

## Intercultural Psychotherapy: Different Models and Strategies for Creating an Interpersonal Relationship beyond Cultures

Emma Ruiz Martín del Campo, Universidad de Guadalajara

At “Refuge,” a German psychotherapeutic institution for immigrants, I observed the work of two psychotherapists: a native German woman and a migrant man who had been living in Germany for many years. I reflect upon different models and strategies to make communication beyond cultural differences possible. From offering herself as a “bridge” (i.e., as a benevolent model from the German culture of which she is a part), to the expression of deep understanding of the migrant’s feelings (that the migrant psychotherapist himself had experienced at one time), there are several ways to facilitate the passage from the known to the unknown, from cultural loss to intercultural bonds founded on trust. I recount fragments of two different psychotherapies (Ingrid Koop’s interaction with “Ana” and H. Farschidi’s interaction with “Soraya”) to make the analysis of several possibilities for creating inter-subjective-intercultural spaces. In addition, I describe Tobie Nathan’s psychotherapeutic model, based on ethno-psychoanalysis.

“What makes me who I am and not someone else is that I am a horse between two countries -Lebanon and France- between two languages, between various cultural traditions.” Maalouf: *Murderous Identities*.

### Migrations, Cultures, Subjectivities

The second half of the 20th century has been characterized by, among other things, the continuous increase in mobility of men as well as women who have abandoned their native land for a variety of reasons: misery, political persecution, dreams of a better life, etc. Within a forty-year period, the number of emigrants has doubled, bringing the present-day total to approximately 170 million.

We should focus on the effects that this mobility has on those migrants who leave their country, looking for integration into a completely new population of people. At the same time, we must reflect upon the reactions of those communities or countries to which a great number either immigrate or try to gain access. These countries normally set up practices which control the daily influx of immigrants. Upon entry, there are certain immigration limits, controls, and laws which restrict the possibility of citizenship. In addition, upon arrival, certain categories of legal status are established, ranging from those who eventually acquire citizenship and those who are accepted on a provisional basis, to those who are sent back to their native country within a brief period of time.

We have before us the phenomenon of a mixture of cultures—of languages, different customs and traditions—all creating communication problems as well as difficulties in confronting that which is different or foreign. The diverse reactions to this situation, which also must be confronted, might include: rejection or acceptance, negativity towards the change or seeing it as a new beginning, etc.

How shall we describe the present-day cultures that are affected by this increase in human mobility; those with their definite technological advances and rapid pace of life; those cultures which we call “post-modern”? Etymologically speaking, the word “culture” comes from the Latin word meaning “cultivation”; new products resulting from human toil and care. When we speak of cultures, we are alluding to threads of meaning interwoven, starting with different human experiences, which have become more complex, plural and dynamic since the dawn of the 21<sup>st</sup> century (Elliot, 1997; Geertz, 2001).

Bhabha (2000) defines a culture as being a structured producer of symbols that is off-centered, as it were; that through the shifting of its borders, said culture is open to the possibility of articulation with that which is different, and experiences a constant process of hybridization.

Erdheim states:

Culture is that which arises from interaction with that which is foreign and represents the result of a transformation of that which is its own through the acceptance of that which is foreign . . . That which is foreign never leaves us indifferent. It is ambivalent; it can awaken our anxiety and push us to go back to that which is familiar to us, but it is also capable of fascinating us and stimulating us to leave our own world. If we permit ourselves to bring in that which is foreign, our borders become slippery and we must be transformed. If, on the contrary, we obey our anxiety, we will strengthen and solidify the borders. (1993, p. 168)

When individuals from different cultures are brought together, “interim or third spaces” arise (Bhabha, 2000; Winnicott, 1971); confrontations between different world views that can cause conflicts of varying intensities and thus can create the need for solutions, adjustments and negotiations, which in turn result—to varying degrees—in the creation of something new, starting from a mix of diverse, symbolic universes. The result is hybridization—albeit temporary—resulting from interaction with others. The effects of the interaction of different world views are reflected in both the individuals and their respective cultures. We are established in “intersubjectivity”; we are *nos-otros* (*nosotros* in Spanish is the subject pronoun “we”; however, by separating it with a hyphen, the author is playing on its two separate parts—*nos*, meaning “us” and *otros* meaning “others”).

Nevertheless, there is no guarantee that during the gestation period of the new, there won’t be a few disappointments, “abortions,” or “deformities,” which require specific and delicate interventions; otherwise, they will carry with them an inevitable lethal burden.

