

The Expulsion of the Inner Devil: The Motivation of Therapists to Work with Persecuted and Traumatized People and their Children

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Abstract: This article reports the importance and central meaning of self-reflection when doing therapy with persecuted people and their children. The author reflects her own motivation in dealing with the subject. Statements of therapists interviewed for this study further illustrate this issue.

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1. Introduction

The present paper originated in the framework of my thesis plan which researches therapeutic contact with children of politically persecuted individuals. It investigates therapeutic perceptions and therapy concepts that aim to treat the effects of political repression on families and especially on their children. These children are potentially in danger of suffering from a secondary form of traumatization, especially in cases where the parents went through traumatic experiences due to captivity, torture, fleeing etc., thereby becoming strongly absorbed and significantly limited in their parental function (cf. ALMQVIST & FORSBERG, 1997, BARON, 1995, BECKER & LIRA, 1991, BRINTON & LYKES 1992, MONAHON, 1997).¹ [1]

In the following, I am concerned with an aspect that became virulent over and over again in the course of this research: The examination of one's own motivation to work in this area and of the shame and guilt feelings, unconsciousness sensations and rage that are produced when dealing with traumatization in research and therapy. (PEARLMAN, 1995). It seems to me important to look at this more closely since the occurrence of intense counter

1 Primary and secondary traumatization can be distinguished by whether the children themselves or whether, primarily, their relatives have been afflicted by traumatizing experiences (cf. SAYLOR, 1993). Indirect traumatizations can occur through observation or through narratives dealing with the violence carried out on people who are close (cf. SAIGH, 1990). BUTOLLO (1997) names three types of indirect traumatization: The children might have observed (as so-called "by-standers") violence against others, including against their family members, they might have lost their relatives or they might live with traumatized relatives.

transference reactions on the part of the therapist is repeatedly reported in the literature regarding counseling and therapeutic work with survivors of torture, and also in the predominant psychoanalytically oriented work with holocaust survivors (cf. BUTOLLO, 1997, DANIELI, 1984, GRUBRICH-SIMITIS, 1979, LANSEN, 1996). [2]

2. Methodological Transposition

My aim was to make a contribution to a theoretically unclear therapeutic area by varying individual investigations. In the framework of a hypothesis generating study, I attempted to approach this topic empirically in three ways:

- Open-end interviews with experts, amongst them two group discussions: How therapists practicing in this area assess the life-situation and the psychological make-up of these children, what type of therapeutic requirements and possibilities are considered in dealing with this clientele and what concrete offers exist in this area. Altogether, I carried out 23 interviews, half in Germany and half in Chile, in very heterogeneous therapeutic facilities.
- A five month research stay at the Latin American "Institute for Human Rights and Psychological Health" (ILAS) in Santiago de Chile, where I was a participating observer and studied the sources. My transcribed field notes, apart from the above-mentioned expert interviews, belong to the empirical material.
- The collection of documented case material: included are the records of three child therapies made by a Chilean therapist. [3]

The evaluation of the German and Chilean expert discussions involved working through a wide spectrum of concepts with respect to the therapeutic treatment of children of politically persecuted individuals (cf. MEUSER & NAGEL, 1991, WAELTE, 1990). During the revision and the processing of my field notes, the reflection upon my own stance as a researcher came into the foreground. The assessment of the case material, which I will not go into at this point, followed a descriptive and an interpretative aspect: On the one hand, how the therapist sees the situation of the child and which treatment objective she pursues, with which methods, and on the other hand, how the attitude of the therapist towards the child and towards his/her relevant caretaker appears to me "metaperspectively". [4]

3. The Reasons for Working in this Area

I started to work in this area, a little bit also to drive out my inner demon, with this very primitive, virtually magic thought that, well, if I work in this area, the risk is not so high because I, too, have experienced a couple of slightly tricky situations, not comparable with our patients, but my husband at his work, I at the university, there were searches, threats, violence ..."

