore in 2012. Singapore is composed of 75% ethnic Chinese, 15% Malaysians, and 7% ethnic Indians. Quite a multicultural society. It gave me the opportunity to experience again some clear differences between the ways I think, as a Western male (living most of my life in Israel and moving to the USA 15 years ago), and the ways people from collectivist cultures think and behave. The students were much more compliant than the students I have met in the USA, let alone in Israel. They did not ask many questions and almost never criticized my ideas. Later, I started leading process groups among those students which allowed me to understand them deeper. The processes in those groups were different from the processes to which I am used to in my regular Western groups: slower and full of silences. It was clear to me that I needed to rethink what was going on in those groups. Much later, in 2017, I started a group training program in China that was composed of theory, experiential groups, and supervision. This program, and especially the process groups that continued for a whole year, helped me experience another Eastern culture. Silence, for example, was not as prominent as in the Singaporean groups. In addition, I opened group therapy training programs in Japan (2019) and Indonesia (2020), thus learning more and more about Eastern cultures, their differences from Western one, but also how different they are from one





another. I became fascinated by those cultures and the people who participated in my groups. I learned a lot from all my students, participants in groups and colleagues in the East, and I want to dedicate this chapter to all of them.

A word of caution

When talking about different cultures, it is easy to stereotype and overgeneralize from a phenomenon observed in one group to the entire society. We are also prone to project our own prejudices and misunderstandings based on our cultural background. Edward Said (1978), in his important *Orientalism* book, warns us against the imitation or depiction of aspects in the Eastern world. We can easily fall into the trap of representing Asia in a stereotyped way that is regarded as embodying a colonialist attitude. This colonialist attitude can be unconscious but is deeply embedded in the Western culture. As a result, we might somehow believe that Western societies are “better” or “more developed” than Eastern ones. If we are unaware of this colonialist paternalizing attitude toward the “natives”, we might teach and lead groups in the East with the notion that we “bring them the light”: we assume that we teach theories and scientific knowledge that are the truth, and that perhaps the participants should be grateful for our generosity. This attitude becomes complicated because sometimes it is met by a complementary attitude of the students and group participants from the East, who admire Western cultures (especially the USA, before Trump’s regime) and are ready to absorb any Western knowledge without constructive criticism.

When I teach group psychotherapy in Asia, I adopt a humble approach and I come with curiosity. I tell my students that we will learn from one another and that I want to learn from them no less than they might learn from me. I do my best to stay curious and nonjudgmental about their customs and tradition and point out differences from my cultural norms in a neutral way. I apologize in advance for possible mistakes in pronouncing their names or in saying something without being aware that it might offend any of them on the background of different cultural norms and I ask them to let me know if this happens. I encourage them to tell me when what I teach them is different from what they were taught by local trainers and I welcome a discussion of these differences. Above all, I want them to become independent as soon as possible, start their groups, teach and supervise



group therapy in their countries, and establish a group therapy association (if they don't have one).

Since I have written about social unconscious issues (Weinberg, 2007) and coedited a series of books on this issue with Earl Hopper (Hopper and Weinberg, 2011; Hopper and Weinberg, 2015; Hopper and Weinberg, 2017), I am also aware of the difference between norms and unconscious social issues. We can become aware of the norms that govern our behavior in our society (for example, respecting the elderly), and sometimes we can even decide not to behave according to those norms and to tolerate some social sanctions following this deviancy, but we are unaware of the deep impact of those norms on our personality, ways of thought and some automatic patterns in our relationship (for example, feeling guilty after showing some minor disagreement with authority). The way people think about achievements, materialistic gains, relationship to authority, stems from deep unconscious issues that are beyond the family of origin or personal history. When talking about social unconscious issues, we are looking for the deep meaning of behaviors and communicational patterns, and not the surface and obvious one. Since many social unconscious aspects are the result of social traumas, we look for traumatic events in the history of that society that might still be engraved in the brain of the population and that are inhabited in their collective memory.

Differences and similarities

At first glance, the main difference between East and West originates from the deep differences between collectivist versus individualistic society. While in the West the focus is on the individual, his/her achievements and welfare, in the East, the group (family, community, society) is in the center, and the welfare of the family might be more important than the welfare of the individual. The individualistic approach affects many areas of our lives in Western countries, for example the notion that I am responsible only for myself and my own behavior, while in collectivist cultures my behavior accounts for all my family or my collective. The belonging to the group is prioritized over the individual gains and own achievements. In these cultures, people are responsible for each other. These differences are embedded in the foundation matrix of those cultures (Hopper and Weinberg, 2017, 2015) and people might





not be aware how deeply their communication and relationship patterns are affected by them.

Hofstede (2001), a Dutch organizational psychologist, gathered information from organizations around the world and concluded that the values that distinguish countries from each other and that influence human behavior could be grouped statistically into four clusters. These four groups became the Hofstede dimensions of national culture. These dimensions were individualism–collectivism, uncertainty avoidance, power distance, and masculinity–femininity. A fifth dimension was added in 1991 based on research by Michael Bond (Franke et al., 1991) who conducted an additional international study among students with a survey instrument that was developed together with Chinese employees and managers. Michael Minkov's world values survey data analysis (Minkov & Hofstede, 2012) led Geert Hofstede to identify a sixth last dimension: indulgence versus restraint. Here are the six dimensions:

- Power distance index (high versus low).
- Individualism versus collectivism.
- Masculinity versus femininity.
- Uncertainty avoidance index (high versus low).
- Long- versus short-term orientation.
- Indulgence versus restraint.

These studies show that there are several dimensions that we should consider when we want to apply Western theories and practices of group psychotherapy in the East.

However, we should also remember that “people are people” and that whatever their personal and cultural differences might be, there are always more features and human needs that connect them than those who separate them. The poet Munia Khan has written: “Ocean separates lands, not souls”. The needs to connect, to be supported by people who care for you, to find meaning in life, are common among most people, no matter where they were born or where they are coming from. When we adjust our theories to cultures that are different than ours, we should also consider these similarities and not throw the baby out with the bathwater.



The relevance for group therapy

Being born and educated in a Western culture, and later becoming a psychologist and group psychotherapist, I was actually indoctrinated (I know that this is a loaded term) to believe that the theories I am taught about psychotherapy and group therapy are universal. I am sure that I am not the only one who was ignorant about the fact that theories are heavily embedded in the culture from which they stem (and some of my colleagues are still unaware of this fact). After all, you create a theory from the phenomena you observe around you, from the behavior of people that belong to your culture, so of course the way you conceptualized the facts is influenced by your culture. Since most therapists who are educated in the West do not have a close connection with colleagues from the East—they might stay in their belief about the universality of their theories.

Things changed in the latest decades for two reasons:

- The world becoming a “global village”.
- The effect of the internet.

As for becoming a global village, multicultural societies are ubiquitous nowadays in the West. The waves of migration the swept the world towards the end of the 20th century and the beginning of the 21st one changed western countries completely. In the USA, migration from Asia rose dramatically with passage of the 1965 Immigration and Nationality Act. The number of Asian immigrants grew from 491,000 in 1960 to about 12.8 million in 2014, representing a 2,597% increase (Zong & Batalova, 2016). Most of them came to study or work. Europe encountered a different wave of immigrants, mostly of refugees from war zones. From January 2015 to March 2016, over one million refugees arrived Europe from the Mediterranean Sea (Wikipedia, 2021). At any rate, therapists from the west had to deal with clients that came from other societies, including Asia.

The second important factor that created immense opportunities for interaction between people from different cultures was the entrance of the Internet into our lives since the end of the 20th century. Most of western people are connected to cyberspace nowadays. Belonging to international forums, whether it is through Google groups, listservs, Facebook or WhatsApp (WeChat in China) expanded the horizons of many people. In the academic and professional mental health field,



it created a lot of opportunities to collaborate and interact with colleagues from cultures with which we have never had a chance to be in touch before.

Around the end of the 20th century, I have read a book that shook my beliefs in the objectivity of group therapy modalities and theories. This book, *Women and Group Psychotherapy*, published in 1996 and edited by Betsy DeChant, dissected group therapy schools of thought one by one, showing how biased they are about gender. Since the feminist approach sees the source of personal problems as residing outside the individual, in society, they criticized most of the group therapy approaches I had known for not giving enough attention to these factors, including Yalom (1995), who puts the emphasize mainly on the here and now.

In addition, my PhD dissertation (written between 2000–2006) focused on group analysis and the internet unconscious. This led me to explore and study the culture of group analysis, the social unconscious and forum dynamics (Weinberg, 2014a). The seeds for my exploration how group analysis and group psychotherapy are suitable for Eastern cultures were sown. When I started the first cohort of Singaporean students of the doctorate program I have mentioned above (2012), I was curious enough to learn from this experience.

Literature review

There are several articles that explore the differences between group therapy East and West. Let me review them hereby: Sathya Devan (2001) discusses the culture and practice of group psychotherapy in Singapore. He was trained as a group analyst in England and conducted an eight year slow open group in Singapore. He identified several issues that were typical in his group:

- Relationship with authority—mainly idealization, the group maintained hierarchal relationship with the leader and could not express disagreement with him, let alone any aggression.
- Individuation—the group expressed strong dependency on the leader and the hostility was projected outside the group.
- Intimacy—failure to self-disclose, group silence, prolonged silence from individuals, somatization, gender bound groupism, and avoidance of sexual topics were typical in the group processes and signified difficulties in becoming more intimate.



Takashi Yamaguchi (1986) writes about group psychotherapy in Japan. He points out how the group leader seems to be more important in influencing the group members' expectations and contributions than in Western countries. He mentions that group members in Japan are more prone to self-disclose in groups compared to individual therapy, a phenomenon that always puzzled me. On the other hand, he relates to silence in the group not as a way to convey consent but as a polite way to convey refusal or disagreement. Yamaguchi describes the issue of confidentiality in Japanese groups since the members tend to split people into two classes:

- Intimate relatives and friends (*miuchi*, families).
- Other people (*tan in*, strangers). Only in the presence of *miuchi* Japanese people are ready to open up.

Two other important issues that he describes are the concept of *amae* (dependence, presumption of others' benevolence) (Doi, 1973), and the very clear gender hierarchy where males are dominant and women are compliant and even inferior, an unspoken issue in the Japanese culture. All these issues are part of the social unconscious of Japanese people and manifest themselves in the group. Although his article was published in 1986, from my experience with Japanese groups, it is still relevant nowadays.

Another relevant resource is a study by Lee (2014) examining the difficulties that Asian international students in the US have in joining a therapy group. He discovered that the more acculturated to Western culture Asian students are, the less they perceive stigma toward help-seeking and the more positive the results of group therapy are. One barrier for joining such a group is the issue of stigmatization and the difficulty of self-disclosing, especially in front of members of the same culture. This is interesting since usually belonging to the same cultural subgroup empowers group members. In Lee's study, the more students were connected to their homeland, the more they were worried about confidentiality and that their self-disclosure would be reported back home. Relying on the home country for meeting needs made it harder to take the risk of losing their face in the presence of those from the same country of origin.



Adjusting group therapy to Asian cultures

Self-disclosure

From the data presented above, including my own experience, it becomes clear that western-style group therapy must be applied cautiously when it is used with group members from Asian cultures. On the one hand, coming from collectivist cultures, “groupism” is deeply embedded in the social unconscious of the participants. However, the openness and expression of emotion, so common in western cultures, and the assumption that frank discussion will be helpful, are not guaranteed. In most Asian cultures “saving face” is a big issue, as these cultures are characterized by emphasizing shame compared to the emphasis on guilt that is common in the Judo-Christian western cultures. Guilt cultures emphasize punishment and forgiveness as ways of restoring the moral order; shame cultures stress self-denial and humility as ways of restoring the social order (Hiebert, 1985).

In one of my groups for therapists in some Asian country, it took two and a half years for a member to let the group know that her 25-year-old daughter, who lives in a western country, is transgender and that this daughter decided to have a surgery to change her gender. This group member was sure it means that she has been a bad mother and she was full of shame bringing it to the group. All group members praised her for her courage, sympathizing with her distress. The group leader, who is Western (myself), said that there is probably a huge difference between the way that transgender is accepted in the USA and in Asia, as it is not condemned or perceived pathological in the US, and that no research shows that this has to do with nurturing practices. The woman was very relieved by the leader’s intervention.

Asian group members are often reluctant to discuss physical illness and their reactions to it, sometimes even with family members. In one of my Asian groups, I knew that a woman suffered from some genetic illness, since she had told me about it in her initial interview before the beginning of the group. She refused to tell me more since it felt so shaming. She never mentioned it in the group, even after three years, since she was sure that she would be totally rejected if group members knew about it. She was also afraid that it would be known in her town, which meant social rejection and condemnation, not only for her, but for her entire family.





Group participants in Asian cultures are even more reluctant to discuss emotional issues. They may react to attempts initiated by the group leader to discuss personal difficulties, with a bland smile or denial of emotional distress. On the other hand, an interesting surprising finding in Fukui et al. (2000) research emerged from their pilot work. When the group participants were asked to report their reactions to the group that was mostly psychoeducational and advice giving, many of them expressed a wish for greater openness and discussion within the group, and they objected to the use of the format in which they were offered advice. This finding means that, like any human being, there is a deep need for distressed people of any culture to discuss their stress and emotional difficulties, and the only question is whether we can create the safe enough environment for them. Perhaps the first factor needed to be considered in adjusting group therapy to Asia is how to encourage group members to self-disclose without shaming them.

Authority

A second factor in adjusting our theories and practice is relationship with authority. Being a group analyst and remembering Foulkes (1964) defining group analysis as the analysis of the group by the group, including the conductor, I tried at first to apply this idea in Eastern groups. Adding the relational approaches to group therapy (Weinberg, 2014b) led me to believe even more in the egalitarian position of the group therapist. Indeed, the group leader set up the basic rules, but apart from that she/he is not there to decide what is right or what is wrong or to become the rigid authority whose position is above group members. However, in societies ruled by emperors for centuries (e.g., China and Japan) and in which people were brought up on Confucian rules (clear hierarchy between ruler and subject, father and son, man and wife and older and younger brother), group members are ambivalent about the leader's transparency or his/her admitting mistakes. When I tried to be more egalitarian and use the relational approach by becoming more transparent, or take responsibility for my human mistakes, sometimes it was met with an embarrassing silence.

There are many subtle signs for this rigid attitude towards authority. In my Chinese group, in which I use a translator, the group continuously calls me "teacher". I tried numerous times to explain that I am not "teaching"





and I consider myself the group “facilitator”, but it did not help. In addition, whenever someone misses a session, they “ask for leave”. They do not inform me that they cannot participate, but ask for a permission as if I am supposed to allow it or not. It is very different from all my western groups where people feel free to take time away from the group and just let me and the group know about it.

The practical question is how to take this aspect into consideration while still not succumbing to the deep need of the group to project the rigid hierarchy on the group leader. Groups are actually based on democratic values (Cohen et al., 2002) in which each voice has an equal importance and the democratic leader consults with the group whenever there is a decision to be made. In the transference–countertransference matrix, the group therapist might easily be tempted to act according to the group’s expectations and become the omnipotent leader. The therapist should be aware of the strong existence of Bion’s dependency basic assumption and interpret this need for a strong and omnipresent and omnipotent leader again and again. In a way, it is a long “educating” process about more democratic values.

Conflict

As mentioned at the beginning of this chapter, conflict is avoided in most Asian cultures. Harmony is what these cultures strive to achieve. “All things under the sun will flourish when harmony prevails” said Xun Zi, a famous Chinese philosopher. This means that conflict is not encouraged and that it should be avoided. One of the participants in my Asian groups told me that when she has a conflict with her sister, she goes to her older sister and tells her about the disagreement, assuming that the older sister will discuss it with her other sibling to resolve the conflict.

In western group therapy developmental theories, conflict is anticipated as a crucial phenomenon in the second stage of the group. In Tuckman’s model this stage is called storming (Tuckman, 1965). When I teach group therapy, I usually tell my students that if their group does not encounter any conflict in this stage, they should check their countertransference. More than that: according to the developmental theories, if the group cannot accomplish the goals of a certain stage, which in the second stage is developing conflict resolution skills, it might be stuck in that stage. How does this model apply



to Asian groups? I learned that in some of those groups (Japanese and Singaporean) I cannot expect the kind of hot conflicts to which I am used to in Israel, and that the signs of disagreement will be minor. I learned how to identify these minor disagreements and encourage them. Surprisingly enough, in my Chinese groups, once the safe environment is established, there is no problem for group members to enter heightened conflicts, however, the participants seem not to be able to reach conflict resolution and later feel guilty and ashamed for disturbing the harmony.

Anger

Following what I wrote above about conflict, expressions of strong emotions, including anger, are not popular in groups in Asia. Especially in Japan, display of emotions is frowned upon in public. When Japanese go through stressful and traumatic events (e.g., the *Fukushima nuclear disaster* of 2011) they develop an attitude of *Gaman*, which means “enduring the seemingly unbearable with patience and dignity”. They do not express anger (especially toward authority) even when there is a good justification to do so. What the group leader should learn is to read the tone of voice and not the verbal or facial expressions.

From a Western point of view some Eastern group members engage in passive aggressive behavior when they are angry, such as coming late or avoiding a group session. This should never be interpreted as passive-aggressive but as a cultural way to show irritation. As said, Chinese culture is different and in Chinese groups I have met expressions of anger both among group members and towards me as the group leader. When a Chinese group member expresses irritation or anger with me, my main concern is to prevent the fear that I will retaliate somehow.

Silence

Silence in Asian groups does not necessarily have the same meaning as we usually interpret it in western groups. In individual therapy, it is usually interpreted as a resistance, but in groups it acquires more meanings. Yalom and Leszcz (2020) noted many reasons for an individual member's silence: conflicts around the aggression involved in self-assertion, the dread



of self-disclosure, perfectionism, being overwhelmed and needing distance regulation, and fear of another member. Gans and Counselman (2000) saw silence in groups as powerful communication, with a meaning as diverse as a demand for performance, submission, or admiration to an opportunity for comfort, reflection, or respite. However, in Asian group silence is beyond individual reasons. Although there are many kinds of silences, in Asian cultures it usually conveys the meaning of embarrassment or disagreement that cannot be expressed in words. Since many of these societies suffered from a massive cultural trauma in their history, silence can also convey the pain of the unspeakable when the group deepens its work. In one of my Chinese groups, a member described how, in the great famine period (1959–1960), when he was four years old and starving, his family was begging for a bowl of rice so that he would not die. The group was totally silent and only the sobbing of participants was heard in the room.

Intimacy

Hollywood movies praise intimacy as THE highest developmental achievement in close relationship. The popular meaning of intimacy can be understood through playing with the word, transforming and breaking it into “into-me-you-see”. This kind of intimacy can express the deep feeling of close encounters evoked by Buberian I-Thou relationship. In Asian cultures it is not the intimacy of “let’s talk about it” praised by Western culture norms and Hollywood movies. It is more the feeling of togetherness, being a part of a community. Thus, most of the time, in married couples living in Asia, we cannot expect the kind of open emotional discussions that we might find among couples in the west. This does not mean that their relationship is worse or better, just different.

However, in most of my groups in Asia I found that there is a deep longing for intimacy and real closeness. The need for closeness is more ambivalent with parental figures, but it is there unspoken. In one of my groups, I sensed the existence of that deep need and I said that it feels as if group members want “to sit in my lap” (Stewart Aledort is using this interpretation usually in his groups). The group was shocked. Many sessions to follow they processed this “outrageous” interpretation. Some of them were disgusted, and later it became clear that they perceived it as a sexual





invitation, but for most of them it opened the door to a deep yearning that was untouched before: the need for close relationship with a father. The more they were able to talk about it the more I heard stories of distant cold fathers who never hugged them, never said a word of love and with whom some of them never had any physical touch.

Gender

In traditional societies, gender roles are very clearly defined. Traditionally, men and women had completely opposite roles: men were perceived as the provider for the family and women were perceived as the caretakers of both the home and the family. These roles changed dramatically in modern society; however, its impact is still embedded in Asian cultures and the unconscious social attitudes. Asian women are more likely to hold part-time jobs and to be unemployed or underemployed. Halpern and Cheung (2008) found that women leaders in Asia still considered children and/or family their priority. Although there is greater women's involvement in politics in Asia than in the past, it is far from creating equality, and male's privileges are shown in many overt and subtle ways. There is still stigmatization of unmarried women, and many Chinese families still prefer the newborn to be a boy and not a girl. Discrimination against women, in particular in childhood, is the result of their less valued status. Gendered inequality results from long-standing patriarchal societies where women have more expectations placed on them and fewer freedoms than their male counterparts do.

Feminism, the way it is manifested in the west, has never reached Asian countries, and the "me too" movement, protesting against women's exploitation by men (especially by sexual harassment) did not cross the Pacific Ocean. The normalization of assaultive behavior and victimization of women leads to a society where these issues are not discussed. Domestic violence and abuse are not widely talked about either. Most of Japanese women who experience sexual violence are silent due to societal pressures and potential punishment via victim blaming.

All these deeply rooted attitudes can be observed in the groups I am leading in Asia; however, they cannot be fully discussed. The fear of being scapegoated and blamed is very real for women. In one of my groups in Japan,





I wondered why they have separate floors in my hotel and separate cars in the trains for women. An embarrassing silence followed (see the discussion of silence, above). Later, when the group was finished and we were on our way to a restaurant to celebrate the end of the group together, one of the women approached me and, with a muffled voice, told me that this gender issue is never spoken in public in Japan.

Self-care

What is considered self-care in the US (taking time for yourself, setting boundaries to family members who intrude upon your time, bringing a comfortable chair to the group because you have back pains) is considered either self-indulgent or even selfish in Eastern cultures. It is quite common in Asian groups to hear people (especially women) saying that they feel uncomfortable about being the center of attention and consuming the group time. Since in those cultures the focus is on the community and the public welfare, focusing on individual needs is not appreciated, and they can be sacrificed for the benefit of all. In American groups it is common to draw the attention of someone who uses the word “we” instead of “I” when expressing his/her opinion and feelings. This common practice is not very suitable to Asian groups. Usually when there is a conflict between the needs of the individual and the needs of the other, considering the other’s needs win. This means that the usual focus in western groups on individual needs and achievements is not suitable for eastern groups.

In one of my Indonesian groups, a woman described a problematic marriage to a man who is not able to attend to her needs for closeness and communication, and is very immersed in his work, being detached from his wife and his kids. In fact, from her description, this man seemed quite narcissistic. Usually, in my groups in the US, group members would become angry with this man and some might even advise her to leave him. None of these happened in that group. The members were very supportive but tried to help her either to find more ways to understand her husband and try harder to communicate with him or advised her to find other sources of comfort, such as her religious beliefs. I had to bite my tongue not to intervene or focus on her frustrated needs since it was clear that, in that culture, women’s individuation is quite different than what I am familiar in American norms.



SUMMARY AND CONCLUSION

In this article I summarized my experience of leading groups in Asian cultures, adding some research and data from other articles. When leading groups in Asia, we cannot automatically apply our western practice. We should come with a humble approach and learn from Eastern practices as well. Walsh (1989) points out that Asian psychologies focus primarily on existential and transpersonal levels and little on the pathological. They use practices such as meditation and yoga. Perhaps some of these classic Asian disciplines can be applied to our group practice?

