

# Psychotherapy between cultures: A South-American view \*

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*"Indigenous Americans are incapable of civilization". (Kant)*

*"We South Americans are exiled Europeans". (Borges).*

1. We live immersed in our cultural environment as the fish lives immersed in the water. Ever since our birth, first our parents and siblings, and then the school and those around us, introduce us into a network of meaning patterns and clues through which we discover the world, building it as *my world*, as *our world*. In an ideal personal development situation, we end up moving around in our social and cultural environment 'like a fish moves in the water'. A more adequate rephrasing of that might be that we grow and develop in an inextricable relationship with others and with the symbolic world that we call culture. In this sense, we understand culture as "an historically transmitted pattern of meanings embodied in symbols; a system of inherited conceptions expressed in symbolic forms by means of which men communicate, perpetuate, and develop their knowledge about and attitudes toward life" (Geertz 1983, p.89). Such definition of culture inserts individual experiences within their own cultural contexts in a manner such that our 'cultural identity' is nothing but one aspect of our personal identity (La Roche & Christopher 2008).

2. Nevertheless, the ideal conditions for personal development do not exist. On the one hand, it is impossible to conceive parents so appropriate as to fully meet their children's physical and psychosocial needs. On the other hand, the shared world of meanings and notions that enables us to communicate is in a state of continuous flux. Modern globalization phenomena have accelerated

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social and cultural changes in a way that even if we were to remain all our lives in the same location, we would be condemned to live in a world much of which is ephemeral. Finally, we ourselves change along with growth and development. Our own self –from where we feel and think ourselves, as well as feel and think the others and the world- is transformed, in the same measure as our brain/mind matures and we incorporate new experiences and learning. We internalize new experiences and simultaneously distinguish ourselves from others. Self-identity is construed in relation to “an-other”.

3. Although the personal identity is inextricably linked to the cultural identity, there are situations, such as migrations, where their distinction becomes evident. According to data of the *International Migrants' Organization*, the total number of international migrants has increased during the last 10 years, from 150 million in the year 2000 to 214 million to date. Nowadays, one in every 33 persons in the world is a migrant. The data prepared by the *United Nations High Commissioner for Refugees* show that the number of refugees in 2009 amounted to 15.2 million and the amount of internally displaced has increased from 21 million in the year 2000 to 27 million toward the end of 2009 (OIM/IMO, 2010). We know that migration situations represent a risk factor in the emergence of psychiatric pathology. Naturally, on top of that we must add the historical migratory and displacement processes that merged into nations and continents. Such is the case of the African population that landed in America as enslaved forced labor. Latin America, especially, is a good example of variegated ethnic and cultural mixing resulting from its 500-year history of migrations and internal displacements. In an attempt to classify the Latin-American population, a distinction has been made between ‘Indigenous America’ –predominantly in Bolivia, Peru, Guatemala and México-, ‘Mongrel America’ –applicable to Paraguay, Brazil, Chile, Colombia and Venezuela-, and ‘European America’ –which is the case of Uruguay and Argentina (Sambarino 1980, quoted by Larraín 2001). Other classifications talk about ‘testimonial people’, survivors of high pre-Colombian civilizations impacted by the European expansion that succumbed on its wake, as might be the case of México, Central America and the Andean countries. These countries have undergone a drastic acculturation process, even when the sheer weight of the squashed culture is such that it cannot be totally uprooted and it subsists in multiple more or less concealed forms. These people’s *ethos* is marked by a strong sense of catastrophe. Also, there are the ‘new people’ that emerge from the merger between various European, Indigenous and African ethnic backgrounds amidst a broad cross breeding process. These people are not closely linked to native cultures; the African matrix prevails in some of them –such as in Brazilians, Venezuelans, Colombians and Antilleans-, while the Indigenous matrix prevails in others –