Migrations represent a challenge for humanity in terms of that which relates to the organization of social space, as well as the subjective crises that arise among those who are living either temporarily or more or less definitely in a no-man’s land, searching for a community which will accept them in the full sense of the word—as a citizen with responsibilities and legal, political, and social rights.

Today, the increase of human mobility, as well as the information that is provided to these individuals, drastically increases the diversity of their experiences, modifies their perception of time and space, and creates identities which are more temporary or changing (i.e. compound hybrids), or as Elliot (1997) would say, identities “without any guarantee.” The opening up of societies and the interchange of symbols have liberated the differences and

have forced us to become more aware of the fact that we are ever-changing subjects, bound to the unexpected turns of life, products of our history and of one or many contexts. We define ourselves and are defined by the characteristics with which we are identified and through which we look for ways to differentiate ourselves from others, placing us in groups of reference and belonging, and searching for the driving thread that will provide us with a sense of continuity as we travel through the many changes—large or small—In our lives.

If all of us feel the effects of the acceleration of change and the increase in human mobility in today's world, then immigrants, upon moving to a completely different culture, will experience an intense identity shock which could reach traumatic magnitudes, depending upon the type of emigration, the underlying motives involved in said action, and the form in which they are either rejected or accepted by the new society.

If the subjectivity of every human being implies contradictions, its continuous gestation and transformation carries with it a certain amount of suffering. In the case of immigrants, we see people who are subjected to extreme trials in which the support and affection of empathic individuals can help them to overcome severe crises through apprehending and elaborating on different feelings and borderline experiences which threaten to produce a lasting sense of confusion. This is the theme of this paper: psychotherapy with immigrants—a process which is by definition intercultural—and some variants of the same.

#### Method and Data Collection's Place: Intercultural Psychotherapy

Immigrants arrive, weakened by suffering and upheaval, to a place which is totally strange to them; consequently, for their survival, they require external support to help them reorganize their subjectivity, and hopefully integrate into the "adoptive" society. The task ahead of them is very complex and can take two main paths: One is the tendency to elaborate traumatic experiences and reorganize their subjectivity; the other path is to fight for their integration into the foreign—and oftentimes hostile—environment.

Further on, we will discuss in more detail the first path mentioned above, since it is the main theme of this paper. Regarding the matter of the immigrant's integration into the new environment, we will only mention here that it depends on the willingness of the receiving culture to accept them as citizens with full rights, as well as to offer them opportunities to participate in the social, political, and cultural life of the society, starting from the opening of hybridism, reciprocity and creative negotiation. This is a utopia which is seen as a constant contradiction in many countries that receive immigrants; countries where they are subjected to almost a state of submission, living indefinitely in a situation of temporary acceptance, and placing them in marginal areas of the city where they are limited to a controlled and ghetto-type existence. The result of this scenario is the repetition of the trauma of not having an adequate place they can call their own to develop their existential design.

That being said, intercultural psychotherapy for immigrants becomes one of the only secure places in times of insecurity; a place of orientation in an environment that tends to confuse; a place of exploration to be able to track down where one is and where one wants to be; a place to discover what is possible, what used to be possible, and what eventually could be.

In psychotherapy, immigrants find themselves with an individual or among a group of people, who are willing to share and listen to the others' experiences, offer emotional support

and well-meaning interpretations of what happened to them in their life and during their exodus. Psychotherapeutics is a protected and secure space for someone arriving to a new culture; a niche where, starting with interpersonal relationships, one can regain trust, and look for reopening the path towards possible growth.

When the psychotherapist allows him/herself to become concerned—in the best sense of the word—with meeting people from other cultures (immigrants), h/she must put empathy into action. H/she must be able to imagine him/herself in their shoes in order to understand, not only the external circumstances, but rather their reasons, emotions, and the suffering—oftentimes tortuous—that they have experienced along the way.

With such a psychotherapeutic space for immigrants, in addition to the aforementioned availability of psychotherapists, an attempt is made to resolve any language barriers (with the intervention of specially-trained interpreters when the immigrants do not speak the language of the receiving country), and to become well informed about the newcomer's culture. This is done in order to be able to interpret certain behaviors and different forms of expression (from those of the psychotherapist) with more accuracy, and to examine more carefully how to understand the illness and its recuperation, the psychic conflict and his/her entry into the culture in question. It is also fundamental, in the practice of psychotherapy with immigrants, to set aside sufficient time and space, in accordance with the condition of each subject, in order to assimilate and elaborate on traumatic experiences and to make sense of their living situation and past history. The psychotherapist must provide support, as well as fulfill the function of being an effective listener, as his/her subjects share their own personal testimonies which are oftentimes tragedies involving not only the individual, but entire populations of people.