In this chapter I described nine categories in our therapy group theory and practice that should be adjusted to Asian cultures:

- The amount of self-disclosure: since shame and saving face are the main mechanisms affecting public behavior, openness and self-disclosure is more limited and needs more time and safety.
- Relationship with authority: the group therapist should expect more idealization than the usual without necessarily interpreting it as a distortion. At any rate, even when criticized, the higher hierarchy of the therapist's position is always there.
- Conflict manifestations are lower in most Asian societies (except for China) and the group therapist should look for minor signs of disagreement.
- Anger is suppressed in Japan, Singapore, and Indonesia (but not in China) since harmony is highly appreciated. The group leader should not expect the same expressions of anger occurring in western cultures.
- Silence can linger longer than the group therapist is used to and might convey disagreement or embarrassment. It should not be interpreted as a passive-aggressive behavior.
- Intimacy is not manifested in the I-Thou deep closeness desired in the west, but more as a deep yearning for belonging. The group therapist should avoid being judgmental or considering western norms of intimacy as better.
- Gender inequality and male supremacy and dominance is more on the surface in traditional societies, such as Indonesia, but is deeply



rooted in the social unconscious of people from more modernized Asian societies. A feminist approach to Asian group will probably fail. Helping women to become less dependent should come with caution.

- Taking care of one's needs is not encouraged in the east, since the needs of the family, community and society is prioritized over the needs of the individuals.

I hope that this chapter will help my fellow group therapists who work in Asian countries to adjust their practice to the cultures in which they are working.

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Therapeutic Spiral Model Psychodrama Around the World: Cultural Connections

The therapeutic spiral model (TSM) is an innovative trauma-informed model which changes the experience of people affected by trauma by using experiential methods that are “user-friendly” and reach across time and space as all psychodrama does. We begin with the psychodrama concept of the autonomous healing center, which we believe is the key to TSM psychodrama success in over 50 countries in the past 35 years. The authors describe the trauma survivor’s internal role atom (TSIRA) as a three-stage model to guide all action methods when working across cultures that include: prescriptive (RX) roles, the TSM trauma triangle, and roles of transformation and post-traumatic growth (PTG). While TSM can be applied to other forms of prevention, education, trauma informed care, this article demonstrates how the TSIRA can be used in group therapy settings around the world and across technology. We demonstrate the TSM six safety structures, and 3 types of TSM dramas: strengths, wounded-child, and transformation. Composite and real-life examples are presented through both author’s personal experience in enlivening trauma work using local customs, values, and connections in workshops, on-going groups, and, most recently, online.



INTRODUCTION

“Psychodrama is applicable to other cultures because suffering wears the same face everywhere. It is the way we create it, deal with it, and learn to come to terms with it that is culturally determined”.

Zerka Moreno (2012, p. 437)

The therapeutic spiral model (TSM) was developed by a group of American psychotherapists and certified psychodramatists from 1992–1995, seeking to make psychodrama safe for the most vulnerable populations (Hudgins, 2002, 2007, 2015, 2017a; Hudgins & Durost, in press, Hudgins & Toscani, 2013). Today, TSM has reached thousands of trainers, practitioners, clients and community workers around the world, with many of our trainers and TSM teams presenting at IAGP and other international venues. In addition, TSM has been using the internet to train people all over the world since 2008 (Hudgins, 2017b). Most recently though, TSM psychodrama has embraced and expanded our online presence and worldwide reach in the face of the pandemic of COVID-19, 2020. Here we stretch beyond physical boundaries in yet another new form of experiential group psychotherapy—TSM online. Another concept, new to TSM, that this article introduces is the connection between TSM, its clinical map referred to as the trauma survivor’s internal role atom (TSIRA), and that of the concept of the autonomous healing center (AHC).

Autonomous healing center

J. L. Moreno, the originator of classical psychodrama “...attributed healing to what is going on silently, mostly invisibly, in the body and deep inside the self, not touched by words but through action, often continuing well after treatment. He termed it...the ‘autonomous healing center.’” (Moreno, Z. T. 2012, p. 264). The AHC is “the power to heal oneself” (Moreno, Z. T. 2012, p. 438) and this self-healing happens when certain conditions are met. Moreno’s work in developing psychodrama was to help uncover a method that allowed for change to happen naturally. “The psychodramatic method helps the protagonist to access and stabilize an ‘autonomous healing center’ as an



act of creativity” (Schreiber, 2009, pp. 2953–2954). It is, in fact, the AHC that Zerka’s quote about culture speaks to, “we all suffer the same and we all heal the same” (Moreno, Z. T., 2012, p. 437). What the TSM does is provide a step-by-step guide to this often-mysterious process.

Advances in the field of neuroscience have allowed us to see internally the phenomenon that Moreno observed externally. For example, we have long known that the amygdala is the body’s alarm system. However, when you receive a belonging cue, the amygdala switches roles and starts to use its immense unconscious neural horsepower to build and sustain your social bonds... On brain scans, this moment is vivid and unmistakable, as the amygdala lights up in an entirely different way.” (Coyle, 2018, p. 25)

It is possible that the new firing of the amygdala when receiving belonging cues is the biological component of the phenomenon Moreno called the AHC.

Therapeutic spiral model psychodrama operationalizes a method of experiential group psychotherapy through the TSIRA in which individual, groups, and communities can access a state of spontaneity to create safe environments abundant in “belonging cues”, possibly encouraging the amygdala to find this new role, creating self-healing. As you will see, the TSM safety structures take sociometry to a new clinical level of care in creating a group, while the TSIRA allows people to gently share their story of trauma with support and growth. But before we move onto theory, here in Fig. 1 is one of the many TSM art of integration images of AHCs from around the world. Look for more throughout the chapter.



Figure 1. Autonomous Healing Center Image.

Image taken by the authors.





The TSM to treat trauma

What is unique about TSM psychodrama is the clearly defined clinical map, referred to as the TSIRA that was developed by looking at the internal roles clinically needed during or following trauma. Therapeutic spiral model pivots from interpersonal relationships to internal roles and building up the resources to remain spontaneous and creative no matter the level of trauma being experienced. While the TSIRA provides a three-stage model with prescriptive roles, trauma-based roles and roles of post-traumatic growth (PTG), TSM also provides clinically modified psychodramatic interventions to provide safety and containment at all times.

First, you will read a brief overview of the TSIRA and the three types of TSM dramas, followed by a description of the six safety action structures that are the warm up for any TSM experiential group psychotherapy. Composite and real-life case studies follow for demonstration. There are additional readings that describe this and other unique TSM contributions available (Hudgins, 2002, 2007, 2015, 2017a, b, Hudgins & Durost, in press). This article briefly demonstrates the three types of TSM psychodramas after a further description of the TSIRA and the safety action structures. Here in Fig. 2 is another AHC image.



Figure 2. Autonomous Healing Center Image.

Image taken by the authors.

Trauma survivors' internal role atom (TSIRA)

While this chapter incorporates additional concepts like the AHC





for the first time, TSM has long valued both the spontaneity/creativity and role theories of classical psychodrama as the core foundation of its user-friendly map to understand and help trauma survivors change. Originally developed to help soothe the internal chaos of the after effects of trauma using simple role terms, we have found it a reliable guide for using TSM psychodrama to safely and effectively treat trauma across time and space. We have found, in the almost 30 years since its inception, that the clinical map that describes the internal landscape of the trauma survivor can be used in a single psychodrama session, in a workshop, or in long term group psychotherapy. Today, we define spontaneity as the enactment of the prescriptive roles. We organize the internalization of trauma into a locked triangle. Most of all, we help people develop roles of PTG, even in the midst of acute or systematic traumatic experiences. The TSIRA puts a name to the face of human suffering and shows the way out of trauma to a spiral of PTG, as Zerka dreamed of herself.

Therapeutic spiral model prescriptive roles - spontaneity and creativity

While it is now considered common sense that you have to build up resources, increase capacity, and build connections for people who have been traumatized... *before* you can directly work on the trauma, that was not the prevailing view of psychodrama in the early 1990s, when TSM developed through a clinical expertise that was soon mirrored by advances in the neurobiology of trauma. A unique TSM contribution at the time was to create the prescriptive role scene prior to doing any trauma work. Soon, it became clear that, as clients were asked to pick roles of observation, restoration and containment before enacting traumatic scenes in action, that they were safer both interpersonally and inside of themselves. You see how TSM is currently focusing on the prescriptive roles, particularly the strengths in our international gatherings in the face of COVID-19 described below.

The TSIRA has seven roles that can be concretized to help the protagonist and group become spontaneous and creative. Usually, a TSM session begins by asking group members to choose a card or an object to represent their observing ego, to create a cognitive container as we begin experiential trauma



work. Next, we build strengths that are needed in the moment to face whatever the trauma or stress—personal, interpersonal, and transpersonal. Finally, the TSIRA has defined several clinical roles such as the modified body and containing doubles, and the manager of defenses. In this article you will see the prescriptive roles in two examples. Steven shares an example from India of how Prescriptive roles built up during several spectrograms helped a protagonist create lasting images of a new life of transformation. Kate shares how TSM is now reaching an international audience as our trainers come together to guide groups of over 100 to join together to build the prescriptive roles needed in this time of pandemic and global change.

Therapeutic spiral model trauma triangle - internalization of trauma

When trauma happens, it becomes frozen in time—in the body, in the mind, the heart and the soul. No matter what the culture or what words are used to describe it, people suffer from flashbacks, dissociation, body memories and constant triggering in the present, as the face of suffering from trauma. Using role theory, the TSIRA presents a simple way to understand the internalization of trauma through the image of the TSM trauma triangle. When trauma is experienced, it is often locked in a vicious fight between victim and perpetrator roles. To help unlock this role interaction, the TSIRA defined the role of the abandoning authority role as a unique look inside a person's role atom. It is only by looking at the authority that abandoned you as trauma happened, can you really stop the repetition of going between wounded child and inner perpetrator in a closed circuit of energy that is the TSM trauma triangle. In the TSIRA, the victim role is moved to that of a wounded child—a role that can be comforted and soothed. The perpetrator energy becomes a use of power in a good way for self and others, often creating boundaries. The abandoning authority begins to take internal self-responsibility and stops blaming others. Only then can someone take full and ultimate responsibility for their own healing and that of their community. We show you how to active the AHC and then to use it to break old patterns in the here and now. In this chapter, Kate describes the modification of the empty chair intervention to work with the wounded child role in Taiwan and other Asian countries.



Transformation - PTG

Finally, the TSIRA delineates a set of roles that demonstrate PTG and show autonomy, connection, and authority for self and ultimately for others. The belief is that when you bring the spontaneity of the prescriptive roles together in action with the trauma-based roles that new creative roles emerge in response to traumatic experiences. While we have some clinical names for these roles, in most cases they are individual roles that are significant to the protagonist and can be seen in the following psychodramas.

In the examples below you see how Steven directed a protagonist in India to find her sleeping-awakening child role that holds all of the natural healing energy of her AHC. Then you see how she creates a perfect environment for self-care and growth. Additionally, in Kate's examples you see how young people in Asia claim the role of appropriate authority and how the international online TSM gatherings do that on a large group scale. Now, on to the action.

Therapeutic spiral model six safety action structures

As people come into a TSM group or workshop, they are greeted by the props that support the warm up to action as soon as they enter the room. As the warm-up to the clinical map of the TSIRA, all TSM groups start with six safety action structures that utilize sociometry in an organized way to bring together a group of like-minded people dealing with trauma. Each clinical action structure creates the next building block in safety, containment, capacity, and connection among group members, preparing them for deeper work to be done.

We start with the first safety structure. The observing ego is the first role that is concretized and helps access a stance of no shame and no blame, a compassionate witness for the self and a cognitive container. This structure is often done by picking inspirational cards such as those seen around the scarves in Fig. 3. Next, the group moves into the cocreation of a TSM circle of safety by enlivening the personal, interpersonal and transpersonal strengths necessary to build resilience and containment to face trauma. The third structure helps assess the themes, feelings and group shares the power of this TSM safety action structure to explore group values and norms in a group in India.



Figure 3. Observing ego cards & circle of safety scarves when participants are arriving.

Picture by Joshua Lee, used with permission.

In other groups, we use hands on shoulders sociometry to show connections that are both here and now and also projective and transferential. To further explore group members connections to others and their ability to share their experiences, we use circle similarities to help build a sense of shared strengths and traumatic experiences in words before we move them into action. Finally, an integrative expressive arts project is used as a method of both containment and exploration throughout a TSM group or workshop, which you saw at the beginning of this chapter. When these TSM safety action structures are in place, we believe that the group and the individual group members are in a state of spontaneity and readiness to move into action in a safe and effective manner, fully resourced and ready for creative change.

Sociodynamic effect

One other contribution from classical psychodrama is the concept of the “sociodynamic effect.” This phenomenon occurs when “a few members of the group are far more highly chosen than others, while a slightly larger number receive no choices or far less than average” (Nolte, 2014, p. 166). Thus, some people are given belonging cues at a higher rate than others while others



receive fewer or no belonging cues. Therapeutic spiral model psychodrama works through the TSM safety action structures and the TSIRA to provide an action method in which the sociometric wealth is spread among participants, so they receive similar levels of belonging cues for the clinical purpose of possibly shifting the amygdala and allowing the igniting of the AHC. (Fig. 4 is another artistic representation of the AHC coming alive.) Next, you will see how the use of sociometry in one of our TSM safety action structures helps to increase sociometric wealth through the use of exploration and group dynamics in a specific culture, as mentioned in India.



Figure 4. Autonomous Healing Center Image.

Note. Image taken by the authors.

Therapeutic spiral model psychodrama in action

When working with any group of people, one needs to be concerned about their cultural “blind spots” or biases. Psychotherapists are only as good as their awareness. To even mildly assume the starting point of cultural interaction, no matter where or with whom, is the culture and place one comes from immediately handicaps the psychodramatist or group psychotherapist. This is true working in any culture, even if that culture is one we identify as our own. In fact, in other cultures, we may be more apt to explore potential blind spots and, when working in our own cultures, we may be more likely to jump to cultural conclusion without exploring a protagonist’s or group’s deeper experience. Therapeutic spiral model offers a number of clinical action structures as part of its three-stage model of change that helps groups to safely





explore and honor each other's similarities and differences. Here Steven shares how the simple use of spectrograms can be turned into a useful cultural tool of exploration and sharing.

Spectrogram adaptations for India

To help open our awareness, while running TSM training groups in India, the team mindfully adapted the TSM safety action structures in order to provide an opportunity for participants to present what they thought was culturally important. One such adaptation was through the use of participant-lead spectrograms. Therapeutic spiral model psychodrama uses spectrograms to strengthen sociometry, increase group cohesion and ignite the AHC. In India, the spectrogram safety structure was adapted to engage cultural identity as a mean to increase a sense of belonging. The team split the participants into three groups each to create their own culturally themed spectrogram. The three criteria created by the groups were: education level, personal space, and the role of the internal sense of masculine and feminine.

Education level

The first spectrogram criterion was to “put yourself along the line in relation to the amount of education you have”. The placement of the participants shows they are a highly educated group with PhDs, accountants, leaders and counselors. They say that there is a great pressure in India to be educated. In some cases, one person is educated in order that they can then support the family back home.

Is there a lot of shame around education? (Director).

There is a great amount of shame, if one has not achieved well in school. A woman who is educated can get a better husband. However, there is a doubled edge sword because a woman cannot be more educated than her husband. (Female participant 1).

A woman can be educated but only just enough. I defied my parents and became more educated than they thought is proper. There is some shame that I am a woman and am too educated. (Female participant 2 (agreeing)).



Personal space

The next criterion was “at home I have little physical space for myself to I have a lot of physical space for self in my house”. The participants are spread evenly over the line with some saying they have very little personal space at home and needed to go to work or school to have space that is theirs. And other participants saying they have a good amount of space.

The idea of personal space is different in India. When you are growing up it is considered wrong to ask for more space. It is even a hard subject to talk about without feeling improper. (Male participant 4).

It is improper, with people on buses and trains pushed up against each other. Men purposely rub against you in tight spaces where they cannot move away. (Female participant 5).

All the women agreed this had happened to them.

It might even be interesting to ask where people have more personal space... at home or at work? (Male participant 6).

Or how much emotional space? (Female participant 7).

Internal sense of masculine and feminine

The next criteria opened up many possibilities for exploration. “In this moment, I feel feminine and at the other end in this moment I feel masculine”. Again, the line is balanced out with the majority of the participants more or less in the middle. All three male participants are in the middle.

I feel equally in touch with my masculine and feminine sides. (Male participant 1).

The other two male participants agree. Three women are fully at the masculine end. One representative speaks for them.

I am feeling very proactive, like I can make something happen. (Female participant 1).

This criterion has another level. The god Shiva is sometimes



portrayed as half man and half woman. Shiva and his wife Parvati are spliced together...showing male and female energy equally. So, it speaks also to the spiritual. As you see next, these same themes came up in the TSM drama of transformation on the final day of the workshop, showing how the TSM clinical action structures can foreshadow what will come as a group develops over several days.

Post-traumatic growth drama: an Indian TSM drama of transformation

Using the TSM map, the same group had worked through a prescriptive role drama, two TSM trauma dramas and had arrived at the PTG drama. The goal of this drama is to move the healing that happened during the workshop forward. We focus on the growth occurring when the group brings their strengths to their trauma finding their relationship to the trauma transformed. You will see the roles of the sleeping-awakening child and that of the appropriate authority develop in Steven's sharing.

The group was made of 30 people with only three being men. I had noticed that the men had placed themselves in the middle of the spectrogram about feeling masculine/feminine. I wondered if the lesser identity with masculine would help free the group from choosing a male protagonist. In the end, the group did not choose one of the men for the protagonist. However, they did choose one of the women who had stood on the end of the spectrogram in the space representing feeling very in touch with her masculine side in that moment. I found this an interesting way in which the group still chose masculine energy, yet in a female form... a close mirror of Shiva was seen as both male and female.

Another interesting dynamic in the selection was from this group of 30 Indians, the participants chose the only Caucasian. This person's husband is Indian and the person herself is Indian, though born elsewhere. The selection of the only Caucasian person revealed the continued subtle sociodynamic effect in that a representative "white male" was chosen through this Caucasian female-very-in-touch-with-her-masculine. To be fair, the other protagonists during the workshop had been female.

During the walk and talk, the protagonist stated she was about to leave her job and she had a "nest deficit". The work was to help concretize



this inner nest, a place that could hold her strengths going forward so she did not lose track of them. This drama had everything to do with the criteria of personal space, especially internal personal space. The protagonist needed her own personal space within herself to hold her strengths. Internal personal space was limited. Here was a group theme that came forward in the spectrogram that the team would not have been attuned if not for listening to the group.

As a TSM director, I look for opportunities to bring all the group members into the drama. By trusting tele, the invisible accurate connections between people, I could work to increase the sociometric connections thus more evenly distributing the sociometric choices. At first, I thought that each member of the group could be chosen by the protagonist to represent some part of her nest. However, within a short time, it was apparent that the protagonist was not going to be able to construct a whole nest in the time we had. Additionally, it became apparent that some part of her nest building capacity was trapped in the past. Because this drama was a PTG drama pointing forward, I asked the protagonist to name what the trapped ability was and who was it being held by but did not construct an entire scene around this past relationship. I asked her to make one statement to the person now represented by a chair. The protagonist with her strength roles beside her was struggling to speak that one statement.

Looking at how the group could help while also getting their individual work done, I brought the rest of the group who were not already in roles into the scene. I had them make statements to the empty chair which represented the person holding their capability and then had the participant retrieve a scarf from under the chair while naming the quality they were recovering.

This is my whole family. (Participant 2 (pointing to the chair).

What do you want to say to them? (Director).

I am intelligent and love learning. (Participant 2).

What are you taking back from them? (Director).

My dignity (Participant 2).

Participant 2 takes a purple scarf from under the chair. Another participant steps up.





This chair represents men who touch me without my permission.
(Participant 5).

What do you want to tell them right now? (Director).

My body is my body. (Participant 5).

What are you recovering from them? (Director).

I am taking back my boundaries from all of you (Participant 5).

Participant 5 pulls a vibrant turquoise green scarf from under the chair and, as she is stepping back, she adds:

And I am never going to let you do that to me again. (Participant 5).

The group cheers behind her.

As each group participant does their personal work by making their statements, the protagonist was able to repeat statements that resonated and change one's that did not. Eventually, the protagonist had enough personal momentum that she was able to make her statement, retrieve her quality and use it to build her nest. Thus, you see a good example of how each person enacting their own Prescriptive Role led to the concretization of her taking her own appropriate authority though the spontaneity of role training and truth telling.

With that piece done, the protagonist then had enough building materials with all the qualities that the others had also regained to build her nest. Together, the group formed a circle around the protagonist creating her holding space while the protagonist and those in roles of prescriptive strengths stayed together in the nest. There was a gentle swaying of the entire group and the drama came to its close. It was clear in the safety of this nest, the gentleness of the unified group swaying and the humming that spontaneously arose, that the participants were finding their autonomous healing centers stirring. Through the TSM TSIRA map, the team had intentionally and with attention to culture created space in surplus reality where the group's and individual's ability to self-heal found the right environment. For this protagonist and this group, the AHC was represented by the nest that holds strengths and with such a nest in place PTG happens. This nest is a place of belonging, which started outside herself and then moved inward. The desire to make this nest could be said to have come from the deep need for the amygdala to find belonging cues and have a renovation,



a transformation, a new role. Therapeutic spiral model psychodrama, we hope, helps the amygdala experience PTG. Thanks to our group from India for showing the full progression of a TSM workshop from the safety structures to a TSM drama of transformation, or what we now call PTG. We would like to talk now about the trauma-based roles and Kate's work in Asia.

Trauma drama: honoring the ancestors in Asia

One of the first major changes in TSM was its encounter with Asian cultures starting in 2003, during the SARS epidemic when I was first asked to do a workshop in Taiwan. Unplanned though it was to be there at that time of crisis, it did, in retrospect, demonstrate that I was a Westerner who cared about the community because I stayed and did the workshop. I had been asked to do in bringing TSM to Asia for the first time. Supported by the Taiwan Counseling and Guidance Association for decades and working within the psychodramatic community there, TSM was changed greatly. Additionally, I worked in mainland China as an adjunct professor at Hua Qiao University since 2008 and helped them build their first University Mental Health Center using the TSM. As I learned the norms, traditional values, communal loyalties and ties, TSM began to evolve from a Western model of individual change to one that has become even more familial and community minded.

One of the most profound ways we had to adapt TSM in Asia was to create a two-chair technique for protagonists who wanted to challenge their parents or grandparents in action. Time and time again, what in the Western world would have been a simple expression of anger, sadness and, thus, independence from generational views became an excruciating tearing of the internal fabric of familial connection in Asian cultures. What we figured out in many discussions, supervisions, and creative endeavors was that a two-chair technique was needed. In one chair, the protagonist or group places their idealized parent and, in another chair, they place the parent who has let them down... or worse. Only then, as they keep affirming the idealized and traditional commitments, can these Asian protagonists reach a state of claiming their own appropriate authority as individuals in their communal society. Here is an example from a TSM trauma drama, a moment in a stage two drama that happened after the strengths and other prescriptive roles were already established on stage.



Liliang... I know you want to show your parents who you are today and what you want. I also see how hard that is for you. Let's set up two chairs in this scene. First, look behind you at the strengths you have brought to this conversation with your parents in TSM psychodrama. (Director).

Protagonist looks around at people enrolled behind her in prescriptive roles.

I can see the spirit of Quan Yin who is compassionate. I know I do not want to hurt my parents. I also want to have more freedom. (Protagonist).

Director sets up two chairs in the space for the parent role.