such as Chileans and Paraguayans. According to the 2002 Census; 4.6% of the Chilean population declared themselves to be indigenous and belonging to one of Chile's eight recognized ethnic groups; of which, 604,349 of them, namely 87.3% called themselves *Mapuche* (Gundermann, Vergara & Förster 2005).<sup>1</sup> Nevertheless, genetic studies reveal that over 80% of Chile's population has vestiges of indigenous blood (Acuña, Lop & Rothhammer 2000; Rocco, Morales, Moiraga et al. 2002). Finally, the 'transplanted people' evolved into a massive European migration in places where the native ethnic groups and their culture have all but disappeared. This is the case of Argentina and Uruguay. (Ribeiro 1968, quoted by Larraín 2001). Things get even more complicated when we consider that within the different regions and countries of Latin America there are social classes that tend to identify themselves with some of these collective identities. Thus, for example, Chile's dominant class, its bourgeoisie, takes pride in feeling European, matching a statement attributed to Borges: "We South Americans are exiled Europeans". Naturally, our continent reproduces the relationships of domination that have existed between Europe and the rest of the world throughout the last 500 years. The Latin American dominant classes tend to see their subdued-class compatriots as uncultured, ignorant, lazy; ultimately, as inferiors. In Latin America, racism dresses as classism. In relation to the rest of the inhabitants of the region, the indigenous population is proportionally poorer, with higher illiteracy rates and greater unemployment. In this context, psychiatry and transcultural psychotherapy are in debt with our indigenous minorities. The scanty clinical and epidemiological studies carried out in Chile have shown significant psychopathological differences between the *Mapuche* population and the Chilean population; however, much more research is needed in order to secure information that would be useful toward designing public policies in this respect (Biedermann, Barría, Maass et al. 1983; Muñoz, Marconi, Horwitz, Naveillán P, 1966; Vicente, Rioseco, Medina et al. 1998). At any rate, studies show that the *Mapuche* population seldom seek our Mental Health public services (Vicente, Kohn, Rioseco, et al. 2005)

4. Whoever migrates to a culturally different country must not only learn to communicate in a language other than his/her own, but also, and above all, to handle him/herself in daily life with rules that are often different -even well

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<sup>1</sup>Ever since 500 years ago, the majority of the people of Chile are comprised of Spanish descendants. As opposed to other colonization systems, however, Chile received mostly men immigrants, who then cross-bred with the women that lived there. This assertion is supported by historical documents and DNA studies that reveal that about 84% of Santiago's population has indigenous mitochondrial DNA haplogroups. The same result is obtained from chromosome markers; which reach up to 22%. This means that 84% of the women who originated Santiago's current population were indigenous women. This percentage is likely to be higher in Chile's southern region (Errázuriz 2006).

beyond what is foreseeable- than those learned back in his/her own native land. It is particularly difficult to modify one's own behavioral patterns that govern the manner of 'being with others', because such patterns are ingrained in our implicit procedural memory and were learned during early infancy; they are tantamount to behavioral automatisms about which we have scarce awareness. During last summer's edition of the *Research Training Program* of the International Psychoanalytical Association, held every summer at London's University College –of which I am professor- an associate psychiatry professor of a Chinese University explained to us her cultural entry shock when joining the program. She said that one of her most disconcerting experiences was when the professors, with whom she had consulted about her research project, greeted her with the following courtesy question: "*Tell me, what can I do for you?*" She explained to us that the type of professor-student relationship that such question implied was totally alien to her Chinese culture. In China, she said, students expect their teachers to tell them what to do; on the other hand, teachers never ask students about their expectations.

5. I also had my personal cultural shock experience during my trip to Germany, where I spent 5 years studying at Ulm University toward my post-graduate degree. In the summer of 1985, I joined a language institute in order to improve my precarious knowledge of the German language. For 2 months I shared more than 8 hours a day with a group of about 80 male and female students coming from many different countries from all over the world. We were all supposed to make the effort of communicating with each other in German; which, for all practical purposes became our *lingua franca*. Listening to Norwegians, Ethiopians, North Americans, Italians, French, Koreans, Japanese, Chinese, Polish, Russians, Brazilians, among others, struggling to communicate with their neighbors caused a strong emotional imprint on me; a combination of bewilderment and perplexity and even tenderness. This circumstance, novel to me, intensified by oneiric activity and, finally, a situation occurred in a dream which, through my self-analysis (I was just ending a 10-year period of personal analysis), I understood with the light shed by the biblical myths of Babel and Pentecost. In the dream, I asked myself: How is it possible that all these people –my relatives, the members of my family and I- are unable to understand each other via the use of words, but rather via just looks and gestures?

6. According to the commonly accepted exegesis (see, Drewermann 1982, pp.277-312), the tale of Babel offers one explanation about the diversity of human races, languages, cultures and geographical settlements that restrict exchanges within humankind as a whole. Babel depicts the fundamental and perennially faulty efforts made throughout human history striving for unity. In

this sense, Babel is one of the Jewish People's foundational myths; however, the Babel myth runs counter to the Pentecost myth (Acts 2:1-13). In the latter, the 'gift of tongues' or glossolalia opposes the 'confusion of tongues'. The Pentecostal myth thus prefigures and represents the universal -supra ethnic and supra linguistic- call to understanding. Ultimately, Pentecost affirms that cultural and idiomatic barriers are not insurmountable, that understanding among human beings of different races, languages, cultures and geographical origins is indeed possible. A comparative exegesis of both these biblical tales supports this interpretation (see, Haenchen 1959; Kürziger 1974; Drewermann 1982; Roloff 1984). According to Mircea Eliade (1957), myths are cultural tales created by the human beings in order to ascribe meaning to significant, albeit incomprehensible and mysterious, daily situations. Via the narration of the experiences of civilizing heroes occurred *in illo tempore* –a sacred and primordial time- we emboss the meaning of today's daily life.