In addition, psychotherapy with immigrants causes us to reflect on that which is foreign in own reality: unconsciously, that which we repress and is expressed in the form of certain symptoms, dreams, or disappointments. It also causes us to ponder the matter of what is considered our own within that which is foreign: we come to realize that the things that we discover, touch, feel, and experience in contact with others, are closer to our own reality and experiences than we had first assumed. The fact is, as human beings we establish ourselves in interaction, examining the validity of our identity and our differences. The interaction between subjects, even among those who live in the same community, implies aspects of identification and alienation, shared boundaries, intersubjectivity, and factors which define us in our differences.

As we approach people of other cultures, particularly if we do so as psychotherapists, we must avoid the risk of stereotyping based on information that we have received regarding the living conditions in the subject's native land. No single human behavior can be identified and stacked neatly on a shelf; cultural differences are always measured by their subjectivity, and also, in intercultural therapy, the road to support and discovery is reached through dialogue, an exchange and communication with the immigrants who share their hopes, anxieties, superficial and hidden agendas, as well as their conscious or unconscious motivations. Regarding this point, Sudhir Kakar, a psychoanalyst experienced in psychotherapy throughout India and the West, claims the following:

An observer from another culture who identifies more with the strangeness of the cultural mask rather than the trust of the individual face, can possibly end up

exaggerating the differences. However, if h/she could listen attentively for an adequate period of time and with a willing ear, h/she would discover that the individual voices, speaking from an imperious whirlwind of emotions: the sharp jabs of his heavy and burning guilt, an insatiable desire to simply let it all out, a black desperation before the other's absence; here in India, they are as clear as in the psychoanalysis of Western patients" (1995, p. 207).

### The Psychotherapeutic Climate as a Third or Transitional Space

Winnicott (1971), the British psychoanalyst, speaks about the "third zone" or "transitional space" in *Playing and Reality* as being extremely important for our appraisal of life, and that it is first conceived when a child begins to differentiate himself from his mother. The child who has accumulated many positive experiences filled with love and affection, develops trust, which in turn enables him to recognize himself as a separate entity, different from his protector, and through play, to get her back (see her) in objects that represent her.

During a creative moment, he will mix experiences from his past with fantasies, dreams, and symbolizations that will allow him to imagine and create something new. An intermediary climate arises between the past and the present, between inside and out, which acts as a support and enables the process; one that under certain circumstances could develop into something that previously had not even been thinkable or feasible. When there is faith and trust, this area of creative potentiality is produced, which can be filled with play and other symbolic or cultural products (Winnicott, 1971). Psychotherapeutic sessions with immigrants can turn into transitional, creative, and self-containing climates. In this type of psychotherapy, rebuilding trust and security are fundamental.

Life filled with hope in oneself, knowing one's illusions, desires, dreams and "playing," are what really make the transition from one world or one state of being to another, possible. Although this is never an easy task, given the circumstances under which most immigrants end up in psychotherapy, it is indeed one of the fundamental goals: to regenerate their trust, to take their words seriously, to share and to understand their experiences; for it is important from the start to allow them to feel, to assure them that we believe in what they are telling us, and that we, too, are able to feel their pain. In intercultural psychotherapy, considered to be an intermediary and transitional climate, the connection between that which is one's own and that which is foreign—that which in the end can lead to something new—can be put to the test.

Another one of Winnicott's contributions—which is important for our reflections regarding psychotherapy—refers to the processes of illusion and disillusion. Humans tend to fantasize that our external reality corresponds to our ideas and perceptions. However, through the process of development and experimentation, we are able to confirm that our representations of reality are interceded by our desires, needs and capabilities. We suffer through disillusion that, in the best case scenario, are not extreme and that allow us to remain hopeful, with a vitality which will project us into the future.

Among other things, the idea of a fully reciprocal exchange, one free of obstacles and of continuous harmony, is also an illusion that wears away with experience, giving way to a perception of implicit ambivalence in every human relationship. As we grow, we begin accepting a subjectivity which includes impulses and emotions that we must struggle with

such as rage, envy, or a desire to control or possess. When associated with extreme frustration, these emotions can reach traumatic dimensions. Fortunately, in the best case scenario, we also discover that reason is a helpful tool in handling and in working out our feelings and those disturbing experiences that cause us great suffering.