Here, we have two parts of your parents. This chair is the one you know very well. They have cared for you to the best of their ability. You love them and they love you. Here is a second chair, where you see them as also letting you down. It is ok to express to them a few things you would never say in real life. We say in TSM psychodrama what we cannot... not to change them, but to change ourselves. (Director).

Dear mama, baba... I never want to hurt you... but you hurt me. I am hard working, study hard and please you. But my own passion... I am still trying to find it. You know I wanted to be a musician, that I had talent...yet you always told me to be responsible, to build a family, to be a good girl. I have done that. And I still want to find my dream of living with music in my heart. (Protagonist).

Oh, but I worry so much about you. We know you are talented but we worry what will happen to you if you follow that dream of music. It is only because we love you. (Idealized parents).

Prescriptive roles, strengths, doubles, wash Liliang's brain in positives. Speak your truth from the role you were given and from your own spontaneity. Say what you need to say to your own parents. Help her talk to her parents in a good way, while also feeling who she is today in this moment. (Director).

All roles speak at the same time in Chinese, and I listen with an interpreter to make sure they are affirming her strengths, her spirit, her compassion, and her own appropriate authority). Hold. (talking to the protagonist) Now...what do you want to say to your parents with all this support behind you?



Mama, baba... I will again say that I am going to be ok. You have taught me well. I have studied hard and been responsible and I have a good stable life now. You even have a granddaughter who loves you more than life itself. So, it is also time for me to come back to my music, to begin to play again the sounds that live in my head and my heart. I know you will come to enjoy my music at family times in the future and it will bring us all together for decades to come. (Protagonist).

Therapeutic spiral model online: prescriptive roles connect us around the world

We want to conclude that, with the rise of social distancing and the increase of telehealth, TSM psychodrama has met the challenge to go online and extend its frontiers even beyond the in-person workshops and presentations we have done in over 50 countries for the past 30 years. In April, as the worldwide COVID-19 lockdown started, TSM trainers came together to create an action packed international gathering of psychodramatists from 17 countries joining together to build over 100 hands of strengths around the world. We focused on the prescriptive roles of personal, interpersonal and transpersonal strengths. We danced. We sang. We shared cultural objects and cultural strengths. We looked into each other's homes and saw how we live. We reached out with scarfs to the zoom squares and reached out of our computers in connection to people we never would have otherwise met. In June, we added the use of miniature figures on a specially built psychodrama stage to concretize the TSM triangle, while the international group of over 100 looked at how the role of the abandoning authority was showing up inside themselves, their families, their governments, and societies at this time of unprecedented change, and, of course, how to show up as the appropriate authority. We had stones, animals, figures, angels, trees, and other forms to represent that role around the world. In September, we will once again gather together our TSM international community... this time to look at the PTG that has occurred through spontaneity and creativity even in the worst of times. Let me give you a brief example of the energy that was created by this online TSM response to COVID-19, 2020 in our global community.

When we started the building TSM hands of strengths around the world we asked each of the 100+ international participants, many of whom



we had never met, to find an object in their home environment that could represent an “observing ego”, the first role in the TSIRA’s prescriptive roles if you remember now. I described it as the part of you that can look at you without judgement... no shame, no blame... and can be compassionate. People shared in break out rooms of 10, each facilitated by one of our TSM team members schooled in the TSM. Each group was asked to come up with one small group statement that could represent this neutral witnessing voice to the larger group.

Sentences were called out spontaneously as the Zoom squares changed from one person to another. “Stay in the moment.” “You are safe and loved just like you are.” “It is really hard and scary right now and you are facing it with courage.” “Reach out to others.” Many good messages were expressed from the small groups to the large group. Images from different cultures were shared along with the words. A statue of Buddha. A crystal lotus. A picture of Singapore. A flower from a garden in Philadelphia. The group came together across 10,000 miles to share time and space and connect without judgement as they shared parts of their here and now environments. Next, we focused on building TSM strengths—personal, interpersonal, and transpersonal in action.

To start the personal strengths people were asked to start a sound with their mouths, hands, bodies, tables, chairs, pens, pencils, formal and instruments to gain spontaneity in their bodies and connect to their own AHC at home and with the larger group. Next, we asked folks to grab the standard TSM prop of scarves, often locally sourced from lived experience, and toss them to one another across the Zoom squares, recognizing strengths they saw in each other. Scarves from Egypt reached to Bangladesh. Indians connected to Asians. Americans opened their eyes to new cultures as did those around the world as we shared sound, rhythm and connection thought the beauty of scarves and our own unique homes.

Our first group ended with more break out rooms, where we asked the “computer gods” to randomly select a forced sociometric choice to spread the wealth, and everyone shared how they would use their appropriate authority to face the start of COVID-19. When we came back together again, I used my miniature TSM psychodrama stage and figures. People gathered around this international video conferencing stage and choose how to represent themselves in the moment. A howling wolf. A



curious child. A lovely dancer. A reluctant cook. A world forest traveler. A simple gardener. A tennis player. All came alive on the stage and in the Zoom windows, showing us that yes, TSM can make the transition from in-person groups to the internet and with spontaneity and creativity, meeting this crisis as another other, with our prescriptive roles.



Figure 5. Autonomous Healing Center Images.

Image taken by authors.

CONCLUSION

We hope that as you have journeyed through TSM theory and practice in India, Asia and an international Zoom group, you have seen the power of the TSM in action across cultures. TSM psychodrama creates healing environments through its six safety structures, its clinically mapped TSIRA, its growing understanding of neurobiology, and its adaptations for cultural connections. We hope it has helped you access your own AHC as you have joined us in group structures, moments of dramas, and, of course, PTG. The AHC alive in PTG is represented well in Fig. 5. Returning to Zerka's quote as a guide, we hope you have now found another way to work with suffering wherever you find it, attending to each culture with an understanding of





trauma-informed role theory along with a clinical application of spontaneity and creativity.

It has been a sincere and profound pleasure for both of us to have been so welcomed by so many around the world and it is our hope to continue to listen well so that people we meet may find their way to self-healing, allowing us to witness the amazing power of the AHC in communities around the world. And, of course, we want to thank the protagonists and participants who gave us permission to share with you their healing work. We are full of gratitude, thanks and deep respect.

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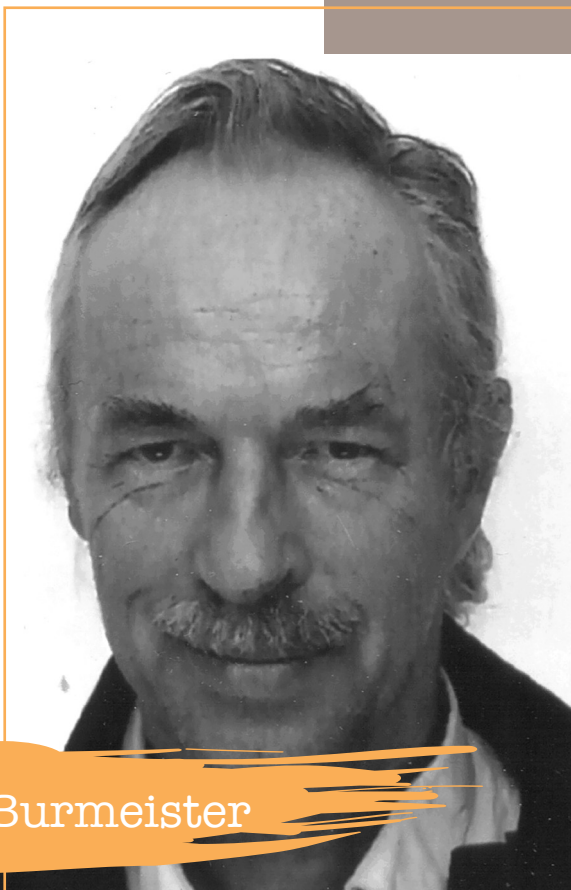


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CHAPTER 4

A Touch of Grace: Scenes in Two Movements of 30 Years of Transcultural Group Experiences

The first part describes the dynamics of a transcultural group (TC) of immigrants in Switzerland during 20 years embarking the tension between a promised land and the pain of a lost home. The second part focuses on the resonance of the transcultural agora and its millenary scenes. It shows how the TC group generates views into the unconscious link between the present group and its historic and social environment by activating the archetypal resonance, a term coined by the author. The first part concludes that the TC group is especially beneficial to generate a transitory home, improving coping for emigrants. It builds bridges looking for encounters. The second part concludes that the TC group is a privileged setting to explore persistent basic assumptions about collective glory and trauma inscribed in the skin of different cultures.





*Spain which we have lost don't lose us
keep us in your broken brow
Store between your ribs the living gap of our bitter absence
While we will return one day, faster, over the tight and
mighty back of this ocean,
with waving arms and the beat of the sea
in our throats.*
P. Garfias, 1941

*From all over the places are arriving envelopes
Telling how one must start by zero
Surf over languages which can't be fluid
Construct a place at any place
And sometimes, during the bitter times,
receive a xenophobic look in the neck*
M. Benedetti, 1994

PART 1

Introduction

A Portuguese fish swims nothing better as in a Portuguese sea

Between 1956 and 1980, about 3 million Spaniards emigrated to western Europe, mainly from Galicia, Andalusia, Castilla León and Extremadura. Similar waves of emigrants were registered in Italy, Portugal and other countries of the south and later east of Europe. Meanwhile in the beginning most immigrants in Switzerland were Italians in the 70s and 80s, also an important number of immigrants from Spain and Portugal settled down in the Helvetic confederation.

On the one hand, immigrants always have reasons to emigrate, like existential threads, poverty and hunger, repression and insecurity together with the hope to improve the living conditions, in contrast with the lack of perspectives and horizons in their home countries. On the other hand, there is the loss of beloved people and of an environment with its perfume and its memories which had made them grow. Even if they can take with them their language, their kitchen, their fiestas and music and, in the best case, the company of some



friends, the things and people they have to leave can easily provoke feelings of guilt and the longing to return. This latter aspect is a factor which increases their vulnerability. In order to tolerate its emotional impact, immigrants often tend to create the illusion of a paradise and of a nearby return, protecting themselves against the defeats occurring in the destiny of migration. If this strategy fails (e.g., illnesses), the immigration could easily induce an “existential catastrophe”.

The significance of the culture of origin

Culture/the collective identity is a part of the self which embraces the individual like a skin. It is not conscious. It produces automatic reactions and ways to perceive without a proper control or a prior processing by the individual. Example: Antonio, 41 years old, 10 years of stay in Switzerland. Married to a Swiss. He doesn't speak German well and feels mistreated by the neighbors, apart from very serious chronic pain problems. The rejection experienced is not real but a misinterpretation of nonverbal communication. Even after clarification, it is difficult for him to control the emotional impact.

Shared experiences: e.g., songs or shared identifications like parental figures or relevant collective trauma are deposited in the cultural canvas (Volkan, 2006) which covers the cultural identity like a firmament. They are often stored by myths, legends and tales. According to Hogg and Abrams (2001), a difference in status/prestige between groups induce or attempts by the minority group to try to compensate this difference by extraordinary performances—identification with the other group—or to rebel against existing structures—especially when there is injustice or an unstable order. Immigrants who find an employment usually don't dare to express critical feelings towards their hosts and their culture. This attitude might change dramatically if an injury questions the positive economic outcome of the immigration.

Cultural considerations of psychotherapeutic group work

Psychic problems stigmatize in southern European cultures more than in central or northern European ones. The corporal expression of the “psychic” is often something “natural” in the face of the lack of reflection of the “individual” behavior and its consequences. Theoretical models that imply an exclusively defect-oriented vision of the other and their culture can produce



an attack on the dignity of the person. Nevertheless the “groupality type” (Hofstede, 2001) of southern European cultures favor group work at large.

As a consequence, it is important to focus primarily on strengths and solutions and to calibrate the impact of the hurtful sharing of “weak” aspects in every moment. Immigrants need a group work, which includes resources and an explicit mentalization of the group process as a whole: what is the goal, what is the limitation, what is the meaning of the group not only in cognitive but, after all, in emotional and social terms. The scope of the group work includes the vision of a good and fair life—values, norms, rules—through models like father etc., the current life situation, the most eminent wishes and the most serious challenges in the context that group members are going through and, after all, the question “what can be done” (James & Prilleltenski, 2002).

Group therapy for volunteer migrants after labor accidents

The members of the group are patients after accidents whereas the amount of pain and the number of disabilities cannot be explained alone through the “obvious” injuries detectable in their bodies: psychosomatic symptoms. Their home countries are Portugal, Spain and Italy, while the language used is a mixture of the three languages. The group is composed by eight to ten male immigrants with a two-week sequence.

The four phases of the conflict with the accident and the consecutive restrictions are:

- To struggle with and to deny the defect and pain;
- To surrender with despair before the impossibility of overcoming it;
- To adapt to the truth of having to live with pain and insufficiency, losing the best part of their identity: the role of the worker;
- To suffer from the lack of recognition by the public health system with legal scenarios and a dynamic of secondary humiliation with reinforced shame, impotence and a real lack of justice.

In the end, group members usually present a complex state of self-dysregulation: a painful interaction between somatic, psychosomatic, mental and social disabilities in the framework of a fragilizing context with less resources and more stressful handicaps of the emigration.





The significance of a physical disability in male immigrants from Southern Europe

Most of them develop a behavior of avoidance: false strength, pride—not leaving home, not showing up, withdrawal inside of the family because of feelings of shame which in itself makes the group a difficult place. This dynamic is also shaped by gender aspects as the presence of the other gender increases the shame. Usually, they present a behavior of emotional hyper arousal with irritability, vulnerability being easily offended. They don't feel themselves useful anymore, which reinforces the experienced lack of respect by others. If the emigration was an expression of an unconscious splitting to deposit mentally all traumatizing experiences and the related emotions in the home country, the impact of the illness is especially hard to accept.

The specific group script

The group offers a balance between resources and problem orientation, which enables members to generate hope again and to see themselves as self-efficient to develop perspectives for the future. Group members cocreate a safe container by knowing the time about each other's handicaps. The group understands their life as immigrants as an art to survive in a strange, sometimes hostile, environment. It is not focusing mainly the deficit but the potential to cope by mutual encouragement and a climate of respect and tolerance. It is not prone to deny difficult emotions/experiences, but to help to tolerate them by facilitating an active leadership style, by active listening covalidating efforts and helpful interventions.

The individual meaning of the injury is connected with the meaning of the emigration and the culture of origin: a common ground for the whole group. One member expressed it once for all: a Portuguese fish swims nothing better than in the Portuguese sea. The group recognizes and reframes anxiety and avoidance as good enough strategies to survive the emigration and the cultural shame. It explores the potential for alternatives: working with models of the family of origin and the culture: myths and stories. The aim is not a profound elaboration of negative psychological factors including childhood, but to enable another point of view of the same.



Role of the therapist

The therapist is not educating the members of the group turning involuntarily into a “sadistic master role” (of health, culture). He is neither performing an indifferent witness role who is unable to offer holding and protection. He is compassionate enough and distant enough. He acknowledges the constant challenge not to overidentify with the client, but also not to establish too much distance, going in between. The most important principle establishes the respect towards the honor of the immigrant, their dignity, which can be damaged by psychological interpretations. Jacinto, one member of the group, summarized the inner world of the immigrant as follows: “if we don’t have any home anymore, our dignity is the home which we have to defend. It is our only belonging and it is giving us the moral to defend it. ‘This is in itself the aim of the group!!!’”.

My own identity, being half Swiss and half Spanish, a double identity, a cultural hybrid, is helpful to overcome the splitting of the cultures serving as a model how to survive.

Typical interventions

Dignity implies, after all, to accept instead of judging, to listen to and to acknowledge the experiences of the participants explaining the positive meaning in terms of survival.

Seven typical interventions are:

- To organize the group with a well-known scheme and rituals. E.g., putting objects out of the pocket on the table before beginning, then a short question what has happened since the last time, filtering personal and common topics, exchange, active listening but also active answering, to finish the group with a commitment until next time and a good bye ritual, fetching the objects from the beginning.

The following interventions that enable a change will build on what is already present after the first intervention.

- To focus on stress regulation asking how could we manage to survive until now? What are the competences/the people in the here and now and in the past/the inner models of family and culture which have inspired our way? Example: Rocco, a Sicilian, has been badly hurt by a truck during his work and cannot walk anymore without



cans. He has chronic pain, feels useless and full of shame. Asking whom he can choose as a model of strength and resilience, he chooses his own father, starting to cry as his father is already dead. If he could imagine the spirit of his father present, what would be the words for his son right now? Rocco says: “don’t give up my son, you are strong like all of us, you are made out of the best soil, the best water and the best churches which are available in the south. Don’t give up. Go on. I am proud of you”. As another group member is repeating the words, Rocco is listening first weeping then showing up each time stronger in the body. In the end, he closes the eyes to remember the feeling and the body sensation. And he chooses a symbol which represents it: a green olive tree.

- To express gratitude as a basic intervention: to identify one helpful family member, to identify his or her quality which has been helpful, to identify a precious stone which represents this quality of this person, to coconstruct a collage with stones on a scarf in the middle of the room expressing one by one gratitude towards the person naming them and their quality.
- To imagine on an inner screen oneself and to improve the attitude with the company of an auxiliary ego. Fernando, from Porto, 31 years old, 2 years of stay in Switzerland. Car accident with PTSD and multiple injuries/pain all over the body. Chronic headache, strong concentration disorders, inability to render performance for more than one hour. During a medical evaluation, they humiliate him. He feels strongly depressed and weak. He chooses as his company the light and the voice of the Virgin of Fatima. She is caring for him, saying that she will always watch for him and his parents who are already old and whom he had to leave in Portugal. That her light will not shade even in the darkest moments. Fernando is telling what he sees and feels much calmer when he is returning to the group. A deep sharing ends the session.
- To stabilize, control and modify pain: perception and mentalization/cognition. Arlindo, from the Alentejo, cannot play music anymore while strong pain with a constant tinnitus is irritating him. After describing the pain with different attributes, like sharp, bitter, rocky, dark green, noisy, he, together with the group, starts to search symbols for the opposite:



instead of sharp, he chooses a soft tissue woven by his aunt; instead of bitter, a sweet cake made by his beloved sister; instead of rocky, a flowing stream of warm water coming from the ocean shore; instead of dark green, a light orange color like the flower in the garden of the neighbor's house; instead of noisy, his favorite Fado song sung by a famous singer. After this sequence, Arlindo tries to balance his pain with the inner symbols which give him some relief. And after the session, each one looks for a real piece of the objects Fernando chose. During the next session, happens a great party with Fado, cakes and orange flowers. This technique is also applicable to cocreate safe places using flow stimuli—e.g., music or food or nice pictures/stories of success and glory.

- To cobuild a space for the unspeakable/the pain/the hardness which is strong enough to contain everything. During each session, we save time for writing down difficult emotions or just choosing a piece of paper, wrapping it and to collect them in the end in one big basket. Every six months the group is doing a ritual together burning all the papers in a kettle in the countryside. Example: Mario, 50 years old. After the financial catastrophe due to the accident, he cannot pay anymore the mortgage for his house in Spain. With this house, he loses all his savings and “the meaning of his whole life”. He develops a chronic psychosomatic picture, feeling dismembered of his existence with strong feelings of rancor and impotence at the same time. In one session, he is able to share his deep frustration and bitterness, his experience of the lack of justice, his proper impotence. The group is sharing these strong emotions. In the end, the whole group draws a picture together, which represents these feelings. They contrast this drawing with another one representing symbols/aspects which are not destructible and connected with their home country. They burn the first drawing and hang the other one on the wall of the group room. Mario is feeling himself understood and recognized with his pain. This helps him to go on.
- To focus also on the possibilities of growth by emigrating and even by the fact of the accident itself. One fact relates to the emigration of all of them, which has given them the opportunity to meet and to benefit from each other. The group celebrate together Christmas, Easter etc. with typical products of each country, creating a bridge



between the new and the old home. In the end, the pain itself is teaching how important but also how fragile sanity is and how valuable it is to take care and to teach its value to others.

Conclusions

The healing aspect of transcultural group work as a “transitional space” for the development of the individual response to common stressors is triggered by phenomena of resonance, which delivers the basis of the symbolic transformation of pain.

The group creates a space of opportunities, a potential space (Winnicott, 2006) in between the inner and the outer reality by being authentic, compassionate and practically helpful, not only due the therapist but due to the group as a whole. This originates a feeling of belongingness and interpersonal connection which substitutes partly the lack of the cultural support.

These are the words of one of the participants, Antonio, before he left the group to remigrate to Galicia/Spain:

I have immigrated because I wanted to influence my future with my own hands. I wanted to have a normal life for my family and myself. I have gone through strong challenges and I have overcome a lot of obstacles. Here I am. My experiences have made me see the extreme positions of human life. The absolutely negative, destructive aspects which were and are endangering my existence, as well as the good aspects of our life which have left me with a sense of dignity and belief in the positive outcome of the future. Thank you, my dear group.

Thank you, dear Antonio and all members of the group which made this experience an unforgettable one (after 15 years, the group has been closed down in 2017 due to the successful remigration of all members).

PART 2

Introduction

I only ask you not to leave me indifferent—Resonance in the transcultural agora and its millenary scenes





*Country is a name;
It's the same as you, new born,
whether you go to the north, the south,
the fog or the lights;
your destiny will be to listen to what
the shadows say, leaning over the cradle.
A hand will give you the power to smile,
another will give you embittered tears,
another the veteran dagger,
another the desire which corrupts...*
L. Cernuda, 2000/1936

*When the belongingness is reduced to only one thing (religion, nation, language,
social class and ethnic group) people become prejudice, sectarian, intolerant, dominant,
sometimes suicidal. It converts them into assassins or supporters to murderers.*
A. Maalouf, 2001

Relevant concepts of the large group

The field of the large group ideally constitutes the experience of *Konuionia* (sharing an equal space–time structure), in which the synchronicity of views, capital and social rankings complements the individual identity by its collective identity. The interaction in the large group makes the collective part of the experience visible.

It cocreates the dimension of a counconsciousness (Moreno J. L., 1977) of its members containing relevant cultural images of trauma and glory accompanied by feelings of shame, guilt and pride. It might reenact feelings and symbols of an original connectedness and unification of the large group, as well as those of a life endangering and persecuting experience which, in the end, might generate the so-called accordion phenomena (Volkan, 2006) as a sequence of approximation and rejection in the large group.

The transcultural large group

The transcultural large group does not only represent the many differences between cultures but it offers as well the “linking” strings and pieces, which can be shared and which are interwoven: the moments when the large



group share them are the moments when the group start to build on something “universal”, a “common language”. These “universal” aspects (Jung [1960/1929] collective unconscious, Foulkes [1975]—foundation matrix, Moreno—cosmic matrix cited Hare A. & Hare J.) are a part of the ground the group is walking on. So, transcultural is not to “merge” or “fuse” cultures, but to explore in groups also “universal” aspects which we share beyond cultural differences.

The cocreated transcultural space embarks in this sense the collective conscious (Jung, 1960/1929) transcending cultural restrictions by a universal human mankind matrix. It goes beyond a certain culture. Group processes produce not only a proper mental resonance between its members (Schlapobersky, 2014), but also a resonance with the universal matrix addressed as “morphic field” (Sheldrake & Fox, 1998), or “space-time continuum of quant physics” (Ponte & Schäfer, 2013). One essential part of this resonance is built on archetypes which structure our imagination inducing symbols which are shared between all human beings beyond differences of culture, age or gender.