This mixture of bewilderment and sympathy –which I lived intensely in 1985 in Germany's Language Institute- I have re-lived on innumerable occasions with many foreign patients who during the last 20 years have sought my professional help in Chile for a therapeutic treatment for the difficulties occurring because of their recent migration into the country. These two myths –Babel and Pentecost- illustrate well the communication situation that takes place between a therapist and his/her patient, particularly when they come from remote cultural and language environments. Psychotherapeutic work, particularly that between couples whose languages, ethnical backgrounds, cultures and geographical latitudes differ, fluctuates 'between the confusion and the gift of tongues', between 'Babel and Pentecost' (Jiménez 2004). To be sure, both Babel and Pentecost constitute extreme circumstances which, as all mythical events, serve as 'exemplary models' (Eliade 1957). In our daily lives, as in therapeutic situations, things do not come to the point of a total lack of communication or a perfect communication. Our human nature forces us to muddle through the twilight zone of the so-called 'pidgin languages'.

7. 'Transcultural psychotherapy' becomes a public health problem in those countries with a high immigration rate, when it is evident that ethnic and language minorities do not consult Mental Health Centers or not often enough. (Griner & Smith 2006; Jim & Pistrang 2007; Sue 2006; Sue & Zane 2009). A successful psychotherapy hinges on establishing shared inter-personal and inter-subjective grounds between patient and therapist (Bordin 1979). Consequently, the topic of cultural and language differences gains the foreground. Different strategies have been developed in order to solve this problem, all of which confront the need of implementing culturally-sensitive treatments (CSTs), in contrast with the dominant trend of health centers of

accepting only empirically-supported treatments (ESTs), whose designs do not consider cultural or ethnic variables (La Roche & Christopher 2008). In Chile, for example, public health policies have been enforcing the application of psychotherapeutic and pharmacologic treatments whose efficacy has been validated in the United States, although they flagrantly ignore the cultural and genetic peculiarities of our population.

8. The clinical experience in intercultural psychotherapy has highlighted various relevant topics including the need to examine the congruence and incongruence of cultural backgrounds between therapist and patient; how to communicate with patients at the verbal and non-verbal levels; how racism affects inter-racial encounters; the problem of the ethnic or cultural identification with the therapist; the problem of managing cultural transferences and counter-transferences; how to treat therapists' blind spots or cultural rigidities; how to provide appropriate psychotherapy to refugee patients, particularly those who have been chased out of their countries of origin. In sum, how to offer therapies that will do justice to culture, psychotherapeutic treatments that would be culturally adequate, sensitive and relevant (When-Shing Tseng 1999). Language differences carry a special weight, inasmuch as the language is inextricably linked to the cultural identity and the personal identity. This topic was illustrated at the origins of psychoanalysis when Joseph Breuer treated Anna O. This patient switched from German to English every time that she was bogged down with intolerable memories and feelings. The acquisition of a second language –a situation that is quite frequent among immigrants and their children- may deeply alter the sentiment of individual and cultural identity (see, Zulueta 1995; Amati Mehler, Argentieri & Canestri 1990).

Most clinical work and intercultural therapeutic research has occurred in situations in which the therapist belongs to the mainstream culture or ethnic group and the patient to the minority group. My own 5-year clinical experience as psychoanalyst at the Ulm University, in Germany, where I provided psychotherapeutic treatment to some 80 patients, confirms Cheng & Lo's opinion (1991), who outline the advantages of an intercultural therapy when, contrariwise, the therapist belongs to a minority group. As a mainstream outsider, a minority therapist is equipped to offer his/her patient a certain advantageous neutrality and objectivity. In my experience, treatment by a foreigner makes transferences -of those rejected and unusual aspects that have been split and projected away- more likely to emerge (Jiménez 2004). Next, I shall submit to you a few vignettes that illustrate this situation.