(Commentary of a Chilean therapist)

It seems to be an inexplicitly formulated presumption that one does not get involved with politically persecuted individuals and their children only just "for fun" (even less than in other therapeutic areas), but that there are further-reaching and deeply personal reasons for this. Almost all therapists whom I encountered have asked me, in the course of our discussion, how I actually came in contact with my topic and what my own motivation was:

... I just want to know, perhaps something happened in your life or in your field that made you do this... It makes me wonder that you allow your field to depend on other cultures, cultural differences, I'm not sure whether you're not taking on something more difficult here, where you already have something easy, with the children whom you've already worked with, but to be looking for topics that haven't been worked on that much yet, but that of course is your decision ... [5]

3.1 The researcher

For an open, qualitative approach, the reflection of one's own involvement as a researcher is vital (cf. GYSLING, 1996, KOEPPING, 1984, MUCKEL, 1996). This is even more true for scientific work that deals with dreams and their psychological effects: emerging anxieties, aggressions and work-related disorders have to be dealt with individually and/or in a research-team (cf. MRUCK & MEY, 1996). Also experiencing and working through these effects can open up a significant path for the understanding of the research objective in question. The thesis by DEVEREUX (1973), which contends that countertransference is a crucial point for any science and that even behavioral science data can arouse anxieties, plays an important role here. [6]

What led me to turn to the topic of therapeutic treatment of children of politically persecuted people, besides the historical point of reference of living in the third generation of a country that conducted excessive political persecution? (cf. HARDTMANN, 1997, WELZER, 1997). I would like to approach this question by giving an example in why I went to Chile. To begin with, this question can be answered rationally and is easily understood: I assumed that the expert discussions in Chile would be conducted from a different background of knowledge and experience than the one in Germany. In contrast to the German facilities, the Latin American Institute for Human Rights and Psychological Health (ILAS) and other therapeutic institutions in this field in Chile have extensive experience in therapeutic work with politically persecuted individuals and their relatives and they are familiar with the treatment of second and third generation

children, adolescents and young adults. Moreover, it appeared to me useful to research outside my own cultural context, thereby facilitating an ethnological perspective that seems to me to be necessary in order to work therapeutically with refugees in Germany. This approach requires a reflection upon one's own cultural attitude, i.e. being ready to question certain habitual thinking patterns and to be informed and interested in what other approaches are possible in other cultures (cf., e.g., FRESSER-KUBY & CRANACH, 1999). [7]

The answer to the question of why I went to Chile is hidden in this and also includes the longing and homesickness. The journey to Chile was planned well in advance, combined with the wish to get to know this country, which I had already visited once years ago, more closely. I became aware of the aspect of longing after my return, when I talked about my stay in my thesis team and my colleagues said that I gave the impression of having sought something in Chile, but that I had not found it. In the beginning, I could not explain this, but in the meantime, I imagine that I had unconsciously sought in Chile something like a "solution" or a "healing onset" for the multigenerational psychological consequences that come from repression and political persecution. And from time to time, I held it against the Chilean therapists, as well as the Chilean society, for not having the first and for their outright refusal of the latter. I went to Chile with the high expectation and with the overvalued ideal concept of pushing away the helplessness and fainting feelings that are connected with the subject of trauma, in order to develop a solution-oriented and promising start in the therapeutic work with children of politically persecuted individuals. Chile represented a myth and a projection level and the prospect of overcoming the despair that had just come on at the beginning of my work, in the face of the extent of violent injuries and the relatively low healing prospects. This visionary, but also unrealistic attitude had the advantage of giving me the necessary energy to convert what was a fleeting idea into reality and into an advanced plan, and the disadvantage that the research stay at ILAS, in part, sobered me up painfully, and so that, from time to time, I felt disillusioned and paralyzed. "In the unfamiliar" and during the time of intensive confrontation with the effects of traumatic events, previously unknown psychosomatic complaints emerged and old anxieties revived in me while dealing with the traumatic experiences of other people. In the beginning, the symptoms appeared in an unconscious psychosomatic form, to which I could not gain access. In a later phase, they manifested themselves in more tangible and noticeably tormenting anxieties. However, being conscious and real, they also faded away quickly. Now, some months after my return from Chile, it seems to me that my time there was strongly characterized by the attempt to uncouple the conflict with traumatic experiences from the feeling of loss of control and the inability to act. This was followed by the knowledge that it is one of the most significant experiences and convictions that almost all therapists shared with me, and which I personally experienced during the research process. [8]