Examples for processes of resonance within the universal matrix from different transcultural large groups

The child judge and the ruin of the world committed by adults: transcultural insights in the Friday for future movement

During a transcultural large group more than 10 years ago, one of the participants reported a nightmare. She saw her own children being murdered by evil forces due to the mortal conviction of all the parents of this world by a “child judge” for having ruined this world. In spite of all her attempts to stop the murderers and her despair and in consonance with the “total darkness” which suffused the hall in her dream, there was no hope. Out of the heavy silence, one member of the group asked her if she couldn’t see any light. Just in this very moment she suddenly recollected that she had still seen a small glimpse of light in the eyes of her youngest child. Remembering this light, she started to cry while she became aware that not everything was over. And she said: “yes, something will remain even in the worst moments, something which cannot be destroyed”. This experience provoked a sharing in the large group about destruction and resilience, including a spiritual sense. And it could have been a prophetic dream thinking on Greta and the Friday for future movement.



The movement not to forget—memory and history to make justice between and inside cultures

During another transcultural large group in Granada, one young Italian member of the group was sharing a dream she had on the last night of the academy. She dreamt that the whole group was digging under the mosque and the nearby church to rescue the bones of ancient generations. The leader of the group was telling them: “don’t forget, don’t forget or they will die for ever”. It was not only a wish to overcome the destructive consequences of past collective conflicts but also a prophetic outlook. Only one year later in Spain, including Granada, the so-called “memória histórica” movement initiated the recovery of the graves of Republicans shot during and after the Spanish civil war.

Antigone will never die: compassion and bravery between human beings and beyond culture

During another transcultural large group in Granada, the German conveyor in charge organized an analytic group during the five days of the academy. The process was not very fluid between the members and stuck during the first four days. Everything changed on the last day when a young Italian student shared an important episode of his grandmother. During the last days of the Nazi occupation in Italy in a small village in the mountains, German soldiers ran away to save their lives while the Italian partisans were shooting at them. One young soldier was hit badly, falling on the ground and agonizing. The villagers were looking terrified towards the young man. Suddenly, the grandmother of the teller, then herself, still a child, escaped from the hand of her mother and pushed a cushion under the head of the soldier. All participants were moved to tears, including the conveyor of the group. The example of the modern Antigone inspired a profound sharing on the basis of human compassion beyond cultural or political restrictions.

Coming out: the truth of transcultural values

In another transcultural large group in Granada ran by two group processers, gender issues were reflected in small groups according to the gender of participants. In the plenary reflection, one of the male conductors





of the staff stood up saying that he felt uncomfortable with the procedures, as he was homosexual and the assignment of the small groups did not fit with this fact. This coming out encouraged two more members of the large group to stand up and declare their own homosexual orientation as well. The whole dynamic shifted towards a reflection on how to recognize, respect and include the sexual and gender orientation in society at large. Given the fact of participants from five different continents, the discussion inspired and led to many personal commitments for the future.

Oedipus and the invisibility of the truth hidden by culture

In a large group in Sicily, the drama of Oedipus provoked a harsh conflict between the female and male participants whether a woman and mother has the right to take her own life. This behavior, which was banned collectively by the male participants in the group, was defended drastically by the female members of the group. The dynamic of the group became violent and unbearable for everyone involved, until finally the question arose from the leader of the group whether this intolerability, in addition to all the anger, was not also connected with the lack of sadness considering the homicide, murder and treachery.

Due to this intervention, the whole group was able to recognize how much the feeling of grief has been taboo for cultural reasons in four years of continuous group work. Only at this very moment the experiences of death, pain and grief could be shared and mourned. The sudden cathartic effect had been set in motion by a leader from another culture, ignoring the cultural code of the majority. It created the space for denied emotions in the group's public sphere. It also showed that "noncultural" leaderships of large groups offer special opportunities.

Transcultural creativity beyond time and space

On the last day of the transcultural social dreaming matrix in the IAGP summer academy in Granada, a female participant shared her dream of a big egg floating under the water of a lake. It was discovered by a couple (male and female) of divers who were not able to explore their treasure while they had spent nearly all the sufficient air carried with them during the endeavor. Water as the emotion and the mother aspect and air as the transcendence, soul aspect referred to the group process and its creative substance (egg). This image



reconnected the group on a counconscious level with a past summer academy. In the frame of that former experience, a whole sunken continent (Atlantis) was reconstructed under the water by the dream images of the former group, showing incredible “sunken” treasures. They were shared simultaneously, being recognized by the group as a whole coming into existence, blooming and decaying in a stream of interpsychic processes.

Conclusions

All examples testify the many symbols of the unconscious cocreation of the group and its enrichment by processes of archetypal resonance in a transcultural setting, which goes beyond time and space and cultures.

The underlying question, how destructiveness in the shadow of civilization in human relationships can be integrated into the public space of cultures, into the cocreated agora, is important as it might even emphasize sociocultural awareness in the sense of an emancipatory dynamic. The reconstruction of a sense of coherence and the dissolution of the conspiracy of silence amplifies and repairs the frame of reference of the individual identity. It may even protect next generations of the consequences of trauma transmission.

Rage will provoke Hate, Concord will nurture Love.

Latin proverb on the walls of the University of Salamanca

You reach a dimension which is beyond subjective and objective reality.

*It's a kind of cosmic reality. You reach a third dimension in the experience of time,
that of eternity or timelessness.*

Z. T. Moreno, 2000

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A Neuropsychotherapeutic Approach of the Psychological Migration Trauma: Its Expression and Treatment in the Psychotherapeutic Groups

Migration and mobility have featured as key elements in the recent political and economic history of our world. Trauma appears in many dimensions of life during migration (national, physical, organic, political, social, financial), and it can be transformed through generations. From the beginning of our life, a very complex biochemical dialogue is established with our current and past life, through the maternal experiences and its relations with the social unconscious. Trauma provokes gaps and wounds of time, space, boundaries among nations, and can be transgenerationally carried as a genetic, ethical or national heritage. Cultural epidemiology focuses among several parameters in migration on the need of a container in the new way of living of the new country. The psychological migration trauma asks for evolutionary refugee-focused therapies, to help victims to face not only one traumatic event, the searing isolation of social distancing and the loss of human dignity but also multiple traumas and losses, including rape, war and torture. Cellular biology, neurobiology, epigenetics, and psychology underscore the importance of exploring at least three generations of family history in order to understand the mechanism behind patterns of migration's trauma and suffering.



INTRODUCTION

Migration is the result of economic hardship, violence and other forms of human misery like war, natural disasters, human rights violation, persecution and economic disenfranchisement according to the United Nations High Commissioner for Refugees. Refugees are condemned to live under pathological conditions in extreme environments and hard lifestyle patterns.

A quarter billion people worldwide live outside their country of nationality or forcibly displaced from it. Most of them are migrants who have left their countries seeking greater opportunity and one tenth of them are refugees fleeing acute threats like war, political turmoil, civil war, criminal violence, climate change and threats called “climate refugees” who are expected to become 1.5 billion by 2050 (Council on Foreign Affairs, 2020).

Another reason of migration, especially in Africa, is the desertification. Global climate change and the slow-motion ecological catastrophe lead to massive migration and to the creation of marginalized nomadic groups (Haas et al., 2020).

Migration and mobility have featured as key elements in the recent political and economic history of our world. Cultural epidemiology, evaluates several parameters in migration like age, gender and hormone influence, job and work conditions, financial status, family status and nutritional habits, way of living, immune tolerance to changes, religion parameters (food, habits, norms in the hospitalization), level of education, local diseases and epidemic or pandemic situations.

Cultural epidemiology explores several parameters by which post-traumatic stress disorder (PTSD) in refugees and migrants is shaped and the ways that a psychological, physical and organic trauma or a trauma-related situation can be expressed. The syndrome of multiple losses is also important to be evaluated according to the stages of mourning and grief, in parallel to PTSD and losses. Important factor for evaluation of PTSD expressed as physical or organic trauma, or as trauma related situations, is in association with acute and chronic stress.

The searing isolation of social distancing and the loss of human dignity is a new experience for individuals and communities worldwide





during the COVID-19 pandemic lockdown, but for migrant communities is an experience felt for years in parallel with their human rights abuse (Kerpius & O'Connell, 2020).

The feeling of statelessness or the fact of not being considered as national by any state is another “legal anomaly” that became a “new normal” related with the loss of identity and the loss of the feeling of belonging, associated with severe discrimination, human rights violations and abuse. Statelessness emerges from a forced displacement that provokes loss of fundamental bonds when nations build more walls.

Children are refused to be repatriated, thus losing their families where they belong and their nationality (Refugee Law Initiative, 2020). The fate of the refugees is unknown, and migrants are treated as an asymmetrical threat, as terrorists, as a burden causing social troubles. The effects of the stress provoked by these phenomena are not uniform, in natural. The outcome of stressful experiences depends upon the nature of the stressor and the pathophysiological stimuli to which the organism is subjected thus influencing human's capacity for dealing or coping with altered states. Findings provide evidence for complex associations between environmental and psychological factors and brain maturation. Neighborhood disadvantage and poor way of living may cause long term disorders on neurodevelopment during adolescence (Rakesh et al., 2021).

Post-traumatic stress disorder and the psychological migration trauma

Post-traumatic stress disorder is a psychiatric disorder described in patients who have experienced a traumatic event. It can be expressed as extreme physical reaction to reminders of trauma or by intense feelings of distress when reminded, avoidance of certain activities, thoughts or places related to trauma.

Post-traumatic stress disorder symptoms can be seen also as a mirror phenomenon in many Non-Government-Organizations staff members and caregivers.

In all cases it is characterized by flashbacks, sleep disorders like insomnia and nightmares, panic attacks, severe anxiety, lack of trust, incapability to form positive relationships, feelings of helplessness and despair.





Different phases of PTSD can emerge expressed by various ways of expression like the following:

- **Initial phase** of the shock with associated feelings of fear and guilt.
- **Rescue phase**, when the affected person comes to terms with what has been realized.
- **Intermediate recovery phase**, when the affected person starts adjusting to normal life.
- **Long-term reconstruction phase**, when the affected person starts to rebuild and deals with the aftermath of trauma.

Tragedies shock and distress cascade from one generation to the next. Recent developments in the fields of cellular biology, neurobiology, epigenetics and psychology underscore the importance of exploring at least three generations of family history in order to understand the mechanism behind patterns of migration trauma and suffering. The lack of mourning process resolves an historic past traumatic experience as well as the danger of the repetition of the trauma. The history of trauma is unrolling in relation to its past, its pathogenesis and its future expression and resolution, thus separating the present from the past, the healthy part from the suffering one. Trauma provokes gaps and wounds of time, space, boundaries among nations and can be transgenerationally carried as a genetic, ethical or national heritage.

Trauma's pathogenesis and its characteristics are fundamental in the explanation of trauma maintenance and transformation through generations. There is the unconscious transmission of trauma of refugees to their descendants, such as children, perceiving their environment as hostile and persecutory (Hopper, 1999).

In various levels of our life, like national, physical, organic, political, social and financial, trauma appears and leaves a trace in the individual's mind and body.

The relation between trauma and the ego-representation is also important.

From the beginning of our life a very complex biochemical dialogue is established with our current and past life, through the fetus, shaped by maternal experiences and its relations with the social unconscious. In later life, trauma



leaves traces in our memory through an explicit or implicit way. It is coming to consciousness like knowledge, when explicit memory brings it back, but other times it is expressed by an unconscious, blind, sudden and sometimes violent social or somatic way, as an expression of the implicit memory, in cases where the traumatic quantity overwhelms the psychic apparatus.

Trauma can influence both mind and body and it has a significant bearing upon an illness, its severity and content. Although neuron circuits that influence mind are usually different from those effecting on our body, there is a vice-versa process between the somatic and the spiritual level, like a mirror-process. Somatic illness participates in our traumatic heritage while brain's synapses reflect on past traumas but also on our new social contacts.

Brain has kind of contacts among neurons called synapses for the interchange of information and energy of the neurotransmission. Similar kinds of meeting-contacts are also frequently seen as an analogue during social life, described as social contacts or social synapses.

The same synaptic meeting point of the neurons of the brain can be found as an analogue inside a psychotherapeutic group by the communication between its members. The individual mind is a network of interacting processes that interact in the communications network of the group, the group matrix and the group dialogue. Every neuron in the brain acts as a nodal point in an analogue with the members of a group. This is a psychotherapeutic analogue of the brain plasticity. Brain must be considered as a highly dynamic organ in a permanent relation with the environment, as well as with the psychic facts of the subject and his acts. Social brain is structured from its experiences and activities through its activation or withdrawal of the neuronal synapses according to its use and expresses the dimension of the brain activity as it is influenced from the social environment.

Neurobiological alterations of the brain function during the pathogenesis and the expression of the psychological migration trauma

The psychological migration trauma as PTSD can be the origin of many neuropsychiatric disorders like major depression, suicidality, anxiety disorders, social phobia and panic attacks, obsessive-compulsive disorder (OCD), substance addiction, dementia like situations.



A trace left by experience is associated with structural and functional changes of the neuron synapses associated with cellular and molecular mechanisms related with neuron-genesis or neuron-degeneration.

All biological systems interact with each other and adapt to the contexts in which a child is developing for better or worse. The brain has mechanisms to protect the ego from traumatic events but, in a paradoxical and sudden way, it can release information which can liberate hidden or repressed traumatic memories. Early experience of socioeconomic disadvantage is associated also with life-long negative cognitive and mental health income (Forns et al., 2012, Koutra et al., 2012).

Brain is constructed and shaped every moment according to its experiences and activities by activating or drawing away neuron synapses in relation to their necessities and needs. Trauma influences the brain architecture and also influences our immune homeostasis and tolerance. There is a neuroimmune cross talk of the brain during the group psychotherapeutic process.

Post-traumatic stress disorder alters brain function and plasticity, different circuits and various brain areas. When treating psychic wounds inside a group psychotherapeutic group, the balance of the expression of the stress hormones and the neurotransmitters must be seriously considered.

- Stress hormones shape human behavior in front of fear, partly mediated by the hippocampus, and their neurotransmission can be decreased and stopped in synapses during trauma and shock, thus influencing the link between basal cortisol levels and the duration of the synapses' freezing or inhibition in the disturbed neuromodulation after shock. These effects are manifested as underlying disorders in relation to attention, short-term memory, and suppression of interference.
- The neuroendocrine state constitutes the internal environment, within which immune responses take place. Normal and abnormal affective states, different prenatal and early life experiences, social interactions, and environmental circumstances over which the individual has no control are all associated with neuroendocrine changes that are implicated in the modulation of immune responses. Different stages of trauma reaction (denial, anger, sorrow and grief, acceptance etc.) lead to different immune responses.



- The γ -aminobutyric acid (GABA) circuits usually involved in the somatic and psychological perception of pain, it is considered as a *liaison* pathway of the brain plasticity, a common area that overlaps and interacts with the human's psycho-neurological and immunologic expression.
- The dopaminergic system has many functions, including motivation, also involved in dreams. Stressful life experiences activate dopaminergic (DA) system in medial prefrontal cortex and causes changes in the endocrine system.
- The serotonergic system has receptors involved in hopelessness and lower serotonin levels result in aggression, rage and self-harm behavior. Serotonin is involved in the regulation of mood, appetite, and sleep, as well as memory and learning. It is a major antidepressant. Onset of cognitive symptoms and depressive ones, sometimes in an overlapping way, can become a PTSD way of expression. Chronic brain inflammation is a hidden mechanism related to somatic chronic stress, where the serotonin pathway seems not to get seriously involved (Mela, 2017).
- The stressors of the central nervous system can cause damage in memory's process by a serious decrease in neurons. The function of the psychotherapeutic environment as a "container" is strongly associated with the stress relief and improvement of depressive and dementia-like symptoms emerged after brain neuro-inflammation and neurodegeneration (Mela, 2017). Inside the group, functions of the mind like memory can be seen to operate like as a function of the group network (Foulkes & Antony 1965).
- The frontal brain lobe is related with experiences, memories and dreams, with functions associated with childhood experiences and current life events. It is influenced by the prefrontal lobe and the dopaminergic system that is the responsible circuit for the motivation, the apperception and the expression of the motive intention as it is shaped by external stimuli. Early experiences play an important role in brain development. It participates in the formation of the secondary process of the mind and the formation of the ego, enables the mental apparatus to organize its activities and serves in a way of "internal speech" in relation to stimuli of



the external world. Lesions of this area result in changes of general motility and emotional behavior (Kaplan-Solms & Solms, 2000).

Neurobiological circuits and brain mechanisms that the psychotherapeutic process activates in trauma

The psychotherapeutic analytic group is a place for recovery since it creates its own new contacts between its members and environment, thus influencing members' brain plasticity and neuromodulation, on a social, psychosomatic and psychotherapeutic basis. Group analytic psychotherapy modifies brain and synaptic plasticity by treating stressful social and family factors of life, emotional traumatic events and conflicts, by altering the memory function according to the restoration of the traumatic memories in the prefrontal lobe, the cortex and deeper brain areas, thus modifying neuroplasticity that is emerged after exposure to pathological and extreme environments of migration.

Kandel (1999) mentioned that analytic treatment is successful only if it leads to adequate brain remodeling. By the participation inside a group, we can create new representations thus altering the function of the prefrontal lobe of the brain. Inside group, mechanisms related to past family and social relationships are emerged in association with the patient's feelings. Traumatic past experiences can become conscious from a preconscious or unconscious level and can be further analyzed also by the memory's transformation from implicit to explicit conscious memory. Our explicit memory by cortical activation enables to learn about our environment through knowledge. Implicit memory enables us by the amygdala's activation to learn by ways that are not conscious which are related to early stages of life and different circuits of plasticity. It is cited in areas close to the limbic system and it can be violently expressed, usually in front of a conflict, by an unconscious way and usually as a result of an accidental stimulus. It is related with social unconscious behavior, and also can be recorded in the implicit memory in an unconscious way.

Constant repetition may transform explicit memory to implicit by different mechanisms (Kandel, 1999). The group serves as a supporting ambience for memory analysis, for conflict's understanding and resolution, thus modifying the hypothalamic pituitary adrenal (HPA) axis and the hormone's expression.





The creation of a safe container inside the group relieves stress and influences the levels of cortisol releasing hormone secretion, with impact also to the interleukin's levels and to brain inflammation, which is related with depressive symptoms. Excessive cytokine secretion during stress situations is one of these causes which can be related with the onset of psychotic symptoms or depressive ones, sometimes in an overlapping way. In both cases, chronic inflammation is a common hidden mechanism causing a vicious circle of somatic illness and chronic stress (Mela, 2017).

The function of the psychotherapeutic group as a "container" is strongly associated with reduction of the hypersecretion of cortisol and the successful management of its blood levels, on the moderation of the HPA brain axis, with impact in body's organs and glands. Holding is a mechanism allowing several feelings to be expressed and understood, as well as feelings of shame provoked by trauma and related to trauma disorders. It provokes safety and cohesion between the members of the group and a real feeling of belonging.

Psychosocial factors of the psychological migration trauma and the healing contribution of the group

The Greek word "*trauma*" means piercing of the skin and is used metaphorically to show how the mind can be pierced by traumatic events (Garland, 1998). Traumatized people are no longer capable of communicating to themselves or to others and feel that they have substantially changed. Their identities, their affects and physiological responses, their outlook on life and their interactions with others have somehow undergone a total transformation. There is no more safety, predictability and trust. Their ordinary adjustment strategies had proven inadequate and they were unable to cope since brain synapses are frozen and overwhelming fear, powerlessness and loss of control lead to a permanent learning experience that they are unable to forget. There is also a connection between the loss of trust of these people with the loss of the ability to symbolize. Thus, leading to flashbacks, reliving and to the creation of traumatic memory (Tucker, 2011). Traumatized individuals in group settings tend to share a profoundly shattered ability to trust other people after having suffered torture, rape and humiliation.

Dunbar (2006) claimed that religions bond societies because they exploit rituals that are extremely good in triggering endorphins, as





an experience of one another into social meaning. Religion is part of the human culture. Transcultural and transreligion dialogue can set the basis for healing of the psychological migration trauma, according to the different phases of its expression (peritrauma, early and long-term traumatic responses). Evolutionary refugee-focused therapies, social support, religiosity and future aspirations reinforce health and well-being, help for the victims to face the traumatic event.

Refugees show an increased risk for mental and health problems due to their past and current migration experiences. Household socioeconomic disadvantage is associated with cortical thickness, surface area and cortical and subcortical volume in adolescents (Hanson et al., 2011, 2015, Lawson et al., 2017, Machlin et al., 2020, Mackey et al., 2015, Noble et al., 2015).

The history of humankind seems so paradoxical since it is characterized on one hand by endless violence, persecution, enslavement and exploitation and, on the other hand, individuals, communities and states have over centuries sought to spare people from different forms of inhumanity and to provide them protection when their lives and liberty are at risk (Crisp, 2020). Refugees' tragedies are varying in type and intensity—such as abandonment, suicide and war, or the early death of a child, parent, or sibling—and can send shock waves of distress cascading from one generation to the next.

In the psychotherapeutic group, some psychosocial stress factors, related with living in transit, settlement countries and the psychological migration trauma, need to be treated.

The United Nations High Commissioner for Refugees stated that migrants and refugees are disproportionately vulnerable to exclusion, stigma and discrimination (Collini, 2020). Many refugees show an increased risk for mental and health problems due to their past and current migration experiences when they are portrayed as people who bring diseases, burden society and threaten public safety (Dowling et al., 2020). Treating refugees as a problem becomes the main problem!

- Racism, difficult living conditions, treatment as unequal human beings, abandonment, suicide and war, early death of a child, parent, or sibling are some factors reinforcing the expression and the repetition of trauma.





- Socioeconomic hardship, poverty, acute changes and chronic distress, psychological and physical violence, abuse in childhood, sexual abuse and other sexual violence and ethnic, religious and racial persecution.
- Pandemic risks and social and physical consequences.
- Exposure to war and other civil or military conflicts, to natural disasters, to climate changes, to severe acute illness, work-related disorders.

We must be proactive in serving migrant and refugees' communities by creating strong refugee health partnership, engaging refugee communities and organizations by serving them, thus achieving equity, inclusivity and collective resilience (Al Rousan & Harvard, 2020). The creative components of a psychotherapeutic group or of a community such as sensibility and flexibility, adaptation and reciprocal trust lead not only to healthy neurodevelopment and social positive learning but also to a somatic relaxing feedback. Acceptance, containing, holding, equal human rights, transcultural dialogue, corrective emotional experience are some of the group therapeutic factors that help in this direction.

Communities, serving and working on factors like democracy, permissiveness, communalism and realistic confrontation create a safe environment for expression, a place for psychological recovery and psychosocial intervention in a process of change, of adaptation to the dynamics of the situation and to the new encounter with self. Participating in the community's daily tasks helps members to feel it as their community and bring to light many interpersonal problems (Kennard, 1988, p. 25).

In the context of the culture of empathy, immigrants must not be faced as terrorists. It is important to increase contacts between local and refugee population, to establish a trans-cultural dialogue and trans-religion discussion with improve to the conflict prevention and to the resolution architecture. International support must be provided for the refugees who must be welcomed. Violence and criminality emerged by the anti-immigrant movements must be faced and avoided by the creation of a safe container, like a boat of hope. The individual mental life is a container of personal experience and meaning: partly conscious but affected by both the personal unconscious and the collective unconscious.