9. For starters, in more than one occasion, differences of origin, culture and language prevented initiating the therapy. For example, a 24-year old

student who was seeking help because of a state of homosexual panic, refused to let himself be treated by me, declaring that he was incapable of tolerating my South American origin and my "horrible" German (sic.). This youngster was a beautiful example of what was once called the 'Arian race', making it clear to me that he was a member of one of Austria's oldest families, direct descendants of Charlemagne. Obviously, his idea that I would be incapable of appreciating (and much less admiring) his brilliant mastering of the German language, inflicted a serious narcissistic wound on him

Another patient, who retained my psychoanalytical professional services four times a week for over 4 years, illustrates very well the vicissitudes of cultural transference and counter-transference. In what follows, I will reproduce in detail a single session of his treatment:

A few seconds after lying on the couch, Mr. M says that, by greeting, he saw in my face that I was deeply depressed. (*Surprised, I realise that this afternoon I don't feel anything near to depression*). He is quite aware that this could be nothing but his subjective impression, something that could be determined, like other times, by the previous session. I ask him what does he mean with this. He answers that after yesterday's session he said to me that he doesn't like me. After the session he kept thinking about my question as to why he doesn't like me. It's a difficult question because it's a rather visceral sensation. But he did think something. He thought, for instance, that he doesn't like people that don't look happy, and I am one of them. Most of the time he has the impression that I am gloomy. Furthermore, for him, how people look is very important. There are faces that he simply doesn't like. I am, for instance, too much of an Asiatic type. He supposes that I am a mix of European and Asiatic blood, probably Chinese.

(*I am very surprised, I have never thought that somebody could say that I look Chinese; I feel immediately as a foreigner, degraded.*)

I ask him why Chinese. He surely knows that native South American inhabitants are of Asiatic origin—that could explain the Asiatic features of someone coming from South America—but why Chinese and not Indian. He replies that for him Indians have a rather red skin. My skin is, in turn, much more yellow.

(*I notice that my unease increases along with his racist declaration, and I feel reluctantly confronted with my own narcissism; the patient is attacking my self-image as a European. I think of the racist prejudices of the Chilean middle upper class against our native population, the shared fantasy "we are European people living in Exile" (Borges). I feel rejected and think of discrimination and its consequences. With increasing anxiety, I visualize myself as a Jewish prisoner in a concentration camp. If we were in 1937 and not in 1987, this*

*fantasy could be brutally enacted. With shame, I remember that session with my own analyst, a Jew, when I told her about the anti-Semitic prejudices of my family; suddenly I had the feeling that I was attacking her and said, "but you are not like the other Jews". I immediately lamented having said that. She replied that what I said was often heard in those times in Germany. I felt miserable).*

Mr. M says that he feels a strong pressure on his neck and head. I verbalize that for him as a German it's not easy to put into words racist fantasies, because they can rapidly become ideas of extermination. He agrees with my interpretation adding that he feels shocked by discovering how racist he actually is. His parents don't like Jews, but he now realises how similar his thoughts are, although he has always openly supported the idea that we are all equal, etc. I say that classifying me as Chinese and not as a European-like Indian he is telling me how different he perceives me, how distant, in the antipodes from Germany, and how difficult it is for him to accept this difference. I add that he feels not only distant from me but that I am inferior, belonging to an inferior race. He agrees by saying that my difficult German accent, my appearance, makes me so distant and different. I say that by declaring his rejection of me, his contempt because of my inferior origin, is the most effective mean for me to understand how he feels in the relationship with me and often in daily life as well. It is also a way to overcome here an extreme feeling of inferiority. He sighs deeply, with relief and declares: 'Sometimes, in the railroad station of my own town, I feel so unlike and apart from people, as if I were a China man just arriving from his homeland.' Then he talks about how difficult and anxiety-provoking new situations are for him, meeting new people. I show him his conflict here. On the one hand he comes to treatment hoping to find something new and different that can help him, but, on the other hand, every novelty he finds awakes in him hatred and contempt, because he feels degraded, rejected that rapidly transform in extermination fantasies. All this makes him feel alone isolated and depressed. It is this depression that he saw reflected in my face. He agrees and says that all this is part and parcel of his prejudices; there is no reason to hate me. I reply that this is his conflict, and he is constantly afraid that I will not understand the division inside him and react offended, with the feeling of being personally attacked. He declares: "The pressure in my neck and head is like a struggle between two enemies". By the end of the session, Mr. M adds: "It's been a long time since I felt such pressure as today". I ask him if the use of past tense means that the pressure vanished. He answers back: "No, this is the right way to say it like, for instance, 'It's been a long time since it was as beautiful as today'". ("So schön wie heute war es seit lange nicht mehr"). Assuming that I have grasped the meaning, I promptly



replied: „You said, as beautiful like today... So...” He interrupts me and ends the session with the words: “Yes, it was a good session”.