For most immigrants, great difficulties accompany the arrival to a new culture. Most of them never reach the integration phase, and many experience the catastrophe of human disintegration, which nevertheless almost always runs its course without much notice. Psychotherapeutic niches attempt to break the cycle of desperation, and to make the available emotional bonds solid, which in turn will allow them to regain their trust. In this way, they will experience a process of illusion/disillusion in which, in the future, certain realistic expectations are conceived; modest expectations that allow them to accept the contributions of the psychotherapy and those of the support group. In addition, in the third interactional space, the therapist and his/her companions also participate in an innovative process, and upon sharing the immigrants' life experiences, they become transformed. Winnicott tells us: "This process of becoming disillusioned requires time and certainly should happen in a climate which can bring hope from an environment . . . where the subject experiences the support of someone who relates to him in a manner of extreme empathy" (1971, p. 149-150). The inter-subjectivity or social bonds, are the condition for keeping the desired amount of hope and illusions alive—which is something that every human subject requires in order to continue his/her growth.

The psychotherapeutic intercultural space conciliates knowledge in a vital situation. Let's reflect on some of its possible variables.

#### Discussion: Different Types of Intervention

##### *Tobie Nathan, His Patients and the Ethnopschoanalysis*

Tobie Nathan is a French ethnopschoanalyst who has developed a model of psychotherapeutic work based on taking into account the different cultures in order to understand the processes of the disease and its cure. Two moments in the development of the model seem to be clearly distinguishable. During the first one, Nathan searched earnestly for mediation between traditional cure techniques and psychoanalysis. During the second moment of his development, Nathan worked on gathering a great number of followers, and together, as co-therapists, they carried out the psychotherapy sessions.

Nathan considers understanding the immigrants and the culture they are coming from as being fundamental. His psychotherapeutic model arose from having heard his patients trying to recognize the individual meaning of their symptoms and rejecting the medical prejudices and social norms that were attempting to limit the psychotherapeutic process to more or less stereotypical demands.

According to Nathan, language serves to exchange that which lies within the human being. It separates the interior from the exterior, while at the same time making room for the bonds between the internal separate climates (it speaks to human beings). Psychic disturbance and illness are confined to—at the cultural level—the impossibility of one such exchange of relationships of the respective individual with the other members of the culture. At the individual level, this means that symbols are only carriers of private meaning that can no

longer be shared. Every psychotherapy—whether it's an indigenous ritual or a psychoanalysis—must break the private meanings in which the neurotic or the psychotic becomes stagnant, and—first in transference—make a common meaning accessible and able to be shared. (These positions of Nathan are very similar to the German psychoanalyst Alfred Lorenzer's socialization theory).

According to Nathan, the psychotherapeutic path is composed of making the expression of metaphorical language possible, where the patient is able to communicate his conflicts. This language should be set up in such a way that it is manageable for the therapist. In Winnicott's words, it has to do with conceiving a transitional space; in accordance with Homi Bhabha, one could say an attained hybridism which allows understanding and interaction.

Nathan relates what happened in a psychotherapy session with a young African woman who had recently immigrated to France and had been suffering for quite some time from depression. Nathan invites Denise to formulate the cultural definition of her illness and later asks her about her personal history. Nathan negotiates a type of treatment in which Denise's cultural impression is taken into account, but at the same time, one in which she agrees to have personal conversations with Nathan. It is from this intermediary space that Denise will become free of her symptoms.

Nathan asks her very directly if she has had any dreams of late, and if so, to describe them. Denise claims having dreamt of people who want to marry her against her will, that they feed her, and that she has to cross a river. All of these are dreams that, based on the logic of the originating culture, mean that someone has conspired to hurt Denise, and that someone intends to enslave her soul through magic. They are explained as culturally determined and Denise is being freed from the anxieties that were contributing to her feelings of lack of energy and spirit.

Nathan takes an intermediary position between the psychoanalyst interpreter and the traditional "witch"; for example, when in the last session Denise is given a book by Freud that she asks for, she claims that it (the book) will protect her from any new threats, like a good-luck charm which magically concentrates on the burden of care that she feels she derives from her psychotherapist.