The absence of the baby's container releases high levels of cortisol that might expose the child to a never ending somatic and psychic pain. Early experiences and exposures during the prenatal period and the first 2–3 years after birth are likely to have as much or greater influence on later health (Shonkoff, 2020). With good-enough parents and care-givers the baby's anxiety is contained and cortisol level is quickly reduced. The cortisol level in baby's brain is linked with its demands and with the presence or absence of a container, like an analogue of the regulation of the cortisol level of a traumatized member after joining a psychotherapeutic group.

The contribution of art as a bridge of solidarity and a boundless plan to share.

The transgenerational exploration of trauma can be achieved inside a group since group matrix contains the biological heritage of its members and their culture. This heritage can be also expressed into dreams, through symbols and colors (paintings and designs).

The symptom is difficult to communicate and disconnects mind from body, the traumatized member from other people: here is focused on the damaged part of the self, expressed as “speechless terror” of trauma, as the experience of being at a “loss for words” when the heart silently screams in pain. This conflict involves deep emotions, pain and memories that are difficult to verbalize, thus becoming repressed and later an organic symptom. When people relive their traumatic experiences, the frontal lobe becomes impaired and they have trouble thinking and speaking.

According to Tucker (2011), traumatized refugees lose interpersonally the ability to trust others, thus losing the ability to symbolize on an interpersonal level in groups. Rebuilding the ability to trust inside a group is a laborious, painful and slow process. Traumatic flashbacks into the reflective therapeutic space can be intrusive thus leading to a loss of symbolic thinking (Garland, 1998) and the loss of the ability to distinguish between present and past traumatic experiences which were traumatic (Tucker, 2011).

The artistic process in groups facilitates the expression or modification of ambiguous feelings and conflicts. The physical nature of making art can contribute to a release and relief of tension, sometimes expressed by somatic symptoms in the context of a psychosomatic disorder. It is also the ability to



touch the inner self of a human being, his feelings, his emotions and moods according to his culture. Art therapy contributes in the establishment of a therapeutic relation by the communication through art while the group functions as a “good-enough mother” that holds and contains without punishing as a tough social structure. In the “here and now” process, it is characterized by a spontaneous discharge of stress and deliberates from fear and inhibition that is provoking internal pain. Psychotherapy is a culture-bound, a self-reflexive practice that examines its own prejudices, ideology and will to power (Kareem & Littlewood, 2000).

Art groups differ from verbal groups in having a structure which can give time and space for this tension to be explored.

Fantasy usually functions as an internal source that facilitates the adaptation to the environment's need where everyone gradually feels safe, free and unique. The healing capacity of the artistic process is realized by the release of unconscious material which, when consciously assimilated, can lead to the release of creative potential for the individual. The image invested with personal material can stand in for the maker, who is otherwise secreted behind a “false self”; when it is seen in therapy, it allows the maker to feel seen indirectly; these archaic longings are often so well hidden that the only other indication of their existence is expressed by deviant behavior or a psychosomatic disorder. Stress and guilt are transferred to the object, not to the person, and deep desires can be accepted and satisfied.

Art helps by the participation of both brain hemispheres by which repression can be treated as a defense ego mechanism (Joseph, 1996) and which serves in the establishment of a therapeutic relationship even when the deeper understanding of feelings and of thoughts of their internal world is not successfully achieved, by the mind-to-mind communication, the creation of both brain and social synapses in parallel to social contacts.

While creating art objects brain is mirrored on them, brain functions as a social context where individuals withdraw internally to express themselves in the space of their choice. Separateness and individuality, periods of painful conscious or unconscious struggles, can be experienced by art products differently in the group, by different ways of mirroring leading to the development of aspects like self as subject, self as object or self with object. The art objects provide a record of the group's “exploration” and also form the basis of the group's common culture. Every member is different and unique, but experience is recognized through



the sharing of art objects that give a concrete product for discussion and for developing the imaginary level of communication.

CONCLUSION

Living in the COVID-19 era, life demands from all of us to cope with new ways of living, of social distancing, of specific behavior in order to survive. Life seems no longer what it seemed before since we are asked to stay at home and to stay safe. We are educated for a new code of socializing, new ways of working from distance, new guidelines to avoid group gathering with serious consequences in brain plasticity.

We are invited to forget the past way of living, past habits, past traditions and to enter in a new way of living based on isolation. The enemy is not visible, we cannot feel him, taste him or listen to him, it is like a shadow following us and threatening us.

But how far away is the expression of this new trauma from the psychological migration trauma? Both traumas are characterized by the loss of the ability to symbolize, to trust others, by isolation and suspicion.

Every new trauma of humanity emerges past traumas on a personal and collective basis like a shadow. Traumatic flashbacks, sleep disorders, insomnia, panic attacks, anxiety, lack of trust, incapability to form positive relationships, feelings of helplessness and despair are common feelings and symptoms expressed now by all citizens worldwide, other time expressed as psychological, physical or organic trauma and trauma related situations. Trauma affects, in a devastating way, our mental and psychosomatic health and our physical homeostasis that makes us susceptible to other organic and mental maladies and disorders. Group psychotherapeutic factors like acceptance, containing, holding, gratitude, equal human rights, trans-cultural and trans-religion contacts remain strong parameters contributing to the transformation of trauma.

Solidarity and compassion in the healing of trauma are common mechanisms worldwide facing traumatic reality no matter our language, religion and beliefs.

The creation of a transcultural and trans-religion matrix and culture in various therapeutic groups will help in the better understanding of the emotions and problems emerged by forced migration.



A bridge of solidarity and belonging could be shaped only when there is a focus to the refugees' cultural and social experiences and not to the point of view of the Western society. In order to better approach and heal the migration trauma in the frame of a supportive psychotherapeutic group or community, it is essential to first understand the refugees' feelings of belonging, emotions, and concerns (Mahmud, 2021) in forced migration and in different places and phases of their life and to explore the "difference between":

- The culture, their habits and the way of living before their journey,
- The impact of the traumatic reason that forced them to leave their country,
- Multiple losses and changes during their journey and all related emotions and frustration in relation to their expectations,
- Feelings of disturbed hope and belonging where they are forced to start a new life,
- Vision for their "trip beyond fear": inside the group trauma, stigma, exclusion and social isolation that migration provokes can be explored and treated.

On a social level, the refugees who traditionally are excluded from leadership and decision-making roles must be reactivated by in depth interviews in the fields of refugee's resettlement, arts and culture and humanitarian acts, by their participation in seminars, groups for support and advice for better care of their mental care and well-being. They must find again their active role in our society. In the new era of the COVID-19 trauma of humanity emerges and recreates past traumas on a personal and collective basis. In this era, we search for the response of the loneliness neurons and for the impact of human loneliness on the brain, resulting from the social distancing. Human loneliness, although can release hormones that help our immune system to function normally, is related with depression, anxiety, drug abuse and alcoholism, and loneliness is considered as a traumatic experience. The emerging devastating socioeconomic crisis that is likely to unfold for years is resulting as a first consequence from the COVID-19 era and is adding another threat in our current life, so similar with the one of the migration traumas, where there is no time and space for mourning of multiple losses of our lives.



In addition, any form of social power based solely on difference of race, color of skin, gender, religion or social and political affiliations is anti-humanity and in the widest sense *anti-sanity* (Kareem & Littlewood, 2000).

Recovery cannot occur in isolation but within the context of relationships, in connection with other people where the ability to trust is slowly and carefully promoted (Herman, 1992). The group could serve as a starting point for all members to consider and feel what is named in Greek as *isotimia*, that is the social factor which brings equal chances to all people, for a better way of living in the future.

Culture is a human invention. Culture is everything that we transform in us from nature and for us is what we were given and with which we are always creating even more under conditions and dynamics of political, financial and social instability.

The creation of the “cultural brain” inside the psychotherapeutic group and later in society will make members focus on their ability to survive, to communicate, and to keep on dreaming and creating.

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What's in the Pita?

I will describe my experience with a Palestinian facilitator as a participant in an intervention organized by the Israeli Institute of Group Analysis (IIGA), an association that promotes dialogue between Jews and Arabs in northern Israel. The methodology used was the “sandwich model” developed by Dr. Robi Friedman and implemented by the IIGA in various communities. I will speak about the complexity of working with a partner, when each of the facilitators represented one of the conflict-involved groups.



INTRODUCTION

I joined the Israeli Institute of Group Analysis (IIGA) team and we all drove to the city of Nazareth, which is a two-and-a-half-hour drive from my home in both directions. Marching Together for a Future (Marching for a Common Future) has contacted an IIGA member who lives in northern Israel and is active in various forums looking for a solution to the Jewish–Palestinian conflict. The IIGA invited all its members to participate in this project for which three monthly meetings were planned: each meeting took place with the same joint facilitators and with the same small group of participants. In the first session, we focused mainly on getting to know the members of each other because not all the facilitators—especially the Muslim, Druze and Christian facilitators—were members of the IIGA.

I met one of the facilitators, Crescent Rohana, with whom I enjoyed a very friendly relationship, characterized mainly by mutual respect and mutual appreciation. In making eye contact with each other we became joint facilitators of one of the groups. I knew that our personal connection and the mutual respect we showed for each other would help us deal with the complex issues that our group would throw at us. I had no idea how we would work together as co-facilitators. It was the first time we ever collaborated. Before embarking on this journey, we knew we had to set a number of technical rules: (a) group management must be dynamic, (b) in our joint work we must support each other, (c) our cooperation and reciprocity support must be reflected in the process but also in the opportunity. Encourage uploading. It should be emphasized here that mine and Sahar's political views are not identical, that we see many things differently, but that our mutual respect allows us to deal with the conflict and our different views without fears on the part of one of us, a spirit of mutual appreciation.

The sandwich model

The sandwich model was developed by Dr. Robi Friedman (2018; 2020), and has already earned for itself many applications. The model has been applied, *inter alia*, in the kibbutz where I live. The reason I asked



a team from the IIGA to conduct a focused intervention was the crisis situation in which my community found itself at the time. As a group analyst, I believed that the process and the facilitators would be able to effectively deal with the internal crisis and enable the kibbutz to overcome its crisis and continue growing; as things turned out, I was proven right (I will write on another occasion about the sandwich model process as it was applied at kibbutz Nitzanim).

The sandwich model we used in each of these three sessions, which lasted about four and a half hours, contains the following components: (a) opening remarks and a general explanation to all participants from the leaders of the large group (or plenary session) and from the chairmen of the IIGA (15 min), (b) division into small groups (90 min) (c) coffee break (10 min), (d) large group (90 min), (e) detail into small groups (60 min), (f) closing remarks by the facilitators of the large group before all participants (10 min).

The meetings were to take place on Sundays. Since the first is a working day in Israel, all those who came to the first meeting—facilitators and participants alike—will have to devote considerable time and commit to participating in the three meetings. The large group had three facilitators—two men and a woman. Two of the facilitators were Jews and the third was an Arab. The groups were organized in advance so that in each of the small groups, half of the participants would be Jews and the other half Arabs. The organizers were also forced to take into account additional parameters, such as age, gender, level of education and place of residence of each participant, in order to allow for optimal dispersal and as large a balance as possible of the subgroups involved in the conflict.

Description of the process

All of the meetings were held in Beit Hapraklit, the northern district branch of the Israel Bar Association, in Nazareth. Sahar and I entered the room that had been assigned to us—the library—where, in the rear part of the room, 10 chairs had been arranged in a tight circle. As experienced group facilitators, we tried to find 12 seats (for the 10 participants and for the two facilitators) that were identical or nearly identical, and we arranged them in a circle. We then stood at the library entrance in order to





welcome the participants registered in our group, who entered the room after hearing the opening remarks that were delivered to all the participants. There was a pleasant tension in the room: although the participants who arrived had expectations and positive approaches, they were nervous and brought with them their experiences from previous discourse groups.

We opened the discussion in our small group with an explanation that Sahar provided in Hebrew as to what would happen in the 90 min lying ahead of the group: “You are welcome to share with the members of this group your thoughts on any subject, to comment on what will be said here, to ask questions, and to suggest associations. Whatever will be said here will be confidential from our standpoint, and we ask all of you to keep everything that is discussed here strictly confidential. This is Yafi Shpirer, and my name is Sahar Rouhani. We are the facilitators of this small group and together we will conduct the meetings today and at the next two meetings”.

The only rules for conducting the group that we discussed before meeting the participants were: (a) to try to avoid a situation where one of the facilitators speaks immediately after the other, (b) if one of the facilitators is “stuck” vis-à-vis a participant, to try to get out of this situation by “opening up the subject for discussion by the entire group”. We were not using any particularly special strategy for this population; we did not see any need for differential thinking due to the type of population. Instead, we concentrated on how we would work together in this first meeting.

The first meeting of our small group consisted mainly of declaratory monologues; there was little interaction—or what we, in group analysis, according to the John Schlapobersky (2018) technique, call dialogue or discourse.

We found ourselves time after time inviting the participants to respond to one another, but, for the most part, we asked them to talk about themselves. The monologues reminded us of speeches delivered in town squares. It took me a while to understand who the participants in our group were. One of the Jewish participants was Amir (not his real name). As one of the project initiators, it was important for him that the group saw him as someone who was “in favor of...” who was committed, who was open. However, as things turned out, he simply became one of the “lecturers”. The frustration we felt at the start of the meeting dissipated when one of the Arab women in our group began to speak in





broken Hebrew about her feelings of inferiority in this forum, because her Hebrew was not very good, but mainly because the reality of her life and the lives of her pupils (she is a kindergarten teacher) was nowhere near the comfortable life of the Jewish participants. Her words touched the hearts of everyone present, especially the Jewish participants, who experienced feelings of embarrassment and guilt. Immediately after she finished speaking, a Jewish woman in the group who was a member of one of the kibbutzim in the area began to mobilize, thinking in terms of how to find donations in order to solve the problem of that neglected rural kindergarten class. This was the initial expression of the patronizing behavior of the Jewish participants, who meant well, while displaying not only very different worldviews but also a very deep stratum in the complex relationship between Jews and Arabs in Israel.

Getting back to the metaphor of the sandwich—in this case, the pita (or flat bread that is so characteristic of Middle Eastern cuisine)—I felt that, in this first meeting of our small group, a decision would have to be made as to how to cut the pita and how to open it so that it would not tear and so that it would be able to hold all of its contents—both liquid and solid—without coming apart. As in every group process, I could sense the brittleness of this first session: the hesitancy, the need to examine everything, and, especially, the lack of total confidence. For some of the participants, Amir's presence in our tiny group signaled an additional source of authority; in fact, from time to time, he acted as if he were also one of the facilitators. He repeatedly talked about the need for drawing up a covenant that would contain everything said in the group. As facilitators, Sahar and I were not particularly in favor of the idea of drafting a covenant as a concrete outcome of the entire process. The idea of a covenant surprised both of us; however, we regarded the declaration of drafting it as the legitimate expectation of one of the group members. Amir wanted a covenant, and there were others who wanted to be heard, who wanted someone who would hear them out and listen to them and their descriptions of their distress as Arabs living in Israel.

Before the coffee break and joining the large group, I explained—this time, it was my turn to assume the role of explicator—what was going to happen in the next few hours: first, there would be the plenary session with the large group, when the members of our small group would be asked to share their thoughts, feelings and doubts; then we would go



back to our small group, returning to this room for another 45 min in order to work out what questions that arose in the wake of the plenary session; finally, we would return to the plenary session for the closing part of this first encounter.

Then we set off for the plenary session with the large group. Both Sahar and I were anxious about what would be discussed in the large group. Although we did not sit side by side, we maintained steady eye contact that enabled us to exchange glances, especially after one of the members of our small group spoke. The first meeting of the large group was very difficult. As in any large group, people began shouting, “we can’t hear anything!” and then people began shouting, “who is managing this discussion?” In the midst of the shouting, a photographer was trying to get good angles for camera shots that would be able to document this formative event. No one asked whether all the participants in the large group agreed to be photographed, although, in the world of group meetings, people are customarily asked whether they agree to have their picture taken. I saw Sahar mumbling something about the photographing, and I immediately understood that she was definitely not happy about the entire photography issue. After she made a few mild requests, I requested, in a loud voice and in an unequivocal manner, that the photographing immediately cease, because it was not clear whether everyone agreed to be photographed. The pictures that were taken would be enough to document the event, and now we requested that the large group continue its proceedings without any further external interference. Here as well, the members of our small group could see how Sahar and I worked well together, even within the context of the large group.

Within a short period of time, the Arab men seized control of two of the conference important resources, time and place, and they “captured” a disproportionate share of the time allotted for speechmaking and a disproportionate share of space through the way they stood in the auditorium. In response, the Jewish women quickly expressed their opposition to the angry and inequalitarian male discourse, and some of these women were rather aggressive in their reactions, in contrast with the Arab women, who either said nothing or expressed views supporting the Arab men, who were being verbally attacked. One of the Arab women defended Faisal, demanding that he be allowed to continue to talk about the budget.



What happened and why we were not sufficiently prepared

The opening was conducted by a Jewish woman, who explained that, in a large group, all the participants were invited to share their thoughts, dreams, and feelings, and to address the entire plenary meeting. She told the participants that, since there were approximately 150 people attending the plenary meeting, they should have to speak in a loud voice. The first speakers were Arab men who simply lectured with pathos and with commendable passion. Initially, they delivered lengthy speeches and showed no intention of developing a dialogue or a colloquy. The Jewish men who managed to join the “lecture series” were individuals with a military background (former high-ranking army officers) or members of the association executive committee. After more than half an hour, an Arab woman managed to become one of the speakers. When she began to talk, she changed the atmosphere because her words were full of emotion, primarily pain and frustration at the personal and national levels. However, she was quickly silenced by one of the Arab male speakers, who said, “we have work to do, we have to move forward, and it is important that we not look back at what happened in the past”.

Of the facilitators of the large group, only the two Jewish facilitators—a man and a woman—were present. The woman stopped speaking altogether, giving the impression that she was not merely silent, but that she was simply paralyzed. The male facilitator tried to explain that the various speakers were being asked to make their remarks brief and focused, rather than to deliver speeches; however, his efforts proved unsuccessful.

A significant change occurred when one of the Arab women spoke about her pain “without any reference to politics”—about her own pain and about her family’s pain. Then, a Jewish man stood up and spoke about the need for mutual recognition of pain. Turning around and speaking directly to the young Arab woman, he said, “I am sorry about your pain, and I apologize for it. I recognize your pain, which exists alongside my own pain. My pain does not cancel yours. Apparently, until we manage to contain the pain of all sides, we will never be able to begin anything”. All those present in the large group stopped talking. There was a mood of collective emotion, bereft of any *pathos* or any cold authoritarianism, and the members of the younger generation were, thus, able to talk in the large group, at the expense of the formal leadership. The facilitators of the large group only infrequently



intervened, which is what happens in large groups in this part of the world. If there were two or three interventions, they were conciliatory in tone, paving the way for, and attempting to invite, discourse. It was my impression that most of the discourse was about pain that was being felt at the time, about the fear of a deterioration in neighborly relations, and about discrimination and the present state of neglect.

The plenary session with the large group ended, and we returned to the library with the members of our small group. Sahar and I were ready to accept what the participants would say and we were prepared to continue working together. What happened was to be expected: the members of our group, who had been active during the convening of the large group, did not understand the nature of this entity—the large group—and asked for explanations. They wanted to know why an orderly discussion was not conducted in the large group with a moderator responsible for giving the floor to the various speakers, for subsequently summing up the discussion, and for presenting the conclusions arising from the discussion. The members of our group did not understand the rationale behind the large group and were very upset at what occurred during its convening. Without coordinating with one another beforehand, Sahar and I understood that, at the present moment, in light of the anxiety that had arisen, it was important that we offer a brief explanation and that we enable the group members to process what they heard in the large group. Sahar explained in a concise form what happens in the large group and then I spoke about the differences between what transpired in the large group and the kind of discussion to which they were accustomed. The two of us focused on presenting what was heard at the convening of the large group and on enabling the members of our small group to process the pain and humiliation that many of them experienced when they emerged from the meeting of the large group. The humiliation was expressed in such comments as “we weren’t allowed to say everything that was on our mind”, “it was very disorganized”, and “it was difficult to hear what people were saying! Why wasn’t a microphone used?”.

The “Sahar-Yafi duo” was perceived by the members of our small group as an ideal team: A Jew and an Arab, two strong women, who know how to speak in emotional tones within the context of the small group, who know how—in both the small group and the large group—to silence in an authoritative manner authoritarian men who feel very comfortable in the



hierarchic world that is reflected from every corner of the magnificent building in which we were meeting, but who, nonetheless, met with antagonism in their confrontation with the spirit of intervention that the IIGA brings to this project. There were many such collisions, whether conscious or not, in this first meeting, which ended after four and a half hours of work.

The team of facilitators stayed for another hour of work in order to process the first meeting. This part of the meeting, in which all the facilitators participate, is a vital component of the process: we process in a mixed group the materials that are “thrown” at us, both overtly and covertly. I imagined that the journey back to my home, a drive of one to two hours, with all this material in my head, would be a painful experience for me. In our group processing, we tried to identify our points of blindness as facilitators of small groups, and, quite naturally, we tried to understand why the facilitators of both the small groups and the large group felt that, in the large group, speakers were paralyzed and there was no possibility of carrying out any form of interventional action. The initial guideline was that we, the facilitators of the small groups, were staff participants, and that we must invite the members of our groups to participate but not to conduct the discussion or take control of it. Whatever brief comments we made that expressed our views were immediately erased by the participants in the small groups.

For a short while, I had the impression that the members of the small groups were, in effect, saying to all of us: “right now, you are not conducting the discussion or intervening; we will show you how things are run here”. The vociferous opposition voiced by the participants surprised some of us. When I traveled home, I felt considerable anger over the hegemonic male domination of the proceedings, and I was extremely displeased with the organization “leadership,” in view of the fact that most of the female participants were silenced. Although—in addition to Sahar and myself, the facilitators—there were very strong women in our small group, there was a silencing of the female voices that was very familiar to us: the image of women who “know their place”. We continued to process the gender-related aspects of the first meeting and also the emotional elements that arose primarily in the large group: the need for the mutual recognition of pain, the patronizing attitude of Israeli Jews, and, at the same time, the embarrassment of those speakers who dared to actually touch the pain and to talk about the guilt of the occupiers.



Three weeks later, when we returned, we were organized in a somewhat different fashion: we made sure that our small group would include the same participants who were in the first meeting; this venture did not prove so successful in all of the groups, because some of the participants did not show up again. The third Arab facilitator of the large group arrived and joined the other two facilitators of the large group. In the opening session, in the auditorium, a much more detailed explanation was given concerning the style of work in the large group, and that explanation was provided by the female facilitator, who was, therefore, recognized as the ultimate source of authority for this second meeting. This time the members of the organization male leadership were not on stage, so that it was much clearer that this would not be a conference full of speeches. In order to bring about this change, a lot of field work was conducted with the leadership, whose members found it difficult to move away from their familiar, customary role on stage and to, instead, be seated among the members of the audience, like all participants.

We set off for our work with our small group; however, our small group was different. The Arab women who had attended the first meeting and who had vividly represented the meeting's social and emotional aspects did not arrive for the second meeting; instead, two "new" young Arab men appeared, one of whom behaved very strangely. This individual expressed an "anti-Arab" position and support for the Zionist entity, and his comments were disorganized, almost chaotic. The group accepted him, allowing him to voice his pain as an anomaly within one of Israel minority groups; actually, he was introducing a new voice, the voice of young Israeli Arabs whose personal and national identities are very unclear and do not correspond with the definitions that the majority recognizes. One of the Jewish women expressed her frustration and disappointment over the fact that the Arab women had not returned. She had begun a process vis-à-vis these women, a process of making a connection and understanding how closer, authentic and relevant ties could be formed; however, the Arab women had not returned. Her words aroused anxiety among the members of the group: some of them thought that what had happened in the previous meeting had deterred these Arab women, while others simply ignored their absence, a reaction that aroused anxiety among some of the participants. Feelings of guilt resurfaced among the Jewish participants.