This session illustrates a therapeutic work from the counter-transference position of the rejected party, the inferior party, while it also reflects –as if in a mirror- the psychoanalyst’s own racial prejudices. It is not only the patient, but also the analyst who discriminates and harbors ethnic animosities. It also shows how becoming aware of such prejudices –within the context of a willingness to mutually understand each other- indeed strengthened the therapeutic bond, thereby enabling the therapeutic change.

From among all the analytical treatments that I performed in Germany, there was one in which the other party’s multi-linguistic ability and culture played a key role. Mr. U. -who was 35 years old and a prolific dreamer-, began to bring to our sessions his dreams in which his university French teacher appeared. This teacher –the patient would say to me - looked just like me. Mr. U. felt especially attracted by France, where he had lived for long periods of time and to where he traveled several times a year. He also told me about numerous dreams in which the French-German borderline played a role. It became increasingly clear that somehow he likened me to his French side. His German language was rich in subtleties, and he was quite apt at depicting his internal states. When he thought that I had not understood a given expression, he would repeat it to me in French or in English while tending to choose Latin-origin German words. Evidently, although his gracious and considered behavior was an attempt on his part to make contact with me by overcoming the language barrier, his kindness only represented one side of the coin. His pathological jealousy was linked to a significant aggressive charge projected onto women and which emerged from oedipal conflicts. When I discovered this, I paid special attention to interpreting the negative transference, without allowing myself to be seduced by his kindness and intellectual brilliance. Mr. U. had abandoned his parents’ home at age 17 and his father died soon thereafter. His mother had remarried to someone that Mr. U. detested; his jealous feelings toward her mother were defended by intense idealization. During his analysis with me, Mr. U.’s mother committed suicide by throwing herself into the river that crossed his native town. This event triggered intense guilt feelings in him for having abandoned her. For a while then, the treatment focused on the patient’s relationship with his mother. His ambivalent unconscious relationship with her became evident in the following dream: *Mr. U. is in Paris, in L’Île de la Cité, just on the border of the island, at a place called Square du vert gallant.* The patient then interrupted his narration to state that another name is ‘vagabond point’, because it was used as a meeting point for criminals and prostitutes. *His mother appears in his dream* –he goes

on- *obviously as a prostitute*. Seeing her like that makes him extremely anxious and he tries to persuade her to quit that sort of life. She rejects him violently and decidedly. *Mr. U. gives up, and decides to run away from L'Île de la Cité via the Pont Neuf Bridge*. The patient then quips that, strange as it might seem, the Pont Neuf Bridge is Paris' oldest bridge. *Mr. U. then takes the Metro underground train and travels along for a long while, emerging at the Monge Station. Suddenly, he finds himself just in front of rue D'Ulm, Ulmstreet*. (The German town where I used to work was, precisely, the town of Ulm). Later on he says to me something that I already knew; namely, that the Ulm street takes its name after one of Napoleon's victories. Mr. U. mentions that there was this saying in his family that a French ancestor along his paternal line had arrived in southern Germany with the invading army. *But Ulm Street was dark and gloomy, full of beggars that hounded him asking for money. Mr. U. was aware that they were miserable Third world immigrants. And he was very afraid that they might attack him*.

The analysis of this highly-symbolic dream started from the end. The patient remembers that the Austrian army surrendered at the battle of Ulm without posing any resistance, in view of the superiority of the invader.

He then reflects about the income differences between rich and poor Third World countries and says that he ignores why I came to Germany. Might I be running away from political violence? (This was the time of Pinochet's dictatorship in Chile) or perhaps I came to Germany in search of economic benefits? After picking up more associations, I articulated an intervention whose approximate sequence I reproduce below: I submit to him that, on the one hand, those immigrants that appear in his dream are very needy beggars, but in his associations he refers to an invader so powerful that when confronting him he has no alternative but to surrender totally. I then add that he has mixed feelings towards me. Despite trusting me with his most needed and rejected aspects, I soon become an invader, and the same happens with his relationships with women.

The image of his mother represents a very contradictory relationship with women, a relationship that remains isolated from the rest of his mind, just like *L'Île de la Cité* in Paris. On this island, along with the ideal image of Paris' Notre-Dame, his mother appears as a prostitute. I then remind him that in his analysis he has often referred to his girlfriends on the same terms. The attempt to rescue his mother in the dream also matches his rescue fantasies regarding his girlfriends. The Pont Neuf bridge represents the oldest bond and, at the same time, the most recent bond that he establishes with me in the analysis; analysis that is also represented by his underground Metro trip. With respect to the Monge train station, Mr. U. recalls that, in Spanish, Monge

sounds like 'monje', which means monk. His associations lead him to Umberto Eco's novel, *The Name of the Rose*. He then remembers particularly the monk -who in the novel speaks an amalgam of European languages- who behaves in the vilest manner. In view of these associations, I ask him: Here, among us, who is the one who speaks an amalgam of European languages, seeking to escape from an accusation of murder, just like the monk in *The Name of the Rose*?