3.2 The therapists

The examination of one's own motivation, according to statements of most therapists who work with this special clientele, occupies an exceptionally central position. It enables one to take a new stance and to better understand one's own either very emotional or very detached reactions. A German therapist expresses this in the following way:

... I think it's good when one's clear about one's own motivation, i.e. what source the wish to work with refugees feeds from, and it's like this in our institution that, on the one hand,... there are colleagues here who've ended up beyond their limits... well, almost all have also had such an experience of being between cultures and for this reason have the need to give support to those who've been taken on here as refugees, who have to cope with the adversities of an exile situation, and who are, in the beginning, strangers here and come against a lot of lack of understanding and I believe that's also what everyone has experienced in their background. And now there's also the story of those who come from the German side only and for whom, of course, their family background plays a role regarding fascism. A lot of motivation comes from this area and it's good, of course, to clarify why their motivation is like it is and to untangle one's own family history as to why one would like to work with this group of people.[9]

As is apparent in this interview passage, foreign therapists who live in Germany often had personal refugee experiences and for many German therapists, the examination of their own family history and the involvement of their parents and grandparents in the German fascism played a special role. In one group interview, this connection of one's own past (two of the participants were children at the time of National Socialism) with the fact of working therapeutically with refugee families became evident at a very tumultuous and emotionally loaded passage. Guilt feelings of belonging to a nation that once caused war and exile stood in the foreground, and these led to a strong solidarity and possibly lessened the distance from the refugee clients. At the same time, in the case of the other discussion participants, the memory of their own refugee destiny was awakened, which was accompanied by humiliation and shame. Both the guilt feelings and the feeling of shame brought about rage and indignation towards a frequently ignorant attitude in German society towards refugees. [10]

What often stood in the foreground for the Chilean therapists was their own ordeal and the need to object to the system itself (at the time of the dictatorship) and to object to forgetting injustice (in a post-dictatorial age). A therapist, who had begun by working in a therapeutic human rights organization after the dictatorship, stated that the effects of dictatorship, torture and exile had initially become apparent to him little by little, during discussions with colleagues and that he as a "foreigner" had also been afflicted. Looking at it from this aspect, he began to intensively analyze his own history and then to work in this area.

I've worked in this area for five years. Before that I worked in a (psychiatric) clinic...
When the work with tortured people and their relatives began, I never thought about

working in this field... Many years ago a group of psychiatrists met to talk about the problem of torture and at that moment, when I spoke about the consequences of torture on children, it became clear to me that I, myself, am a child of immigrants. My father went into exile, my family is Bolivian. My father had to go into exile when I was three years old. I've been in Chile since my third year of life. I remained here, got married and I live here and I've never been back to Bolivia. So I, too, belong to a (second) generation, like the traumatized children here. And I'd never thought that this was something that belonged to me, I thought that this has happened to other people, who went to Europe, whose children have stayed on there and they've come back. And at that point, I started thinking about my own history, what happened, and I began my analysis. Well then, I thought a lot about it and little by little it seemed important to me to start work on that assumption and at that time there was a job vacancy at ILAS ... [11]

4. The Necessity for Reflection

From the above account, M.E. concluded that a continuous examination of one's own motivation, as well as the reflection upon the recurring confrontation with the helplessness that compulsively always surfaces in this work, represents an essential condition in the therapeutic field. It allows one to maintain, while working with clients, one's own very necessary boundaries and to distinguish between one's own feelings and those of the client. Furthermore, it seems to me highly sensible to lay open the partly agonizing questions concerning one's own motivation. It is important to talk with other researchers; to what extent do these questions result directly from the issue and are they divided in that they not only have personal relevance, but also relevance for those who work in this field. The difference between both fields of action surely lays in the fact that in therapeutic work there is a direct confrontation with distress. However, for this reason, the therapist can confront this from a more active position, whilst the researcher can more easily keep a distance, but must, at the same time, remain and deal with it from an entirely passive observer role. [12]

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