When we managed to restore to the group feelings that could be shared by all of the participants, so that we could continue with the processing and move beyond the axis of guilt and accusations, the young man with the turbulent emotions began to calm down.

As our first session with the small group drew to a close, Sahar and I prepared the participants for the large group. We encouraged all of them to voice their opinions and to share their feelings and thoughts in general and in the wake of this first session. The reason for our encouragement of the group members was our understanding that they needed a more detailed form of mediation. We briefly explained what the large group represented, and why it seemed to be so disorganized; in other words, why it is not conducted like the meeting of an organization where someone gives the floor to the various speakers and decides who will speak, for how long, and when. In addition, Sahar and I tried to soothe the nerves of those who had attended the large group meeting three weeks before and to encourage the new members to muster their courage and speak up, whether their remarks expressed a different view or did not dovetail with what the majority thought.

The large group was conducted in a different manner in comparison with what had transpired three weeks earlier: There were less speeches, more women spoke up, and we, facilitators, were more involved as participants. The large group proceedings were managed by the three facilitators, who interrupted the proceedings more frequently with more detailed explanations as to the need for brief comments, which are more suitable for this type of group work. In the closure that took place in the small group, there was a general mood of satisfaction: The participants noted that they were happier with the large group, as opposed to the previous meeting three weeks earlier. They even expressed a certain degree of *esprit de corps* when one of the members of their own small group spoke, because they felt that the comments were particularly important to them.

Almost five weeks elapsed between the second and the third and last meeting—a longer interval than what had been originally planned. Although it was thought that the reason was a number of organizational problems, it is possible that the cause was not purely organizational. We came to the third meeting well prepared to embrace all of the feelings of satisfaction over the successful outcome, but also to deal with the disappointment over the fact that “we have still not drafted a covenant!”



CONCLUSION

The entire process occurred in the large group, which was very interesting because there was room for a continuation of the work that had already been done, while we were also in the beginning phase of the farewells. References were made to both the process and the content. The participants' responses were directed mainly at the process and at the way they dealt with the manner in which we carried out our work as facilitators with a group analysis orientation. The manner of our work was very different from what they had encountered previously, namely, meetings that were more rigidly controlled, where they felt that they were being directed, where there was less democracy, to borrow a term from civics.

The process is designed in a manner that enables the content and the process to blend with one another and to reinforce one another. I enjoyed every moment, especially those moments when my Arab Muslim partner enabled me to keep my distance or draw closer when it was convenient for both of us and when she enabled the two of us to continue working together with the entire process, despite the ideological gaps between us that coexist with many other identities that we both share. We succeeded in remaining committed to our mission without canceling one another and in understanding more clearly the unresolved conflict between her Palestinian Muslim identity and my Israeli Jewish one.

Sahar and I both understand that it is possible to live and create together, even when there is an absence of total agreement, and to do so in a spirit of mutual respect and esteem. Furthermore, the two of us recognize the fact that the pain that we each feel does not negate the other's pain, that we can draw near to one another or distance ourselves from one another in accordance with our capacities and needs, and that this drawing near and distancing will not "dismantle" the future or destroy the existence of either one of us. This was a formative experience for all—both the facilitators and the participants.

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Mapping the Unconscious with the Social Dreaming Matrix: A Psychosocial Program with Refugees and Immigrants

“Mapping the Unconscious” is a research, psychological assistance program for refugees and immigrants in Italy. The use of the social dream matrix (SDM) is the first element of this program. The program combines the three ethnologies—inspired by Marc Augé’s studies—as structural elements and the theory of “anthropopoiesis of dreams” by Domenico Agresta. Using imaginary in groups (dream icons) and the study of a foundation myth can help the researcher to find the correlation between anthropological elements, unconscious dynamics in contexts and historical events.



INTRODUCTION

With regard to migration, Italy is a country which is strongly influenced by its morphology and geographical position. Today it is a natural border of the European Union with a daily involvement in the recovery and management of hundreds of migrants coming from the Mediterranean migration routes.

In the last few years, this phenomenon has increased considerably, causing complex internal and external political conditions in countries bordering the Mediterranean area. This situation has undoubtedly been worsened by the war in Syria and even more by the political instability in Libya brought about by the fall of the dictator Gaddafi. One hundred and twenty-three thousand refugees arrived in Europe in 2019 compared with 141,000 and 185,000 who crossed the Mediterranean in 2018 and 2017, respectively.

This condition has forced the various governments of the countries involved to take measures to receive the migrants. The migrants arriving on the Italian coasts are mainly from Libya, but, contrary to what is commonly thought, they are not Libyan citizens but rather migrants from many different countries. Recent data suggests they are from Bangladesh, Algeria, Mali, Nigeria, Sudan and generally all the countries that make up sub-Saharan Africa. Unfortunately, the people reach Libya only after a long journey that may take years after facing dramatic conditions like the crossing of the Sahara Desert. Many of them are forced to suddenly leave their villages without anything after witnessing acts of violence and the deaths of their loved ones.

Unfortunately, the fall of the Gaddafi regime led to great political instability in which various factions seized control of parts of the territory. The country fell into a deep crisis and a civil war. The foreigners were subjected to terrible acts of racism and were deprived of their jobs. Those migrants who continued to arrive in Libya found themselves stuck in a trap without any means of escape. The various “governments” have taken advantage of this situation to use the foreign immigrants as goods of exchange. The governments of European countries and many groups of people smugglers have exploited the business provided by the desire of the migrants to cross the sea and begin a new life. In this condition, thousands of people have been crammed into improvised boats and abandoned off the Libyan coast in the knowledge that they would be saved by nongovernmental organizations (NGOs) or European governments.



Who receives them and how

The countries of Europe have, both out of obligation and choice, taken responsibility for the migratory pressure. Obviously much depends on the policies and ideologies of the countries as well as their geographical position. In any case, Italy, being a border country, has always been a destination for many migratory routes. In addition, an international regulation signed in 2003 by the members of the European Union known as the “Dublin regulation” has had a great influence on European immigration as it limits responsibility for the migrants to the first country in which they arrive. This decision has made it difficult to redirect migratory flows within Europe and, as a consequence, reception policies have also had to be modified.

The migrant who reaches the Italian coast after being picked up and saved by the Italian authorities has to make a formal “request for political asylum”. This procedure gives him the status of “asylum seeker”, a condition that will remain until he receives an answer from the state commission, which will examine his request. If on the one hand this status allows him to have access to the rights of a citizen, on the other it puts him into a kind of bureaucratic “limbo” which can be very frustrating.

The request does not always have a positive outcome as it depends on various factors. If the answer is positive, the applicant assumes the status of “refugee”, receiving a stay permit and the possibility of living a normal life in the host country. However, this condition is only one of many possibilities. There are various forms of international protection with different types of rights and duration of status.

The condition which undoubtedly makes the difference is the duration of the stay permit which, in the most favorable of cases, has a duration of 5 years with the possibility of renewals, but there are also forms of protection that offer 2 year permits or even 1 year. It may take the commission years to reach a decision and, during this time, migrants stay in reception centers while awaiting the outcome. The waiting for an answer, social isolation, economic difficulties and the absence of normal living conditions for an individual complicate the psychological state of the migrant.

What is the United Nations High Commissioner for Refugees (UNHCR)?

The UNHCR, the agency of the United Nations for refugees, organizes various systems of protection using ministerial institutional networks. It



controls and monitors the reception of asylum applicants. Migrants who arrive in Italy are inserted in reception centers like the Centri di Accoglienza Straordinaria (CAS), which accommodate the refugees for the time needed to solve problems regarding the application for asylum and to carry out the various medical visits. After an initial period in a CAS, the applicant is sent to a system of protection for asylum seekers and refugees center (SPRAR).

These centers provide not only accommodation but also a series of services that have as their general objective the integration and protection of the migrant and are a direct emanation of the UNHCR. This supervision imposes on these institutions the obligation to offer a high-quality service, which responds, above all, to psychosocial needs. In Italy, the SPRARs are set up by municipalities situated throughout the national territory and often provide an excellent service.

The social dreaming matrix (SDM) project has been implemented in a context which already provides a series of high-quality services. The migrants who belong to the SPRAR are defined as “beneficiaries” since they benefit from a number of services like legal support, educational support, health support, cultural mediation, document support, professional tutoring, social support and, obviously, psychological assistance.

Project beneficiary has many rights, as well as the support of numerous professionals who collaborate with the final aim of integrating the beneficiary. The SPRAR project in which we carried out our work is situated in Roseto degli Abruzzi, a seaside town on the Adriatic coast. At the time of our activity there, the SPRAR had 50 beneficiaries who stayed in “apartment groups” located in the town.

The organization of the residences has this characteristic because it aims to concentrate on the independence of the people and their integration into the territory. The migrants are guests of the SPRAR for a limited period of time that varies according to legal and bureaucratic conditions. On average, the time allowed in the system of the municipality of Roseto degli Abruzzi is one year, at the end of which the beneficiary has to provide for himself completely. Therefore, he goes from a condition of total assistance to one of total autonomy. The end of the project is thus a key date for the migrant as it is when he receives the outcome of the commission and his documents.

During their stay at the SPRAR centers, the beneficiaries take part in integration projects, like theatre workshops and voluntary work for the community. Such initiatives are purely voluntary. Not all the guests of the centers are allowed to work. This possibility depends on their documents.



The guests receive board and lodging and a small subsidy for personal expenses called “pocket money”, which, on average, amounts to €1.50 a day. Any expenses related to health, job seeking, training or activities useful for integration are covered by the project. It is clearly a very valid model of integration and reception which, however, presents problems in the absence of psychological and educational work and an empathic relationship.

The frustrations linked to the total absence of freedom are converted into somatization or often acts of aggression. Conditions which can be described as depressive are very common. Any kind of technical inconvenience, which may occur in the management of the migrant’s stay (delays in receiving pocket money, differences in the submission of documents, food quality etc.), may become a reason for feelings of anguish and agitation.

The project “mapping the unconscious” with the SDM: memory and trauma

Social dreaming matrix is a psychological device which transforms the thinking of dreams using free associations, thematic amplification and systemic thinking in order to create links, find connections and liberate/generate new thinking. Social dreaming was discovered by G. Lawrence in the 1980s when he was the director of the Tavistock Institute of Human Relations in London. Using his knowledge of history and anthropology, Lawrence hypothesized that it was possible to dream socially (considering the dream a manifestation of the social environment in which we live) and that dreams could illuminate the shared social context (in the same way that Freud hypothesized that dreams, during an analysis, can illuminate the unconscious life of the individual who describes them).

“Mapping the unconscious” is a research and psychological assistance program for refugees and immigrants in Italy. The use of the SDM is the first element of this program. The program follows three levels of observation and action: the three ethnologies—inspired by Marc Augé’s (2014) studies as structural elements of this plan to put the idea that we are working in a non-place—while we are creating new anthropological places and the theory of “anthropopoiesis of dreams” (Agresta, 2015) as a methodology to find a correlation between building and being born twice: in body and in imaginary (dreams icons). We can say that human beings use their culture to be built, raising the question of human models to be adopted in their lives and in their societies.



The experience of the SDM in the field of ethnopschoanalysis research and in particular in the field of history and immigration has enabled us to make important observations on how the matrix takes shape, what it is and what it represents in terms of the collective unconscious and hence the social unconscious. The matrix creates culture: it is, thus, foundation element. From the rite or ritual, from the dream to the building of an identity and culture, the step is short.

It is a fact that every social group builds and creates rites and myths of origin with the aim of establishing, representing and controlling its own identity. The rite of passage represents the possibility for a people/group/individual to define its own anthropopoiesis and the way for the researcher to define its anthropopoietic function. As a consequence, the study of a rite of passage within a social group is nothing more than the question which we ask ourselves when faced with the close and well-defined relationship of the impossibility to respond to the problem of life and death, except in terms of the study of the group, the psychosomatic dimension and hence the imaginary collective. The study was carried out using the device of the SDM and the identification of oneiric icons as phantasmatic constituents and, therefore, constitutive basis for the collective with regard to its relationship with the territory and its history (Agresta, 2019). In these terms, the SDM is presented as a tool which enables us to identify the foundation myth of a culture.

We assume that the migration and the voyage from the origin to a new world is a rite of passage. At the same time, we can suppose that this process is very traumatic and between trauma and memory we can think that we are working with a subtle difference. When could we talk this *memory* and when *trauma*?

Here we have three reports of dreams from the first SDM that show and explain the dynamic and the correlation between trauma and memory. These reports are from refugees during a matrix session:

I dreamt that I was swimming in a very big ocean with no directions or ideas. I tried to call my parents but it was impossible. I cried until I was near the coast and I became a baby.

I was in a dark place even if I was feeling better. I knew that I was in other place, not my town, but my body was without power, energy. I felt my self like a machine not a human body.

I felt like when I was child. But suddenly I was in a big dark room and I



couldn't see anyone. I was sure there were people but when I moved around the room, I only saw bodies that I didn't know. For me it is the same when someone dies in my town. when I was child, I was really scared to this those bodies. I felt the same.

Reflecting on this, Freud distinguished between memory and trauma: memory is the mnestic trace of an event; the trauma consists in the investment of this trace which transforms the trace into an etiological event. It is only as a memory that the event becomes a base for etiological elaboration, since it is on the mnestic trace that the psychic or the drive excitement flows. Ultimately it is thus the pulsion which transforms the memory into a trauma (Menarini, 2007).

The SDM community can observe many levels of existence thanks to the shared field and the free associations. The shared unconscious of the social dreaming is the way to analyze the constitution of a myth. Bion (1992) talked about a myth as a “non-common sense” in relation with the problem of thought and the creation and its function for a group. In this case, Bion starts with the conception of the α function that makes it possible to transform the sensory impression into suitable material into the dream thought. Bion advances the hypothesis that the thought of the dream so transformed, we can say represented, is used as a material to produce, at social level, the myths. The myth, therefore, has to do with a community aspect that derives from shared sensory experiences. Sensory experiences that draw on unconscious elements that, as such, have not undergone a transformation and, therefore, following the Bionian construction, they have not found a “sense” yet. In our opinion, SDM reveals this function on the basis of the hypothesis that the dream is formed in its potential for social action blew it up into the drama of the rite of passage.

The matrix is a container, but it is, above all, a psychosensorial experience with an affective base. It enables us to represent “ideal anthropological structures”—or to facilitate the representability of them—and so, in terms of group processes, give maximum facilitation to the capacity of the collective to dream and then to accesses into knowledge.

With an SDM, we are able to describe and stay on the threshold—liminality space like in a rite of passage—and observe the process of building and making memory. In this sense, according to Bion (1992):

To what extent is myth-making an essential function of α ? It may be that the sense





impression has to be transformed to make it suitable material for dream-thought, but that it is the function of dream-thought to use the material put at its disposal by α , the units of dream-thoughts so to speak, in order to produce myths. Myths must be defined; they must be communicable and have some of the qualities of common-sense—one might call them “common non-sense”. (p. 192)

Using SDM means creating a space suitable for the observation of those dimensions because the dream brings the levels together.

Dreams, icons and free associations

We feel it is interesting to refer to a concept of Marshall Sahlins (1985) regarding the possibility of observing intersubjective aspects that are present and observable in history like the “structure of the conjuncture”. Sahlins states that the “structure of the conjuncture” is the practical creation of the cultural categories in a specific historical context, expressed by the action of historical agents, including the microsociology in which they interact. The author sustains that this modality of observation is fixed neither on the question of de facto social organization nor on the so-called underlying “social structure”. In this way, according to Sahlins, we will avoid the risk, implicit in our ingenuous phenomenology of symbolic action, of seeing only a more attractive version of the ancient contrast between the individual and society.

In fact, the matrix is a container and a psychosensorial experience with an affective basis which is determined in the formation of a structure/process and which can be defined as the building of meanings by means of dreams. This is our basis with reference to what we have defined as the “structure of the conjuncture”. This dimension is linked to the process and to the structural dimension in itself and for itself, an aspect equally fundamental in understanding how the dream is also a system of thought.

In our work with the matrix with immigrants and refugees, in fact, we observed that, although the temporality perceived is *ad infinitum*, it is built through connections and by means of free associations between dreams, as a transgenerational current historical present. In this sense, the matrix is expressed as a double foundation myth (Agresta, 2019). The past, the present and the future are now visible in the images as an iconic dimension of the dream or in the hyper theme of the matrix itself. The work is to build ego identity starting from a no-place to a new place. It is a work about biography and to biological one.



Now if the dream is in the matrix and the matrix contains the dream, it goes without saying that, in the collective mental experience, they are the same thing. In fact, the dream and the matrix now create a transgenerational, and hence transformative, space.

Here we have the reports of three other dreams shared by the participants in the last session:

I was walking outside my little town and I saw my family and my friends try to call me to stay with them. I was scared because I had to go.

I dreamt about my wife who had been dead for 11 years. We talked and chatted about this and that and she asked me how the children were. I felt happy and at a certain point she said to me: "Wake up, you have to go". I felt anxious and didn't want to wake up.

My family said good bye and I saw all of them like shadows. Soon my body became cold and I was sure that I had to come back to speak with them and try to help their life. It was hard because I had only a little bag with me and not a big one.

The matrix is now a place in the mind which is formed by a concept through which the collective proposes a work hypothesis. It is a dream too. This is an observable dimension during the associative work performed by the host as it is a "dimension without space and time (transpersonal)" which, through the saturation of the matrix, appears as if it were photographed in a segment made visible in a mental dimension, which is nothing more than the dream itself.

The phenomenon refers to what René Kaës (1976) defined in terms of group forms of the psychic, which, in turn, are manifested in the experience that the subject has of himself with regard to his personal identity. It is the notion of group foundation of the identity.

In work with the SDM, the matrix assumes the function of patterns and unsaturated experience and is, thus, transformative. The interpretation would make the work saturated, regarding how the work is carried out in this original device. The translation and the passage between the visible and the invisible—the semiophoric function of the dream—comes from the creation of the theme in the matrix, in its form and identification of oneiric icons, that is of mental objects which express the psychic intentionality of dreamers. The



icons, as mental events, are potential symbols.

As the matrix by means of dreams is a complex representation which is repeated and modified in time (Agresta, 2015)—even though it keeps its foundation dimension at the basis of its creative process—the network of dreams and its multiverse of meanings is a complex construction of social thought. The dream in the matrix is, thus, an attempt to free a personal and/or collective history from the ties of an unavoidable future, that is, from symptomatological predestination. This is why SDM represents ideal models of action and observation of the social environment in terms of conflict or in terms of a work hypothesis. The associative link is a representation of a possible semantic field to be transformed in terms of the solution of conflicts in the culture of belonging. In this way, the matrix observes its very creation of the identity.

Working on free association we build a semantic dimension of the dream and, therefore, translate into a cultural object a new dimension which puts the visible in touch with the invisible (semiophore).

Therefore, there is a real collective dimension and a creative-symbolic one. In the model proposed here, the concept of the icon explains in what sense foundation aspects of the mind are constituents of culture. The icon is a sacred structure since it represents the creative dimension of the collective soul, which expresses the sacred mystery of origins. The oneiric icon is a mental form or a visual content of an image, which expresses a pure metaphorical potential and, like the artistic icon, is an allegory implying the psychic realities hidden behind sensitive appearances. These psychic appearances are nothing more than manifestations of the unconscious, the mediator between the mind and the body, the single and the group and the mind and culture. A peculiarity of the icon is its capacity to visually build the object or psychological theme it represents and originates from since it possesses an identical nature and substance. Being a construction, it has a symbolopoietic nature and is thus a transformative dimension which manifests itself, in the here and now of the group, thanks to the constellation of the associative contents (Giovannini & Menarini, 2004). Therefore, we mean an “anthropopoiesis of the dream”, a psychic and corporeal process by which the symbolized body becomes a narrative and builder of thoughts (Agresta, 2015). The function of the icon, identifiable in the matrix, enables us to study these phenomena of the mind. The icon connects the body to the context then to history.

According to Menarini (2007), we can say that, in other words, a temporal dimension (history–memory) takes the form of a spatial dimension





(body–instinct) and then it is characterized as a trauma: an etiological happening that no longer belongs to the consciousness, but to the unconscious. The symbol takes the symbolic form that hides something painful no longer placed in history, because history is sunken in the unconscious.

Thanks to iconic meanings, the mental field of the collective becomes a matrix of mental models. As an expression of the unconscious and the repressed, the dream thus becomes a place of signification of events in formation, proposing, through iconic images, elements to understand what is in being, something which does not exist yet but that finds in icons a space from which it can develop and express itself.

The work we had with refugees and immigrants was like a rite of passage; a new place where different cultures started to share and to explore new possibilities through the dreams. The dream provides the link between the conscious observer (embedded in his or her system of language and culture) and the unknown, spontaneously organizing system of thinking that is the human ecological niche. This ecological niche is the background of the feelings present in the dreams.

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CHAPTER 8

Navigating Along Cultural Diversities, Group Work and Group Psychotherapy in Egypt

Egypt is a major migration player in the Middle East and North Africa regions and in the global south. The Nile River has invited diverse patterns of immigration that include significant numbers of humanitarian arrivals. Different forms of cultural exchanges and group work were continuously enhanced throughout the Egyptian history. Moreover, working in groups is very much appreciated in the two main religions in Egypt: The Egyptian monastery group system and the *Kuttab* were two forms of system and group work in Christianity and Islam respectively. In this chapter, the origin and contemporary practices of group psychotherapy in Egypt are introduced. Group psychotherapy began in the country as early as the 1960s. It was supported and enhanced by the foundation of the Egyptian Association for Group Therapies and Processes in 2011. The chapter also discusses the diversities in group work in Egypt, with an overview of the group practices in different contexts of diversities that took place in recent years, leading to significant developments. Different forms of training and practices of group psychotherapy in the country are introduced, and group forms and structures, group dynamics, cultural influences, and leadership styles are addressed.





INTRODUCTION

Groups and Egyptian history

The Egyptian history has deeply ingrained diversities that impacted the history of the country and the world. The Nile River in Egypt was a magnet that brought an early migrating population to the river valley (5000 BC); it was connecting Nubia and Ethiopia through trading across the Nile and cultural exchange took place (Mauelian, 2014). The river provided essential factors for structured group work in building ancient large-scale projects that took decades to finish. Huge limestones were cut and carried on boats through the Nile for building the pyramids of Giza (2500 BC). This project is considered the earliest large-scale example of group work in ancient history. Tomb excavations of pyramid builders showed clear evidence that the great pyramid alone needed 400,000 workers. The workforce was divided into small groups of 10,000 each, who worked in 3-month shifts. Each pyramid took between 20 and 30 years to finish. For that reason, small villages for workers were built around the Nile as it was the source of food, communication, transportation, and life (Hawass, 2006).

Working in groups is very much appreciated in both Islam and Christianity, the two main religions in Egypt. In Islam, for instance, the Friday Goma prayer (literally means collective or gathering) is of great religious importance and is traditionally followed by family gatherings from all generations. The Kuttab was a traditional way of learning about religion in groups for Sunni Muslims, where students gathered to learn from a high-ranking Imam/tutor. These learning groups gathered immigrants from all over Egypt and attracted immigrant students from other Islamic countries as well. The cultural knowledge exchange that took place in these learning groups shaped the Islamic thinking and its development. For instance, the great Imam Shafi'i, founder of one of the main Sunni schools of thought, used to live in Iraq and was famous for adopting rigid Islamic opinions. After immigrating to Egypt (814 AD) and encountering other scholars and diverse society, he adapted much more flexible opinions (Haddad, 2007).