### *Ingrid Koop and the Integral Psychotherapeutic Action*

I had the opportunity to witness inter-culturality and the creation of the first moments of inter-subjective meeting, while observing the psychotherapy of a woman from Bosnia at a place called "Refuge" (an institution which offers psychotherapeutic support to immigrants in Bremen, Germany), at the hands of Ingrid Koop, who defines psychotherapeutic action as being integral—a type of treatment for traumatic situations which include actions that produce effects over the body, spirit and soul. The traumatic circumstance which the subject experienced, she explains, is approached in a multi-modal manner that seeks to accomplish the flow of the conflict in order to put the subject's diverse levels of functioning in harmony with each other (Koop, 2002). She holds a consultation and encourages her subject to relate her traumatic experience until reaching her limit; this involves bringing out the worst of the personal experience (which tends to be condensed). In this new context and within a loving climate with attentive company, while reliving the horror of her personal experiences, emotions that had been repressed come to the surface, and she is able to experience a sort of

liberation which allows her to begin facing the present again. It's a process in which the tension rises until the subject is finally able to understand, relive, feel pain, share, and elaborate on those experiences. In the process of elaboration and of "repairing" the loss through knowledge, the seizure of those elements through which the subject lived is placated like the caretaker of her family history and culture. The increase of tension is produced in a manner that is shared, and this leads to a niche which holds all of the anxieties and will promote the advancement of re-dramatization.

I will relate the key points of the psychotherapy of a young, 23-year-old Bosnian girl named Ana. These points contributed greatly in establishing a foundation of trust, of intercultural exchange—a beginning for the participants.

Those involved in the therapeutic session were Ingrid, the psychotherapist, Misael, the Bosnian interpreter, "Ana" and I. To open a path of trust, Ingrid explained (while Misael interpreted), that he (Misael) would be the translator and that I was a Mexican psychotherapist who wanted to participate in the process as an observer, if she were in agreement. Right away Ingrid invited Ana to ask us questions that she considered pertinent. Ana directed her first question to Misael, telling him that she already knew of him through her husband, who used to work at "Refuge" and immediately after, held out her hand in friendship. Then she asked me why I wanted to observe, and I explained that I was from Mexico and was very interested in learning different ways of working with people who find themselves in situations like hers, because there are many people among us who are thrown out of the country whose problems are very similar with those who are treated at "Refuge." I later added that I was sworn to professional secrecy, at which point she nodded in approval of my presence, and I thanked her. Ingrid had an important position, not only as a psychotherapist, but also because she was German, which opened an area of her culture, which was building bridges of support and understanding. We had made a pact of trust, and the foundations of the intercultural beginning were set in place.

Through the course of various sessions, Ana related the hell that she lived through, from the time the violence erupted in her town, and later, trying to stay alive as they fled. The authenticity of the inter-subjective session and the generating of an intercultural space became evident in the respect and interest in other customs and beliefs that we demonstrated, as well as in our growing closer to understanding them. It was also evident in the way that we empathized with the pain and suffering that the young girl had experienced.

It was a significant moment in the process; one in which the entire work became crystallized, and this was expressed by Ana in the following manner: "Much of what I am telling you I had already forgotten, but now the memories are coming back and when I don't talk about them, I dream, I have nightmares. It helps to share these experiences, especially because you listen to them attentively." Ana's perception that the empathy that we offered her and the understanding that we provided toward her emigration, was shaping that "third" or "transitional space."

Ingrid guides toward the "small future," the present climate of enjoyable reality, alluding to the spring buds that can be seen from her garden and the weather (which is especially splendid that particular day), for waking desire and for dreaming. Ingrid suggests the following: "When you can, go and take a walk and look at them for me, since I still can't walk because of my broken foot." Ingrid is getting even closer to Ana by emphasizing a part of her; that she, too, has suffered an injury from which she is recovering. Ana can cry about



her losses, elaborate on her sorrows; the group operates as a restrainer, a safe receiver that offers the assurance that she will not break down while reliving these frightening experiences.