This vignette shows how languages, geography, the national history and the unconscious biography amalgamate with one another, just like one's cultural and personal identities are indeed amalgamated. Likewise, the identification between my person and the French teacher, the city of Paris and the French language, they all became an effective vehicle toward lifting old and deep-rooted repressions. In the background stood the image of the father, represented by the Napoleonic invader. The role played by power and domination in intercultural dialogues also appears pristine clear.

10. The vignettes that I have submitted above for your consideration, pose the subject matter of the relationship between personal identity and cultural identity. Throughout the construction of their personal identities, individuals share certain affiliations, characteristics or culturally-determined group loyalties that contribute toward specifying the subject and his/her sense of identity. As a person, I feel part of a genre, of a social class, of an ethnic group, of a nationality, with a given sexual orientation, etc. all of these identities are an integral part of my overall identity and integrate me to a given human collective. "Collective identities are continuously recreated by individuals through the same means through which they express themselves as actors with a national identity; but, at the same time, the collective identities make these actions possible. This is why a collective identity is both the means as well as the result of the individual identities that it resourcefully organizes" (Larraín 2001, p.35).

The importance of ethnicity and culture in psychological development is based on the fact that the ethnic identity is governed by the same mechanism that builds the identity in general. In fact, it is impossible to think of an identity devoid of ethnic nature. The latter roots itself firmly in each individual through the matrix of symbolic rituals that convey specific cultural values instilling a culturally-imbued world vision. This is how preconceptions and unconscious assumptions about causality, time, space and human nature are arranged, as well as the basic belief systems and the culturally-specific styles of relating to others. Such tenets are the foundations over which our personal identities are developed. Within the context of our reference group we develop our sense of self and of others. Our earliest introjections and identifications –as measured

by the objective, cultural and ethnic world- determine the structure and content of our psychic reality. Consequently, it is not surprising that both transference and counter-transference are affected by these factors, in the same manner as both the therapist's as well as the patient's perceptions are affected by their respective psychic realities, which, in turn, are affected by their own idiosyncratic ethnic and cultural histories. If, for example, an individual is raised in Anglo-Saxon environment that promotes individualism, autonomy, independence, self-containment, egocentrism and self-control, then, the self-construal concept and the psychic structure will probably contain such components. In the case of individuals whose self-identity was influenced by different demands in their interaction with others, where solidarity and concern for the other take precedence over the needs of the individual, his/her self-construal –and with it the transferences- would be affected by such factors (Javier & Rendon 1995). Cross-cultural psychology and the very recent branch of neuroscience, the cross-cultural neuroscience, have studied this type of differences comparing representative samples of European populations with Asian groups. Transcultural neuroimaging studies have shown that one's own cultural background influences the neural activity that lies under cognitive functions, of both high and low-level (Han & Northoff 2008). These investigations, quite naturally, as well as all other cross-cultural studies, serve as background information to the therapist who works with patients from other ethnic groups. Nevertheless, it is necessary to take them with caution, because the psychotherapist must design case-by-case personalized strategies which might or might not match the ethnic stereotype. A study carried out in our country, within the context of the collaborative doctoral program with Heidelberg University, showed a population with high scores of independence and inter-dependence in their conceptualization of the self, a genre ideology slightly more egalitarian among women, youth and persons with greater economic income and with a tighter adherence to family norms than to social norms (Ohlaberry, Biedermann, Crempien, et al. 2010).

From the perspective of the impact of culture on personal identity, the concept of *ethnic unconscious* has been introduced in order to refer to those individual unconscious processes that can only be explained with reference to their specific cultural background. "The ethnic unconscious is repressed material that each generation shares with the next and is shared by most people of that ethnic group" (Herron 1995, p.525). In both Mr. M.'s as well as Mr. U.'s material, such repressed material is clearly identifiable.

However, the question arises: How was this particular collective vision of self and others constructed; which, as German cultural identity and Chilean cultural identity, respectively, interact in the material submitted? Cross-cultural studies have shown that almost all world populations differ from the European

population in key aspects such as their self-construal. Europe's collective identity –particularly that of countries with protestant influence- was constructed through a long historical process that coincides with the development of what has been denominated as Modernity.