As in other traditional churches, Liturgical prayers used to take place in the Coptic Orthodox Church. It is to be noted that *liturgical* in Greek means the work of the people. Christian monasticism was an individualized system that was





founded around the year 300 AD by Antonius the Great. In 348 AD in Upper Egypt, Pachomius the Great transformed the individualized system into a group system mainly based on professional categorization. Egypt then became a center for monastic life for many centuries and was a center of attraction to immigrant hermits and monks coming to the country from different places of the world; they used to stay in Egyptian monasteries for years. The monastery group system was later brought to different parts of the world when those hermits and monks returned to their home countries and established new monastic orders, inspired by the monastic rules and system of Egypt (Cain, 2016). For instance, Benedict of Nursia (547 AD) established the first monastic order in Europe after his stay in Egypt. Unsurprisingly, this adopted group system was one of the main underlying factors that protected the European civilization from collapse under Barbarism in the sixth Century. In the last century, the Copts adopted Sunday schools and group activities, where children are divided into groups and attend classes led by one or more teacher(s). Such groups have proven to be one reason for the flourishing and cohesion of the Coptic community inside and outside Egypt (Gabra, 2008).

Modern migration in Egypt

Egypt is a major migration player in the Middle East and North Africa region and in the global south. The country has witnessed diverse patterns of immigration that include significant numbers of humanitarian arrivals. Along the years, Egypt has been a destination and a host for Arab, African and other immigrants (Norman, 2016). The Egyptian community has not only been affected by external but also by internal migration. Following the 1952 revolution, many Egyptians moved from rural areas to big cities, changing the demographics of the country. Cairo alone, which at the turn of the 20th century had 590,000 residents, now struggles to meet the needs of some 20 million people in the greater metropolitan area (CAPMAS, 2017).

Contemporary practices of group psychotherapy in Egypt

Group psychotherapy began in Egypt as early as the 1960s when Yehia Rakhawy and Mohamed Shaalan, the cofounders of group therapy, started therapeutic groups at Cairo University. While Shaalan, having had his training in the USA, adopted some techniques from Western practices, Rakhawy's practice was based on T-group experiences with his colleagues from the mental health



field, including Shaalan himself. Since then, group psychotherapy has been part of the routine training of the staff of the Psychiatry Department at Cairo University (Rakhawy et al., 2015). At the turn of the 21st century, Refaat Mahfouz extended Y. T. Rakhawy's model to Upper Egypt, integrating more theoretical and clinical elements to suit the Upper Egyptian subculture. Mahfouz initiated a positive wave in Upper Egypt that later on resonated in different areas of the country. The work of Mahfouz was crowned by the introduction of the four-step model in the field of group psychotherapy practice in Egypt (Mahfouz et al., 2015).

In 2011, Mona Rakhawy and Refaat Mahfouz founded the Egyptian Association for Group Therapies and Processes (EAGT) with a view to gathering the various sources of group psychotherapy practice in Egypt into a common pool and furthering the field in the country and beyond. In 2012, the collaboration with the International Association for Group Psychotherapy and Group Processes (IAGP) began, and IAGP introduced the bimonthly IAGP educational project in Egypt. Initiated by Jorge Burmeister, and coordinated by Catherina Mela. The two main practices on which IAGP was founded—group analysis and psychodrama—were introduced into the Egyptian community. The training was a landmark among many subsequent projects that EAGT facilitated in its role as an umbrella institution furthering group psychotherapy practices in the region.

Diversities on the stage

In 2015, the Egyptian society was still dealing with the aftermath of the revolution, and the country was going through a time of political and social adjustment. At this time, the EAGT introduced the first structured training in psychodrama, designed by Jorge Burmeister, Spain/Switzerland, conducted by international psychodrama trainers from different European countries (Jorge Burmeister, Spain/Switzerland; Maurizio Gasseau, Italy; Eva Fahlstrom Borg, Sweden; Marcia Karp, UK; and Natacha Navarro, Spain) and coordinated by myself, Mona Rakhawy, along with my distinguished colleagues, Noha Sabry and Mohamed Taha. Participants were selected based on the inclusion of participants from different professional, sociocultural and geographical backgrounds.

The constitution of the group reflected the historical cultural diversity that exists in the Egyptian society. Geographically, the group included participants from a number of Egyptian governorates, in addition to those from Cairo. It was highly symbolic that the training was held in Cairo, as it is a





city that has historically embraced internal migration. The training group was bimonthly conducted in Rakhawy Hospital in Cairo. It included trainees of both mental health background and nonmental health fields, such as education, corporate and others. Simply put, this training was—more or less—a miniature representation of the different fabrics Egyptian society brought together.

It was interesting to observe that, although ensuring diversity was a main goal in the selection process, it soon became evident that the group comprised a number of explicit and implicit polarities that shaped its dynamics along the training process. Polarities included males and females, Muslims and Christians, liberals, and conservatives, the older and the younger generations, and mental health and nonmental health professionals. Also influencing the process were additional inherited perspectives such as that of the colonized versus the colonizer or the insider versus the outsider. From where I stood, the presence of Western trainers carried one more stream of polarization: the expertise and the advanced knowledge and skills of the West on the one hand, and the inherited perception of the outsider/colonizer on the other.

As expected, migration topped the list of themes to be addressed. While some participants expressed the fear associated with leaving one's homeland, others revived a constructive attitude towards the challenges and pain of migration, such as one Nubian participant's memorable words about the power of moving on.

The world outside the training context/group was brought onto the psychodrama stage in many different forms. Examples of psychological phenomena that were tackled along the training process and emphasized the impact of diversity in the group (trainers and trainees) included dependency and independence, security and insecurity, dominance and submission, and many more. The psychodrama stage was a host that invited a unique expression of the inherited conflictual tendencies between the different orientations, values, loyalties and professional backgrounds, highlighting the richness of this specific encounter.

The style of leadership in this group differed from that documented in previous group therapy practice in the country. According to Taha et al. (2008), group-leading in Egypt is inclined towards the active/directive/prescriptive style, which was explained in light of the expanded role of the father/leader deeply rooted in the Egyptian social unconscious, the operational concept and aim of psychotherapy, and the general awareness, knowledge, and educational level among Egyptians. In our psychodrama training, alongside the director's active leadership there was a flexible nondirective style of leadership present, especially outside the psychodrama



scene. Although this added to the dynamic complexity in the group, it shed good light on the need to be aware of the potential benefits of incorporating what looks to be untraditional, with respect to one's own inherited roots and tendencies.

In addition to being an important milestone for group therapy in Egypt, this training was a model of group work with diversities on different levels. Psychodrama was the common language used to bring together cultural, social and political schemas. The power of the group and that of psychodrama were elicited when old traumata were revisited and handled in the group setting. Despite the many challenges encountered throughout the training, the positive outcome makes it an example of how group practice and training can be a powerful tool and starting point for finding resemblances and connecting seemingly dissimilar individuals. Having gained new skills, experiences and awareness through this training, each of the participants returned to his/her circles to customize and apply, according to his/her own professional background and clientele's needs.

Diversity, arts and creativity

“By using arts in groups, we can see differences, but may frequently see similarities”. This is how Anni Cree, an English creative arts psychotherapist who has lived and worked in Egypt from 2012 to 2019, started to describe her work with different groups in Egypt. In the following section, Anni describes her experience of working with diversities in two different countries as follows (Anni Cree, Personal Communication, 2020).

I have been working with groups in Canada and in Egypt, using Arts Psychotherapy that highlights the universality of human beings. Working with the creative arts can create a similar attitude. In group work, I have witnessed similarities in so many areas. For example, the complex family dynamics associated with divorced couples are quite universal regardless of the cultural background. Group members can be shocked and surprised to realize that we share the same complex dynamics. In art, we can look at paintings from people with different cultural backgrounds and find no differences only to realize that we are revisiting Carl Jung's archetypes of the collective unconscious.

My work with Syrian refugees in Egypt was to a large degree comparable to my work with Native Americans in Canada around ten years earlier. The only difference was that, upon my arrival with the Native Americans, I received a very frightening transference at the beginning of my work. They saw me as a big enemy, a



threat, especially coming from England, which had been one of several countries that destroyed and controlled the Native American culture. What healed that was working with the arts, which brought us together through our universality and creativity. By the end of my two working years in a Native Healing Lodge in Quebec, they did not want me to leave. The last words they said to me in Canada were, “Don’t forget us. We are Spiritual people”. In Egypt, perhaps because of the lack of historical sensitivities, I was welcomed by hearts eager to receive and much warmth and encouragement.

After having reached an understanding of where the group of Syrian refugees in Egypt came from and what they experienced, it became clear that it was all about their feelings of loneliness, longing for homes, loss, grief, and pain. Sadly, these refugees can face an attitude of “We don’t want those people” because others forget that humans can be similar in so many ways. The anger expressed by a group of eleven Syrian men through arts was the same as that which I had witnessed in my work with Native Americans in Quebec who mourned the loss of their culture. Both were angry about the enforced loss of their cultures, homes and way of life. Art is a wonderful medium to convey this. I had never worked with culturally different people before in their own countries and it was helpful and a privilege to have the opportunity to live amongst them and become involved with the culture that I worked in.

In Egypt, I also worked in a Coptic church in Cairo that offered counselling services to the community, and I was invited to facilitate a group for sexually abused women. The church also organized Creative Arts Groups for Syrian refugees who liked to do art therapy. Before introducing the arts, we started by sharing in the group and each member was invited to participate; there was always a translator in the session. The group would frequently include up to 50 women who were then divided into smaller subgroups for sharing. We also had a time for singing, which brought the group together at the beginning or at the end of the session. The group context/work helped them understand that they were not alone in their painful memories and loss of leaving loved ones behind in their homeland. Many women brought along their children, who always participated in the artwork. Out of this unique experience, I learned how many similarities we share in our human suffering.

I have always had a spiritual perspective to my life. The two cultures I worked with (Egyptian and Native American) recognize this spirituality. Embracing cultural diversity around how personal and societal philosophies interoperate created shared meaning and helped us find our similarities. There was a deep connection at this level.



In her closing remarks, Anni emphasized how deeply her experience as a group facilitator has enriched her life by the cultural diversity of the group: “To be part of these cultures has changed my life. I am not the same person. What I realize today is how privileged I was to have the opportunity to live amongst these cultures, to integrate my work into cultures that were unknown to me and learn about their healing processes and work inclusively towards the integration of humanity as a whole” (Anni Cree, Personal Communication, 2020).

Groups with refugees

In addition to the five million refugees and asylum seekers that Egypt hosts from more than 60 countries, there are 209,393 asylum applications for Egypt (August 2019).

Groups within multilayered psychosocial support

Another practice related to working with refugees is the Psychosocial Services and Training Institute in Cairo (PSTIC) founded by Dr. Nancy Baron, director in 2009. The PSTIC was established to serve as an urban model specific to its situation. Its team of psychosocial workers—also refugees—span 10 nationalities. Psychosocial work done at PSTIC is interdisciplinary that provides psychosocial care within a multiple layer system of intervention, linking between social services, psychological support and psychiatric care.

In her interview, Baron summarizes the basic premise behind PSTIC by explaining that fulfilling the refugees’ basic needs (food, shelter, employment, access to health care, education) would help alleviate their emotional distress. After covering the basic needs, the next layer of intervention is family and community support. The PSTIC works closely with the refugee communities in Egypt to raise awareness and to help people integrate with the community. The PSTIC is a 24-hour service whose workers have no offices as they are based inside their communities. The psychosocial team is trained in the areas of problem-solving, conflict mediation and counseling.

Group work lies in the more specialized range of services that PSTIC offers. It runs a number of different group practices for groups of different nationalities. Shomoa Sabry, trainer at PSTIC, stated that she was training her team to start group counseling when the COVID-19 situation began. Support



groups could not be taken to Zoom like most other counseling services for confidentiality issues, lack of needed technology and the cost of the internet. So, different WhatsApp groups were conducted: (a) mixed gender for an Oromo speaking Ethiopian community; (b) mothers; (c) couples, especially domestic violence cases associated with COVID-19; (d) youth; and (e) males only group. Some groups had a limited number, while others included up to 70 members. Recruitment starts with the counselors' referral. Selection of group members relies on matching the need of the client with the theme and the objectives of the group. The group can include different nationalities, but members should speak one language. In an orientation phone session, counselors explain everything about the group then add participants to the group after obtaining their consent. Different themes are tackled each week.

Groups meet on WhatsApp once a week. Each group starts with an introductory session where the group regulations are introduced and highlighted. Groups usually start anonymously; members are able to open up later; some write their names; others prefer to remain anonymous. Members vote on the topic for the upcoming session, for which the leader prepares material. The session starts by the group leader giving a brief presentation about the chosen topic, and the floor is then open for discussion through sharing personal experiences and opinions. Questions are then raised and support is provided. The leader gives tips along the session and makes a conclusion at the end. Group members then share their input via text or audio messages depending on each member's preference. Sharing is optional. Participants can continue sharing and discussing the topic on the group until the following week.

Nancy Baron ended her talk by emphasizing how a special group can evolve and be successful using available resources at times of crisis. "This is the evolution of groups in COVID-19 time; it is about how you change the way you run the group", she noted.

Accordance in the world of refugees

Dealing with refugees in a specialized organizational framework, Ahmed Allah Mustafa, a clinical psychologist and mental health officer at Doctors of the World (Egypt Mission, 2017–2020), summarizes the group activities with refugees below. Mustafa has focused on cultural diversity as a transforming factor on two axes: multicultural versus monocultural groups and the intervention method.





Multicultural versus monocultural groups

In terms of their formation, the groups differed based on multiple factors, foremost of which was the means of recruitment. Some of the groups were formed through the initiative of local communities that focused mainly on a specific nationality, while others were formed through civil societies working with several nationalities. Based on this, there were two main forms of groups: monocultural and multicultural groups.

Monocultural groups included groups in which the therapist was of the same nationality as the participants, which allowed him/her to build on cultural similarity in facilitating the group. This category also included groups in which all participants were of one nationality and the therapist was of another. In this case, the therapist was given an opportunity to be exposed to and learn about that nationality to understand the culture in some depth, thereby informing the therapist's facilitation of the group. However, in some cases the different culture and dialect constitute an obstacle in communication between therapist and participants. For instance, while all group members understand verbal or nonverbal cues used by one other, the therapist may need a longer time to perceive, understand and respond to such cues. If not well-handled, this may later affect the dynamic of the group in the sense that the therapist may remain an outsider. In an attempt to connect with the group or understand unclear communication, the therapist's input may interfere with the therapeutic process.

In multicultural groups, the therapist needs to be aware of the potential for integration and openness between group members of multiple nationalities throughout the session. In this manner, each member's participation can be seen as an opportunity to discover the universality of being human, transcending all sociocultural barriers, including skin color, dialect, or nationality.

The intervention method

Following are some forms of interventions that were used in the timeframe mentioned above.

- Group based on behavioral therapy.
- Self-care skills group.
- Emotional support group.



- The four-step model group.
- Self-disclosure group.

Generally speaking, the depth of interventions varied according to cultural, epistemic and skill diversity among individuals and groups. Females were more committed and involved compared to males, who needed more concise services, perhaps due to financial burdens. The stigma of mental illness prevented many from participating in groups; they opted for individual sessions instead.

Throughout the different interventions and contexts, Mustafa monitored a number of phenomena.

- Being aware of and talking about one's emotions varies between different cultures, as well as between individuals of the same culture. Certain tribes have a great difficulty in discovering, perceiving, and expressing emotions. Handling this in a therapeutic group must respect the cultural context, in addition to other factors such as the underlying dynamics as well as the interactions in a specific group setting.
- The vast majority of the refugees live in difficult circumstances, with some families unable to meet their basic everyday needs. However, Mustafa believes that fulfilling the refugees' needs for understanding, acceptance, appreciation and respect helped them to cope with their diminished quality of life. He emphasized that this was true for all groups regardless of nationality, culture or context of intervention.
- Different customs and traditions (intercultural and/or intracultural) may impact the group dynamics by either anchoring or transcending cultural boundaries. In many cases such differences may be considered a violation of propriety, interfering with communication and sometimes impacting the therapeutic process. For example, making eye contact is frowned upon amongst the Sudanese and Eritreans in general, irrespective of gender. For these nationalities, making eye contact essentially means, "I am looking for a defect in you". In terms of therapy, however, lack of eye contact may sometimes interfere with visual communication in the group, which may impact the use of nonverbal expressions including mirroring, self-affirmation, etc. At the same time, there are sometimes healthy behaviors that penetrate the barriers of nationality, culture and religion, such as the saying "peace and mercy", which is a greeting used by



many nationalities, regardless of their religion, in light of the knowledge that this is an abbreviation of the Muslim greeting “May God’s peace, mercy and blessings be upon you”.

Mustafa referred to Yalom’s words “We’re all in the same boat” to highlight the importance of acknowledging universality as a main therapeutic factor when working with diverse groups. In his experience, accepting diversity and transcending differences have been essential factors in overcoming personal and group challenges. On the other hand, denying diversity and stressing differences interfered with the group process. Mustafa concluded by saying, “Cultural diversity enriches, teaches and changes us, while cultural barriers prevent healthy human connection”.

It is without doubt that each of the steps and processes mentioned in this chapter has had its effect on all those involved, building considerable momentum that positively resonated—and is still resonating—in and beyond the Egyptian society. Although this chapter has attempted to include significant examples of the work being done at the group level and its effects, what we encounter in our everyday life reflects much more clearly the resonance of such work. One example of this is the work of Andrew Gorgy, a volunteer in the first EAGT conference on group psychotherapy and group processes and the first Regional IAGP conference in Africa held in Egypt in 2014. Andrew was a very active and energetic volunteer. He participated in the group work during the conference and also acted in the play that was presented in the closing of the conference. Inspired by all this, Andrew built on his experience to gather Coptic immigrants in Canada, where he immigrated a few years after the conference to present theatre plays as part of the activities of the Coptic church in Montreal. In addition, Andrew’s elaboration on the many other activities of the Coptic church in Canada emphasized the power of group work that can expand a sense of togetherness, belongingness, and support in a diverse world.

Given the way we live today, mental health issues have become a fact of life. Displacements and migration are constantly reshaping communities. As a result, diversity is bound to exist in any human gathering regardless of how homogeneous it seems.

As we live in one world, it is essential to consider the group a healing factor, if not the primary one. Different forms of group work have proven effectiveness that ranges from fulfilling basic needs to building major projects able to survive for thousands of years, as in the case of the Egyptian Pyramids. Reviewing the role of groups throughout Egyptian history highlights the significance of all efforts that





further group psychotherapy and group processes. Yehia Rakhawy expressed this best when he said:

Groups would protect the human race from extinction. So, instead of survival of the fittest, one who devours others, survival belongs to one who knows how to cooperate with others. This is the role of group psychotherapy and group processes” (Y.T. Rakhawy, personal communication, July 5, 2011).

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CHAPTER 9

The Experiences of Group Analyst in the Multicultural and Transcultural Aspects of Group Psychotherapy

The global society on the move separates us from any framework to which we are accustomed in clinical assessments and with which we would find it easier to cope with. In this chapter, I have tried to present the mosaic of different experiences during my professional psychiatric activity and exchange of experiences within framework of other cultures, intercultural contacts, and transcultural thinking. The concept of the transpersonal would represent a basic sharing of human experiences. Looking from the multicultural and transcultural aspects of group psychotherapy the concepts of the group matrix and the transpersonal help to overcome the division between the individual and the group.





INTRODUCTION

The cultural patterns of the ambience in which cultural aspects of expressing physiological and pathophysiological, psychological and pathopsychological outcomes of brain functions in their interrelationships take place, we are actually talking about cultural aspects of expressions of the individual, groups or large groups that significantly affect the language of communication that is understandable to people from the same cultural circle, while it may seem bizarre to others, sometimes perhaps almost incomprehensible. The group as a mirror of individual characteristics, expectations, and as a transmitter of cultural patterns through generations proves to be a suitable medium both for the treatment of various psychopathological aberrations and for research.

Through examples from my own experiences, I will describe areas of transcultural psychiatry in which it was not only needed professional assessment but the understanding of different cultural expressions, or different mentalities.

Projective identification and totalitarian culture

Estonia in history of the 20th century was significantly marked by the Second World War (WWII), the German Nazi occupation and the Soviet “liberation”. In order to better understand social and political atmosphere of Soviet Estonia, it should be remembered especially the Stalinist terror.

We met our colleagues from Estonia at the Inter-University Center in Dubrovnik, Croatia. A colleague and I were invited to Estonia to present group work organized according to group analytic principles. In Soviet times, which were approaching the end, cities looked desolate and gloomy and people sad, resigned and expecting change. Lectures and experiential work with groups were held in the former Soviet military base on the shores of the Gulf of Finland, which was covered by snow and ice. The ambience looked idyllic and the participants were interested.

The end of the last session of group experiential work was approaching. Many expressed regret that the work with them passed so quickly and that they could not see a way to continue it in the foreseeable future. There was a long,



anxious silence in the group. Wanting to underline the separation difficulties and frustrated desire to learn something new, I said that it seems actually as if there were no way out of that situation in that group. For the exit, I used an Estonian word that was written on illuminated tables, meaning “emergency exit”. The group showed me a completely unexpected reaction. The participants were looking petrified. Because some members of the group did not trust their knowledge of English language, they started to talk in their mother tongue, and someone was translating. After my intervention that I am not speaking Estonian, there appeared some anxious voices in the sense that I understood Estonian and that it could be spread outside the group what they were saying when describing Soviet rule in Estonia. Fear and mistrust reigned in the group. It didn’t help either that I pointed out to the illuminated signs above the door. Still, we had some time to turn the “emergency exit” into a small game at the expense of the fear and mistrust inherent for the totalitarian regime and which deeply permeated members of the group.

A culture of shame and multiple dissociations

From the standpoint of Western culture that in its ethical and affective aspect is recognized as a culture of guilt, my sojourn in Japan and participation in different groups in various psychiatric institutions of Western and Japanese traditional style was an encounter with the culture of shame. In one of these encounters, both cultures showed themselves in a parallel way. It was about the supervision of the therapeutic teams of the special hospital for patients suffering from psychosis (Urlić & Britvić, 2007).

Professional activities in that hospital were organized in such a way that the teams, in addition to peer supervision, had one supervision a day per month with a supervisor coming from outside the institution. It was a small hospital with the capacity of about 30 patients, with sufficient number of doctors, nurses, social workers and other staff. It looked very nice and was part of a network of special hospitals for patients with “difficult diagnoses”.

Immediately after entering the building and after ritual deep bows with the hosts, a young white woman approached me. She spoke to me in French, saying her name was Danielle. She complained that her mother had placed her in an institution against her will. She claimed it was a mistake and that she knew I could help her because I was speaking French. Trying to find a



way out of that situation in her language I told her that I would, after meeting of the therapeutic community, try to help her. When we entered the meeting room where the therapeutic community was to take place, she sat in the corner behind my back and followed me with her gaze, giving the impression that she did not care about anyone else or for the content of the meeting.