During one of the last sessions with Ana that I was able to witness, Ingrid relates how there was a party of mourning in Ana's town, where they buried the remains of 1,000 victims of a massacre. Ana says that she found out that the occasion had taken place, and she called her mother by phone, who then told her that she had attended the funeral party. Ingrid immediately goes and brings a newspaper that had published the event, which also contains some photographs. She holds out the newspaper for Ana, who looks at it with great interest, and later Ingrid asks her if she wants to keep the article. Ana accepts the offer, Ingrid cuts out the article and gives it to her, who then folds it, clutching it for the rest of the session. An object (the newspaper) has been created and a transitional space; we are in Germany, but Ana holds tightly in her hand a symbol of her beloved past. We fluctuate between the here and the there, between the past and the present. We come from different cultures, but we are united through the elaboration of her sorrow and by the feelings of horror that she experienced in Bosnia—by the good-bye that she missed, the progressive beginning of what she has here, and also the hope for the future, symbolized by the early buds of spring. We have created an intercultural climate that has made it possible for Ana to integrate elements of her culture of socialization with those of the vehicle which has become her present environment.

*Farschidi: Psychotherapy as a Knot Which Ties Beliefs With Cultural Representations*

At "Refuge," I also participated (as an observer) in the psychotherapy of a 38-year-old Lebanese woman by the name of Soraya, who had been attacked, in her own home and in front of her children, by political enemies of her husband. During the phase of psychotherapy that I'll be referring to, Soraya was in Germany for the second time, having lived there before for a period of nine years, when she learned enough German to be able to hold a fluent conversation. During the session an interpreter was not present. The group consisted of the psychotherapist, a student who was doing volunteer social work, Soraya, and I was there only to observe. Soraya was suffering from what had been called posttraumatic somatization: multiple pains and bodily symptoms. She was also experiencing fear of being driven out of Germany and having to repeat the "no-place" trauma. She was searching for the meaning of her symptoms and of life, which she found in her children and in her religious faith. She feared that no one would believe her because she was a foreigner, and thought of the possibility of sacrificing herself for the sake of her children, whom she believed would be retained in Germany once they were orphaned.

From the beginning, Soraya seemed to be searching for an intimate bond with the psychotherapist; someone to whom she could surrender the responsibility of her life. From Farschidi, she was hoping for advice, direction, and active support for all the bureaucratic transactions that lay ahead. In turn, Farschidi was also looking to strengthen Soraya's religious beliefs, to emphasize her successes as a mother, and to show compassion toward her anxieties and physical suffering. In addition, he wanted to explain her present situation in Germany to her in a realistic fashion, encouraging her to continue the psychotherapy that, as he pointed out, would take a few years. Farschidi also offered Soraya the assurance that his psychotherapeutic support would not be interrupted, and that for as long as she was attending the sessions, the law prevented her from being deported back to her home country.

Farschidi supported his work on his intercultural understanding. He was ready and able to build the bridges of a modern individuality to one that is tied more to traditionalism, supported on the one hand by the socialization in a Muslim country, and on the other, by the integration achieved as an immigrant to Soraya's "postmodern" receiving country.

Soraya was already moving within an intercultural climate upon starting the psychotherapy; she was familiar with the living conditions, both in Lebanon and in Germany, and was making comparisons.

I will relate here what happened during a session with Soraya in order to show the course of action that was taken during the psychotherapy. She arrived, complaining of a terrible headache which had started at the top of her nose and extended back towards her temples. Farschidi listened attentively to her description of the headache, and finished by pointing out on his own face the regions to which Soraya was referring.

Soraya spoke of how wonderful it was to be able to attend the therapy session, although admitted that the first time she went, she was quite fearful, because she had never been before, and thought that perhaps the police could be there waiting for her. She said that she didn't understand why she was experiencing so much anxiety, claiming that she trusted Farschidi, but often felt insecure and distrustful. Farschidi explained that she had been through some very difficult times which had affected her greatly, and that many others who had been there had also had similar feelings. Soraya insisted that she wasn't that way before, and that now she also felt as though no one would believe her because she was a foreigner. The psychotherapist assured her that he *did* believe her; that the way she talked, her feelings, her facial expressions—were all indications that what she was saying was, in fact, the truth.

Her fear of being deported and her hope of staying in Germany were addressed during the process: She mentioned that on March 6 she had a meeting with the judge, when he would study her case, and this had her feeling very tense. Farschidi commented that in similar cases, everything had turned out just fine, and that he had told them that she was ill and consequently was involved in therapy at "Refuge," which guaranteed that she would be able to stay during that time.

She said that she didn't really want to live a long time, but rather a short time, albeit peacefully. She went on to say that what kept her going were her children—she loved them very much; that she didn't want to go back to Lebanon—she would have nothing to do there; that if they didn't let her stay, she would prefer committing suicide; that she wanted her children to be allowed to stay.