12. A review of some of Europe's main thinkers, since the Illustration, show the increasing influence of the seminal concept of the instrumental reason, understood as the ability to use the reason to dominate the nature in order to bring progress and happiness to humankind. This concept was seen as the opposite of religious and metaphysical world views, typical of Europe's old feudal societies. The modern age defines itself as the kingdom of reason and rationality, which has displaced religion, prejudices and superstitions; ultimately the traditional customs and mores. Thereupon springs from within it a powerful sense of trust in itself, of superiority regarding the past as well as other societies yet untouched by modernity. It was toward the end of the 18<sup>th</sup> century, the century of Illustration, when the West clearly realized undergoing epoch-making times; which they baptized as modern. The illustrated discourse, an expression of a historically-determined self-consciousness –itself the product of modernity– highlighted the ideas of science, progress and reason.

It is interesting, in this context, to once again read Kant's 1784 opusculé's definition as to: What is the Illustration?:

The Illustration is man's liberation from his own culpable incompetence. The incompetence means the impossibility of making use of one's own his intelligence without the guide of others. This incompetence is indeed culpable because its cause does not reside in the lack of intelligence, but rather in [the lack of] decision and courage to use it for our own sake without third party guardianships. ¡*Sapere aude!* Have the courage to use your own reason! Such is the *leitmotif* of the Illustration! (p.25).

Liberation via reason and knowledge. In commenting Kant's referred opusculé, Michel Foucault (1993) states that modernity is a critical attitude that positively demands an "analysis of our own selves as historically-determined beings", in order to overcome "all that is not indispensable to constitute ourselves as autonomous subjects".

But the instrumental reason also exhibited a stark contrast with simultaneous developments in other parts of the world. The Modernity, which emerges and expands from the Anglo-German-speaking countries, also coincides with the conquest and colonization of the Americas. The optimistic and triumphalist notion of Europe's own cultural identity as being rational, contrasted with the notion of non-Europeans as "others", regarded as predominantly chaotic and irrational. The Anglo-German Europe conceived itself as the center where history was being made, classifying other cultures as peripheral and marginal.

Reason was about to liberate humankind from unhappiness. Knowledge and science were the keys to education and progress. The non-European world was then the world of unhappiness and backwardness. It was then that Europe's self-assigned civilizing mission emerged. Certainly, we know of the historical vicissitudes of such ideological project, of modernity's unmet promises, of the internal critique to the omnipotence of instrumental reason, etc. Nevertheless, such missionary ideology is, to this day, the one that supports the global process of Westernization and expansion of the capitalist forms of production. As an example of the ideological vision of the American inhabitants that Europe has sustained for centuries, allow me to reproduce just one text from Emmanuel Kant (1775):

Indigenous Americans are incapable of civilization. They do not have the strength of motivation; because they lack affection and passion. They are not attracted to each other by love, and so they are also fruitless. They barely speak, never caress themselves, worry about nothing, and are lazy (Kant 1775, quoted by Larraín 1996, p.57).

We may find similar texts in 19th century thinkers such as Hegel, Schelling, Marx and Engel, as well as in French and British intellectuals of the time. However, most surprising of all is that fully similar ideas may also be found in many texts of several Latin American intellectuals, of very different political and ideological orientation. This is particularly clear of 19<sup>th</sup> century South American positivist thinkers. For example, Faustino Sarmiento, an influential Argentinean politician who lived many years in Chile, stated explicitly that the Latin America's true battle was between civilization and barbarism. The first was represented by Europe and the United States; the second was the result of Latin America's racial inferiority (Larraín 1996).

Therefore, it is not difficult to formulate the following thesis: Europe's collective identity, its cultural identity, which was formed along with the development of Modernity, conceives its Latin American other as inferior. Latin America's ruling elites, in turn, most of them<sup>2</sup>; namely, with a varying albeit significant European ascendance, feel as "Europeans in exile", displacing their

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<sup>2</sup>The Spanish word for 'creole' (*criollo*) was applied to anybody born in Europe's American colonies. A 'creole' language is one that has emerged in communities forced to coexist with other communities of different languages and that are constituted by elements coming from both languages. This applies especially to languages -based on the Spanish, French, English, Dutch or Portuguese- formed by the African and indigenous communities of certain originally-colonial territories. The term 'creole' emerged in Haiti in order to denominate the language of those slaves that learned their French from their masters. 'Creole' is a term related to the verb 'to raise or educate' (*criar*). Thus, the word 'creole' may also derive from the word 'creature' or child, alluding to the European idea that primitive peoples are like children in need of being educated. At any rate, it is quite evident that it is not possible to talk about psychiatry or transcultural psychotherapy without referring to the context of colonial power and domination. The 'creolization' of the world appears to be a growing phenomenon that goes hand-in-hand with globalization and increased migration. (Kirmayer 2006).

contempt to that sector of the population that they identify with America's indigenous people. Nevertheless, every time that a Latin American establishes a close contact with the European culture, he/she finds that Europeans feel us as inferior others. This is not part of the official discourse, to be sure, but rather, of their "ethnic unconscious"; which, as repressed material, is historically conveyed from one generation to the next. Inasmuch as Modernity began to include Europe's excluded minorities, such as the working class and women, the cultural identity centered on reason and the autonomy of the individual, in contrast with an irrational other, it became part of Europe's ethnic unconscious and, as such, it prevails to this day. These are the prejudices that emerge in the transference and counter-transference interplay that I presented to you above.