I was the first psychiatrist from Europe to visit that hospital as a guest supervisor. The meeting began with the leader of the therapeutic community introducing me. There was a heavy silence that no incentive intervention could break. Faces and posture of patients were showing the high level of tension and readiness to explode of discontent. The whole atmosphere was imbued with something threatening, which caused leading conductors of the meeting to show their insecurity. Then, one patient stood up and said with an angry voice that the day before the patient was admitted and that was given so many medicaments that he was incapable neither to move nor to speak. Their families do not pay expensive price for them to be treated that way. They want to protest, they want to be heard, they want to have the feeling that they are treated as human beings... After a short silence, he added that they are convinced that in Europe the attitude and behavior towards patients is much better and different. When he sat down, other patients remained tense and silent, and the leader's efforts to give some explanations were futile. The patients stared at me waiting for what I would say.

I first introduced myself and explained my interest in working with patients suffering from psychotic disorders, and our approach to treatment. Then a conversation developed with a number of patients trying to make it possible for everyone to talk about the difficulties and frustrations they experience in relationships. During discussion and exchange of experiences, the atmosphere had become softer and my understanding of their position more complete, health issues were accepted by both patients and meeting facilitators/conductors. Only Danielle's tense attitude remained unchanged, symbolizing, among other things, the hermetic, intrinsic causes of the crisis in that institution.

The meeting of the hospital's therapeutic community continued with the supervision with the group of psychiatrists, psychologists and social workers, followed by the supervision of nurses. It turned out that a group of nurses was divided into two subgroups, i.e., the younger and older members, and that the whole group was frustrated by the organizational situation. The younger nurses complained that they were not trusted and that they were not respected enough by the head nurse and the older nurses. Relying on the support of my presence



they could verbally express themselves rather than showing long-lasting, but quiet, resistances which were growing on both sides. Some kind of parallel process was developing between the group of psychiatrists, psychologists, and social workers on the one side and nursing staff on the other, and the absence of their external supervisor for two consecutive months resulted in deepening of disagreements. At a joint meeting with the nursing staff confrontation could take place step by step with the contents that were open in the supervision process. Numerous projections, negations, rationalizations, projective identifications, but also projective counter identifications were noticed, which could be recognized in that professional and transcultural framework (Nitsun, 1996). The tension at the beginning of each supervisory group could be expressed, clarified and understood. The whole atmosphere changed and the last supervision ended with the hospital staff interest in the “European style” of professional work compared to the “American” one they had been acquainted during their training. The group has become a supervisor not only at the peer level, but in general in relation to all professional staff.

Danielle’s situation remained unresolved. During the break, I talked to her. She insisted that we speak French, and only after being convinced that we should not exclude anyone from our conversation she allowed me to switch to English. One more hermetic language was overcome in that setting, and she remained satisfied with the treatment plan and the planned cooperation with her mother. Her farewell kiss was a sign that the aggressive, anti-group forces had been processed and elaborated, at least partially.

In the environment of mentally very disturbed patients, countertransference reactions of the therapists/therapeutic teams proved to be very disturbed, and this type of staff reaction increased the vulnerability of patients. Such an understanding of the dynamics of individuals and groups, and institution as a group in itself, was most often shown when the supervisor was steadily focused on something “special”, i.e., to reconstruction of interactions among supervisees themselves and them and their patients, within the institution as a whole.

Large groups in Lithuania and Vojvodina

The large group, the one with 50 participants or more, conveys the spirit of a group of people or of large gatherings in which one individual



is lost, disappears, loses his/her own identity and reactions, and drowns in mood fluctuations of the majority. By being left without one's identity, the possibility of individually expressing one's own experience is lost, except on a very regressive level. Yet, manifest regression does not mean that even latent contents, collectively unconscious, socially and culturally repressed cannot express themselves through mirroring in a large group. In such cases it could be mirrored the absence of some topics, issues, experiences, or that certain emotional charge is suppressed from conscious to preconscious and the unconscious, where these contents "get lost" in the "social unconscious" (Hopper, 2003).

I will give an example of my experience from Lithuania. Vilnius is a beautiful city with rich layers of cultural heritage. Nothing of what might apply to Jews was outlined in the dynamics of the large group on the congress. After a sequence of associations to the turbulent, once glorious and often tragic Lithuanian history, a long silence ensued. One famous English psychiatrist of Jewish descent wondered how it was possible that events in the city and state, so marked by Jewish presence until the WWII, whose tragic fate was well-known to all, didn't find place in our group. The silence continued, and then some spoke in a low voice about persecutions, murders, the disappearance of an entire important ethnic group. The topic of guilt was directed towards the Nazis and then towards the Bolsheviks in the whole state of Lithuania. I had the experience that the generation that, with these dramatic events, was not directly connected but only through their parents and grandparents had the attitude like to something even more difficult than the unresolved feelings of guilt related to the specific genocidal activities of previous generations. This emotional and moral burden was related to the sense of shame that was spreading and affecting the present generations as well.

But, no one mentioned shame. Where did the idea of shame come from? In my countertransference experience during conducting the large group appeared image from an earlier symposium held in Subotica, in Vojvodina, where I was invited to conduct the median group in Croatian language, in the important cultural center of the traditionally multiethnic and multicultural Vojvodina which is part of the republic of Serbia. The work was conducted in Serbian, Croatian and Hungarian languages. In a large group, silence was indicating one very important absence—the absence of a topic of Jews and their destiny during the WWII. A certain sense of



guilt, i.e., the intense uneasiness of that multiethnic cultural community in Vojvodina in relation to the Jews was projected onto the Nazi occupation, because that was a historic fact. In a very intimate, human way, individuals have expressed a sense of shame that happened in their culture and what was declared unworthy for the quality of tolerance in that culture. Then, the large group thought of another ethnic question, the expulsion of *Volksdeutscher* members, of the German ethnic group and their frequent identification with the Nazi regime, who were in retaliation for the terrible trauma after the WWII expelled from Vojvodina. The participants of the large group at that stage were imbued with strong anxiety, and in addition to questions about the guilt of the “ordinary” man, there was a sense of shame due to the traumatic violation of the culture of ethnic and religious tolerance that Vojvodina citizens are proud of for centuries.

This tension in the conductor’s countertransference revealed, among other things, the unresolved feelings of guilt and shame of many participants due to human suffering that could neither be prevented nor the wounds managed to heal. The dynamics of the large group showed that society faced difficult feelings in a way that suppressed the confrontation and processing of that part of their history. At the same time, the issue of avoiding dealing with painful and humiliating traumas through repression, projection and other mechanisms that remove hard-to-bear traumas from the current perspective has proven to be a transcultural phenomenon that has emerged in other cultures as well.

Germans, Jews and Palestinians: is culture of forgiveness and reconciliation possible?

Professional gatherings in the field of psychiatry and psychology are often organized in such a way as to offer one’s own emotional experience, as well as the possibility of extended discussion on a certain topic. The topic of Germans and Jews has dominated for many years among the various themes with which international group work had to grapple with. Accepting the knowledge that every human being has the capacity to be both a victim and a perpetrator of atrocities has influenced a gradually more accurate definition of this dramatic part of the 20th century history in relation to Germans who were enthusiastic about Nazi ideology, especially regarding persecutions of





Jews. A frequent response to the mentioning of this topic was emphasis of the responsibility of Jews in confrontation with Palestinians in the current conflict that has been going on for decades. Accusations and interpretations are repeated, taking on an almost ritual character, and rising above the level of linear confrontation was always very difficult to achieve.

In an effort to overcome direct conflict of charges, interpretations and justifications on either side in the conflict, an international project was created on the mutual recognition aiming at the sufferings and injustices in perception of each of the opposing people, in this case Jews and Palestinians (Benjamin, 2004). As part of the project in charge of moderating overemotional outbursts and enabling more appropriate dialogue in which there would be space not only to react but also to reflect on one's own attitudes and perceptions of others, I was invited to be the member of an international group of professionals. The intention of that group was to moderate the dialogue between the warring parties, proved to be exceptionally frustrating and disturbing. Knowing of and often feeling deep divisions in the cultures of the Balkans, especially the western and central part, I carried all the weight of prejudices and difficulties associated with the organization of everyday life and perspectives into the group of that international body intended to be in moderating function. Especially in my countertransference, emerged experiences from the Homeland War (the war of independence of Croatia and the decomposition of Yugoslavia, 1991–1995) and its aftermath as the culmination of the impossibility of resolving conflict situations through talks and agreements (Urlić et al., 2013). Psychologically, we started from the assumption that mutual recognition of suffering and injustice should create certain identifying values through dialogue on which to further build a path of better mutual understanding and tolerance of diversity, a path of identifying common values, of *koinonia* (Maré et al., 1991).

The working assumption was that identifying elements and ways of effective approach to conflict areas and possibilities of their processing could contribute to peace process in the Middle East. In other words, it was said that peace, respectively reconciliation between ethnic, cultural, religious, political and other characteristics of certain groups of inhabitants of that area, from the sphere of utopia could be gradually transfer as a *realpolitik* of everyday more harmonious life with tolerance of differences (Urlić, in press).

Such project management policy, which was probably in some ways a mirror image of what was happening in reality during the negotiations on



both sides in the conflict, proved to be completely inefficient. Thus, what we were looking in for decades in reality has been reflected once again in experimental conditions, showing the primordial power of the unconscious and unrecognized and uninterpreted at the level of the conscious with intercultural and transcultural characteristics.

After a whole day of very exhausting work in the field of a certain psychopolitics (Volkan, 2004) going out in the evening, usually for dinner, and then going to a club with dance music was dissolving the blades shown in the discussions. Everyone danced with everyone, anecdotes and jokes were told, and that social note was showing the way, i.e., that in every human creature there is also a capacity for sociability, for showing the need for others, for seeking closeness. In psychodynamic terms, in addition to the awakening of aggressive tones within the appropriate framework, the libidinal ones also awoke. The rest is a question that has been verbalized by almost all, to give more space to libidinal versus aggressive, i.e., how to organize talks between opposing parties and interests in order to be able to recognize what people connects and how they could achieve greater closeness in spite of their difference. That aim in the frame of reference of that work, based on the group dynamics and their analyses aiming at identifying some transcultural features that could be used as common denominators for confronted populations could not be reached without respecting psychodynamic evaluations and elaborations.

Gender relations in a traditional culture: mirroring of the contemporary Egyptian culture in the large group

Some years ago, I was invited to Cairo University to organize a presentation of group psychotherapy of group analytic orientation to fellow psychiatrists, psychologists and social workers. It was time of bloody demonstrations on Tahrir Square as part of a movement called the “Arab Spring”. The 3 days training took place according to the planned program. They revealed the questionability of different values of traditional cultural patterns in modern society, the strength of established traditions and the fear of being touched, and the fixed role of men and women in different situations of everyday life that began to be perceived as a brake and burden. Although it was a large group of exclusively academically educated young people, mostly psychiatrists who were equally represented by gender, it could be seen that,



in the subgroup of women, anger prevailed over many traditional restraints and the desire to change them. In the subgroup of men, one could see not only the need for certain changes in society, which was more articulated through political demands, but also the fear of changing the status of women and the need for the status of men to change accordingly.

These professional meetings continued after two years during the group psychotherapy congress in Cairo. Every time we had three large group sessions. Since the beginning, the group grew from approximately 150 to 300 participants the next day and remained of that size to the end, which means that almost all participants of the congress were present to the large group. They were very curious about how the group would unfold. The dynamics unfolded as if it were a continuation of the group from two years ago. Women have shown greater combativeness and caused polarization around certain current political hot issues. One participant gestured to me that she would like me to give her the floor. I also replied with gestures that the word should be taken by herself. She did not dare and after the end of the first session she fainted, which attracted the attention of some women. I told her that there was a meeting tomorrow and that she had to fight for the word in public by herself.

The next day she quickly took the initiative and said that her husband and son had been arrested during demonstrations and that she had not been able to find out where they had been for three months. She asked if anyone could help her. Most of the group agreed that these prisoners should not be helped because they were in favor of a backward way of organizing their society, but that they feel sorry for her, the colleague, because it is about her family. Private and public should be separated.

One young psychiatrist said his wife was carrying another child. He once took a bus and saw how embarrassing it was, so he concluded that it was easier for him to go to work by bus than for his pregnant wife, and he left the use of the car to her. This provoked great approval in both the male and female subgroups, although it was noticeable that one part of the participants followed his statement in silence. After a short silence, the dynamics of the large group turned to the current political controversies in the country, which suppressed the intimate, “private” themes of the previous phase.

Every culture has its own expectations and ingrained attitudes regarding the role of men and the role of women. We ended up with opening views on these issues.



A newly established center for mental health for chronic patients diagnosed with schizophrenia

When we look on multicultural and transcultural aspects of psychological processes that need to be recognized within a particular personal, group or ethnic culture, then the necessity of supervising such work is particularly important. In the following example, I will expose the experience from supervisory work in Italy with a group of over 70 psychiatrists and psychologists treating people with psychosis in the structure of community psychiatry, which permeates psychiatric institutions throughout the country.

The participants in the supervisory work were mostly from central and southern Italy. The colleague which presented the one-year results and activities of the newly formed center said that she and the entire therapeutic team were pleasantly surprised by the success of therapeutic and rehabilitation activities of the center. In the further course of the supervision process, the whole group showed the formation of two subgroups, one that was critical of the very optimistic presentation, and the other that showed more understanding for what was called beginner's luck.

The whole large group was confronted with this polarization, and then the presenter was faced in a "here and now" situation with the reactions provoked by her report.

The colleague who presented the report was deeply shaken. She said that commenting the results of their one-year work, the employees themselves became very anxious about the further development of the center. They were concerned about the aggressive and other detached parts of the personality (related to the psychological functioning) of their patients and about the possibility of these elements to appear abruptly because they could not recognize them during their group work. In fact, some phenomena in this regard had already been shown in their center, but she left them out of her report even though she did not know why.

Faced with these comments and asked how she experienced them, the colleague said after a short silence that on the train, coming from the south, she thought about the great efforts to establish the therapy center and that she and the whole team needed recognition for their work. Besides, she added, it is well known how they from the south of the country are perceived. She expressed her insight into the need to show how those from the south of



the country can be as successful as those from the middle or from the north of the country.

At that moment the atmosphere in the whole group changed radically. Many expressed their appreciation, in spite of the prejudices against the effectiveness of “those from the south”, and the impact of such attitudes on the unconscious of the presenter. Concerns about possible risk factors in relation to future work with chronic patients suffering from psychosis were expressed in a deeply empathetic way. The colleague thanked the whole group for their comments, understanding, recognition, support and new insight.

Foreigners and natives

In the city of Marsala, the congress was held in the complex of a large monastery. The cloister with its garden was beautiful and imposing. However, some elements intertwined with this Mediterranean atmosphere in a special way. There was tension and some muffled aggression in the air. The colleague who was a co-conductor and I led the group in Italian and English, linking the contents with translation from one language to another, or with hints to clarify the verbal contents. This was not enough to clarify the content of the tensions and certain resistances that spilled over through the various topics and the result was always some dissatisfaction with the organization of the gathering. The co-conducting couple realized that something was happening before the start of the large group, whose participants did not come to the group without some previous burden, which they were probably even aware of. Red geraniums have associated images of battles related to Sicily, but also of the hard work of the local population through centuries. The attempt to interpret these associations as the appearance of historical images of Sicily “overloaded” with history and volcanically eruptive, and blended with southern temperament, did not resolve the weight that was hanging like a cloud over a large group. Gradually, it was revealed that a number of participants were under pressure from the organizers because participation in congress activities was partially included in their group analysis training, which they could not freely comment or discuss such an attitude.

The other element was a strange phenomenon which the co-conductors did not encounter before. It was a small group of senior group psychotherapists who constituted themselves as a group of observers who took different





“positions” during the 3-day work and occasionally changed their observation points of the whole group. This group did not participate verbally. Thus, in fact, within the large group at the congress present was the divided subgroup of observers who had professional power during the training, a co-conducting couple, and participants who were in training, and other participants. Finally, the complaints were about the sun, which was too high and hot and could “kill” the participants or harm them.

The facilitators commented on the dissociative atmosphere in the group and the difficulty of containing it, especially since it was filled with real elements from the current situation that was overwhelming. The ending was approaching. Finally, the local psychiatrist, a person in his preretirement age, said that the large group reminded him of a situation when a large cruiser arrives in front of his small town and strangers who know nothing about it wander about. Guides try to explain something, they make some photos and return at the cruiser ship and sail away. Meanwhile, he would be sitting on his balcony overlooking the sea, taking a glass of wine, reading something, and waiting until that invasion of tourists passes and until his city returns to him and its inhabitants. Then everything becomes peaceful, sometimes too peaceful, but they feel that their city belongs to them again. This sparked applause from many participants and, with that image, time had come to complete work of the large group.

CONCLUDING REMARKS

In this chapter, I have tried to present the mosaic of different experiences during my professional psychiatric activity and exchange of experiences within framework of other cultures, intercultural contacts, and transcultural thinking. What, then, would generally fall within the domain of a transcultural approach to psychotherapy? Different unconscious communications were observed during the group work and analyzed through lenses of group analytic principles. They largely belong to the field of transpersonal structures characteristic of human psychic functioning. These phenomena transcend the very connection between the rational and the possibility of verbalization, i.e., the critical comparison and understanding of the similarities and differences of the culturally shaped but emotionally “equivalent”. Magherini (1989)



defines this as the collective impersonal that transcends our intimate identity in a way that our cognitive ability fails to conceptualize even minimally. In this regard, I would like to highlight Lo Verso's (2004) view that the concept of the transpersonal would represent a basic sharing of human experiences, which he sees stratified as follows: biological-genetic, ethnic-anthropological, transgenerational, institutional, and socio-communicational. Viewed from the group analytic point of view, this fits into the concept of matrix and the transpersonal, overcoming the division between the individual and the group.

The possibility of professional guidance in the field of psychology and psychiatry, as well as in the field of mental health in general, is becoming a very complex task and a growing challenge. How to understand "normal" from "aberrant" or "psychopathological" in these areas at all? The global society on the move separates us from any framework to which we are accustomed in clinical assessments and with which we would find it easier to cope with. The Greek philosopher Heraclitus observed that we cannot step twice into the same river. His follower, Kratil, added that we cannot step even once. Such observations lead us to gather experiences from intercultural, multicultural and transcultural spheres, because we are thrown into that river of movement and encounters with members of different cultures. Others do not want to remain unrecognized in their originality, just as probably none of us professionals in the psychological and psychiatric field would want to. We can conclude that we are social beings shaped in different variations, which, in the era of globalization, represents a special and growing challenge together with the newest COVID-19 pandemic, to which we will have to pay more and more attention to better understand the world around us, that is changing ever faster.

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Epilogue



Marcia Honig e
Cristina Martinez-
Taboada Kutz

We must recognize that it has been a challenge and an honor to gather so many contributions in this book on a topic as complex as transculturalism.

The reflection and vision of professionals, learning from case studies, is usually the way to practice science in our field of psychotherapy. In this case, moreover, editing this book, we had to navigate with the COVID-19 pandemic around the world, affecting our communities, societies and personal lives.

Despite cultural origins, identities or beliefs, human beings all over the world are dealing with the enormous changes in anyone's life; the fears, the anxiety, the social distance, the economic difficulties and the





great pain of losing loved ones. **Our thoughts and feelings with all of you**, from all cultures, trying to survive and keep creating in such sad times.

Those circumstances have demanded group work, at online settings, more than ever; promoting meanings to values, emotions, commitments and objectives nuanced by geographical, historical and cultural location.

We all, writers here, have been working online, adapting distinguished methods and techniques, in order to keep our groups together despite the terrible days—when social distance is imposed to us.

This cross-cultural vision defines the book, our role and our mission as therapists applied to people in vulnerable situations, training and research.

This is a space important to mention the hard days we have all been through as well as the collaboration of our colleagues from the IAGP.

IAGP proved to be a good enough container, supporting and bringing hope in dark moments to our colleagues and their groups, from every culture. We all used our former experience in working with group diversity—presented part of it in this book—, in order to connect people and create online spaces for share, learn and fell *less alone* when coming to their clients and groups.

Together we are better, came to be the IAGP disclaimer nowadays.

Probably the next Transcultural IAGP book can be titled *Working Online with Cultural Diversity around the Globe*. We can add a chapter of the first IAGP International Hybrid Conference.

We want also to share about the interesting *parallel process*—relating to cultural diversity—we went through, when editing this book together, the two of us, Cristina and Marcia, past and present IAGP Transcultural Section chairs: Spain, Brazil and Israel cultures—and even more!—coming together towards this important creation. The whole process of elaborating the book concepts, designing the book structure, contacting with the writers from different cultures, organization method.

In every step of the creative process, our differences and similarities were present; and this time, in a very respectful way, with mutual openness and curiosity on what the others brings. We both listened, not once discussed, sometimes **we agreed to disagree**, and always found a way to connect using the positive skills of each other. Both of us experienced, deeply, the benefits of cultural diversity, in order to create something **bigger**. We feel very grateful to each other: **siempre amigas** (friends forever!).





We want to thank again our President Richard Beck for the trust and support.

Thank you, also, Dr. Hopper for the advices. Thank you, Heloisa Fleury for the edition help.

Thank you, all the Past-Presidents and writers for sharing from your practices in such a reflective way. Thank you, all for the openness and the hard work.

We also want to thank our group members, for trusting in us, conductors and advisors, and not giving up on working through cultural diversity, in order to make this world a better place.

And **yes...** We want to thank each other, for the challenging and fascinating **multicultural** journey, together, when editing this book.

"I have never been a woman, nor an immigrant, nor a minority, nor poor, nor occupied, nor a prisoner, nor a millionaire, nor a tiger, nor a bird, nor a caged lion, nor a lizard, nor a thistle, nor a rock. But I want to be all... and more. I wish to be so many things that are not me. To be different, to be others, without losing myself. I wish to experience life in manifold forms that are still foreign to me. I want to be a lot of me, beyond me, what I am not yet; to be a me that is so much more than I have managed to accomplish so far".

Prof. Nimrod Aloni

Institute for Progressive Education
Kibbutzim College of Education
UNESCO Chair for Humanistic Education



This book transcends the proposal to address cultural diversity, groups, and psychotherapy in the world. Meets IAGP purpose to encourage internationally the development and study of group psychotherapy and group processes. The editors invited professionals with outstanding experience to bring their expertise on psychotherapy and social therapy favoring social development. The result of this endeavor is an inspirational trip through human experience flavored with feelings of inclusion, belonging, and recognition of the other, basic conditions for society development in this continuously changing reality.



Heloisa Fleury



Jacob Gershon

Dialogue amongst human accultured differences is both the most difficult as well as the most urgent task of our time. The group is chosen as the optimal setting in which culture diversity can be treated and discussed. This inspiring book shows how different interpersonal as well as intergroup dialogues cope with the grace and horror of trans-cultural experience. Exemplified by psychodrama, social dreaming, art therapy, to supervision and pictogram and other approaches, you will use this book extensively.

The editors of this book, Drs. Honig and Martinez-Taboada, embarked on a huge undertaking and managed to weave together this remarkable volume. It contains chapters from a variety of countries and cultures, all told by group therapists in various disciplines. At the center of this is the age-old phenomenon of migration, which is challenging under any circumstances, and outright traumatic when people are uprooted and displaced because of wars and natural disasters. The publication timing of this book is fortuitous as the world is experiencing waves of migration, and as we anticipate more cataclysmic natural events, related to climate change. Representations in group work, as demonstrated in this book, shed rays of hope toward deeper understanding and connection, stiving for empathic and caring humanity. A must read for anyone who seeks to better understand the subtle differences and connective links between cultures.



Robi Friedman