She shared with us her fear that on March 6 something terrible was going to happen to her. Farschidi told her that she was a strong woman, that she had accomplished many things, that it was better to think instead that something *good* may come on March 6, and then quoted a famous German saying: "He who thinks he will trip and fall, will do so." Soraya complained that she would never be able to forget what happened in Lebanon. Farschidi suggested that she talk about it any time she felt the need to do so.

The psychotherapist made a reference to the dream that Soraya had where she had seen a light, which she had interpreted as being divine support, in order to emphasize the fact that God was, indeed, supporting her. Soraya commented to Farschidi: "I had that vision and the very next week you called me to come here. I'm very grateful and I love it very much." He added that normally one must wait three or four weeks for an appointment, but that when he saw her name, he thought to himself: *We're going to give this woman an appointment . . .* and

so, he said that if they gave her the appointment a few days after she asked, who knows . . . it may very well have been divine intervention.

After a moment of silence, Soraya related that in Germany sometimes at night she sees her children sleeping and happily cries, "Farschidi says 'yes.'" Soraya then said, "so, all are calm." She said that she *did* have friends in Germany, and referred to a woman who gave her German lessons and who still visited her; who the other day had taken her children to the carnival and said to her: "Stay home and rest, Soraya . . . you need it."

Soraya spoke of her son Ali, and said that he was a good boy, intelligent, and the number one player on his soccer team; that when they had lived in Germany before, he was invited to play on a German children's league in Denmark, and since he didn't have a passport, they had given him a temporary one for a week so that he could play; that he was the best on the team; that she still had an award of recognition that they had given him; that in school he was also one of the best. Farschidi said that was great and that Ali was a product of her. She then began to sob, saying she didn't understand why she always had to be under so much pressure, and asking where she would go in Lebanon with four children. She said that she was sick; she wasn't well; she felt like her head was exploding and she was also experiencing a great deal of pressure around the neck area.

Farschidi let her cry for a while, telling her that he truly understood how she was feeling; that she had good reason to feel insecure; that if he and I were in her shoes, the same thing would happen to us. He then called on her to calm down and listen for a minute, and made it clear that he was not asking her to leave Germany. She responded by saying that her son Ali had already told her the same thing, and affirmed that the following day perhaps he, too, could do something for Germany's sake.

The psychotherapist then appealed to Soraya's faith, reminding her that she was sitting right in front of him; that she had come all the way to Germany with four children, something that she never would have been able to accomplish without God's help; that there was a saying in his country that says: "From you, the action; from Alá, the gift." Soraya said that it was true, and that she would find the strength to keep fighting for as long as she was alive—for the sake of her children—and that she loved them. Farschidi confirmed that she really was a mother who had done a lot for her children; for before, she had insisted that if they didn't let them stay in Germany, that she would commit suicide, that she didn't have any strength left, and that she felt exhausted.

Later Farschidi brought her in touch with reality by stating that her case was not unique: that every day in Germany he had thousands of people receiving a summons to clear up their legal situation and to fight for a prolongation of their stay; that of every 100 applications, only five received support; that he would have been surprised had Soraya received it so quickly; that he knew cases where, after five years of struggle, they had finally obtained it; that what she needed now was for her lawyer to appeal her case.

Soraya asked Farschidi if he could call her lawyer, but he said that he didn't think he would be in at that hour, but that he would try. He called and was told that Soraya had to go the next day between 12 and 1:00 PM. He then related the message to her.

He asked Soraya if she was feeling better, and she said that she was, but asked him if she could still keep coming because it was really helping her, and he responded by telling her that she could continue coming for as long as she wanted, even if it took five years. She then told him that she would go see her lawyer, but asked if Farschidi could help if it were necessary,

to which he said, "Of course." He also added that if the lawyer needed anything in writing from him, that all she had to do was ask.

Forming psychic representations means relating basic physical experiences with images and words. This is central in Farschidi's type of psychotherapy, along with supporting the religious beliefs and emphasizing the capabilities of the immigrant.

By proposing that Soraya name and internalize her experiences, Farschidi was progressively achieving the bond of stimulation and anxiety. Using different nuances of the forms of psychotherapy used by Nathan and Koop, Farschidi was able to promote the conception of a third or transitional space as a point of articulation between culture and body. The therapist takes part in the process; by empathizing, focusing the attention on the parts of the body that are bothersome, and opening doors for the reception of health care in the new culture.