Certainly, cultural identities as well as personal identities are dynamic and, therefore, they are subject to a continuous transformation process. Currently, for example, Europe's Eurocentric discourse is becoming increasingly politically incorrect. On the other hand, important German intellectuals have raised a potent critique against the primacy of instrumental reason as the only guide to economic and social development. I would add that the existence of a collaborative program between two Chilean universities and Heidelberg University indeed constitutes one step toward overcoming the ideological paradigm of exclusion and neo-colonialism. What now stands before us is our mutual recognition as equal subjects, where our differences and diversity are actively contributing toward our mutual enrichment. All things considered – and this is an enduring contribution of psychoanalysis, itself the product of an internal critique to modernity, recognizing the other as equal entails becoming aware of our prejudices.

13. Finally in a symposium about Mental Health & Culture we must not forget that psychotherapy is itself a typically western product, which emerges in Europe toward the end of the 19th century as an expert response to the stress of modern life generated by the acceleration of socio-cultural changes. Modernity is a complex phenomenon that covers economic, social, political and intellectual dimensions. But, 'modern' is also a form of self-awareness, a specific way of experiencing life. Thus, in the concept and practice of Western psychotherapy there underlies a concept of person that is culturally determined. The cultural concept of the person that underlies western psychotherapy is based on European values of individualism. This individualistic and egocentric concept of the person can be contrasted with more sociocentric, ecocentric or cosmoscentric views, which understand the person in relation to the social world, the environment, and the cosmos (Kirmayer 2007). The modern man must be continuously reformulating his vital goals and learning new abilities in order to survive in society. Today's

individual considers himself 'capable' not only after developing an understanding of self, but also when able to harmonize his current interests and future projects with his psychological inheritance from the past. Although psychotherapy –since Freud and psychoanalysis- was established resorting to a rhetoric of 'illness' and 'cure', within the context of the dialectic between the individual and its changing cultural and social environment, it must be understood as an expression of modernity's generalized reflexivity. More than a social adjustment phenomenon it should be understood as a reflecting methodology about life and about planning it (Giddens 1995 [1991]):

"With respect to the expression of generalized reflexivity [psychotherapy] fully shows the dislocations and uncertainties that arise from modernity. At the same time, it participates of that combination of opportunity and risk; typical of the order of late modernity. It may promote dependence and passivity; but, it may also give rise to compromise and re-appropriation (retranslated from Giddens 1995 [1991] p.229).

This manner of understanding psychotherapy, as an exercise in self-reflexivity<sup>3</sup> is compatible with one of the most recent concepts introduced in psychotherapy: *Mentalizing*, as the capacity to "imaginatively perceiving and interpreting behavior of oneself and others as conjoined with intentional mental states, shorthand for which is *holding mind in mind*" (Allen, Fonagy & Bateman 2008, p.348). Peter Fonagy and colleagues suggest that promoting in the client or patient the ability to mentalizing is the most fundamental common factor among all psychotherapeutic treatments, beyond psychotherapeutic persuasion or technique.

Certainly, when we define psychotherapy in a broad and ample manner as: "a practice involving a designated healer (or therapist) and an identified client (or patient), with the particular purpose of solving a problem from which the client is suffering or promoting the health of the client's mind" (Wen-Shing Tseng 1999, p.132), it is then possible to think in psychotherapeutic practices inserted in very different cultures, with very different conceptions about the person, the mental health and the cure.

Naturally, the ability of metalizing; namely, of holding the other's mind in mind, becomes a central competence at the time of treating psychotherapeutically patients coming from a cultural world alien to one's own.

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<sup>3</sup>The concepts of 'reflective' and 'reflexive' have been used optionally and synonymously to describe the process of critically thinking about the premises of own thoughts and knowledge. In the history of science and epistemology these concepts have different meanings, however. 'Reflection' refers primarily to critical and speculative thinking in general. 'Reflexivity', on the other hand, refers in a more limited way to self-referral; and consideration on the premises of one's own thinking. (Lawson 1985)



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