For Soraya, this continuous process of the bond of stimulation and reorganization of bodily and psychic experiences is of interest. It is a process which in part can run in both directions; that by knowing, there can be moments in which through experimentation, the subject who redramatizes the traumatic situation and once again feels at risk, takes a step backward in the process of symbolization, rebuilding his/her defenses.

Varvin speaks about "post-traumatic syndrome," and claims that

... the body turns into the scene of the traumatic experience's silent drama. During the process of a successful psychotherapeutic session, the bodily pain . . . is interrupted and the "word," that can come from the psychoanalyst, from the doctor, from the patient, or anyone else, can unleash a symbolic elaboration and reach a point of fullness in which part of the "cathartic work of representation" is returned. (2000, p. 901)

In the case of Soraya, one can see these fluctuations between a recuperated well-being with the assurance of having a guaranteed space, and the return of the "floating" anxiety and the somatization when she feels that the risk of her being expelled from the new culture is increasing.

Recuperating the corporal memories of a trauma by naming it, sharing it, and redramatizing it in a context of trustworthy social bonds, is even more important for a human being who lives in exile and who is far from his cultural roots.

### Results and Implications

The sketches of psychotherapeutic work related in this paper allow us to see how social bonds promoting trust can be generated starting with a number of different intervention strategies. The attitudes mentioned here are fundamental when speaking about intercultural psychotherapy:

- The availability and willingness of the psychotherapist and his/her team.
- The possibility of communication, whether in a language that the participants share or one that is transferred via an interpreter trained in participation within the psychotherapeutic setting.

- The search for the meaning behind the experience, whether as a testimony or as an inevitable road towards transformation.
- The possibility of catharsis for the immigrant, facilitated by attentive listening and an emotional commitment to the team at work.
- Empathy understood as “putting yourself in the other person’s shoes” in order to understand, not only his/her external circumstances, but also (and as much as possible) his/her motivations and emotions.
- The generation or creation of “third spaces”—niches of protection that at the same time make the interaction, the innovation, and the transformation of subjectivities possible.

### References

- Bhabha, H. (2000). *Die Verortung der Kultur* [The location of culture]. Tübingen, Germany; Stauffenburg
- Elliot, A. (1997). *Sujetos a nuestro propio y múltiple ser* [Subjects of our own and multiple being]. Buenos Aires, Argentina: Amorrortu.
- Erdheim, M. (1993). Das Eigene und das Fremde. Über ethnische Identität [Own and foreign culture. About ethnic identity]. In Cansen & Prokop (Eds.), *Nexus 10, Fremdenangst und Fremdenfeindlichkeit* [Fear if the strange and hostility towards the strange] (pp. 163-182). Frankfurt, Germany: Stroemfeld.
- Geertz, C. (2001). *La Interpretación de las Culturas* [The interpretation of cultures]. Barcelona, Spain: Gedisa.
- Kakar, S. (1995). Klinische Arbeit und kulturelle Imagination. *Interkulturelle psychoanalytische therpaie* [Clinical work and cultural imaginations. Intercultural Psychoanalytic Therapy]. Frankfurt, Germany: Brandes & Apsel.
- Koop, I. (2002). Prozessorientierte Leibintervention in der Psychotherapie. *Mit Leib und Seele* [Involving the body to promote a process. With body and soul]. Bremen, Germany: Refugio.
- Lorenzer, A. (1972). *Zur Begründung einer materialistischen Sozialisationstheorie* [To found a materlistic socialization theory]. Frankfurt, Germany: Suhrkamp.
- Nathan, T. (1993). *Fier de n'avoir ni pays ni amis, quelle sottise c'était... Principes d'ethnopsychanalyse* [Fear of not having neither country or friends, what a sillines it would be]. Grenoble, France: La pensée Sauvage.
- Nathan, T. (1994). *L'influence qui guérit* [The influence that cures]. Paris, France: Odile Jacob.
- Varvin, S. (2000). Extrem Traumatisierung und Psychoanalyse, in Sonderheft Psyche. In *Trauma, Gewalt und Kollektives Gedächtnis* [Extreme trauma and psychoanalysis, in Psyche's special issue Trauma, violence and colective memory] (pp. 895-930). Frankfurt, Germany : Klett-Cotta.
- Winnicott, D. (1971). *Realidad y Juego* [Playing and reality]. Barcelona, Spain: Gedisa.