

Book Review

Curtis Steele, Editor

Counselling and Psychotherapy with Refugees

by Dick Blackwell
Jessica Kingsley, 2005
124 pages, \$27.95

Reviewed by Celia Simpson

How I wish this book had been available when I was in the first of my 3 years working on a specialist counseling project with asylum seekers and refugees* in Liverpool! The book was a response to a government policy of dispersing refugees to different parts of the United Kingdom, which reduced their ability to receive contact and support from the refugee communities and existing specialist agencies in London.

Counselling and Psychotherapy with Refugees is clear, well-conceived, and does not overwhelm therapists trying to find their way in this complex field. Dick Blackwell, a psychodynamic psychotherapist and supervisor, has a wealth of experience gained through working with the Medical Foundation for the Care of Victims of Torture and Organised Violence. His book provides therapists across modalities with an accessible framework as it concisely raises issues for us to reflect on while adapting our own way of working with such clients.

The book models the grounded, less-is-more approach of the effective therapist in this context. We are encouraged to develop our understanding through the meeting with the individual client. Blackwell emphasizes that refugees do not have any specific or characteristic psychopathology but may share certain typical experiences of persecution, violence, loss, and flight into exile. The four parts of the book—Setting the Scene, The Refugee's Perspective, The Therapist's Perspective, and Important Dimensions (e.g., use of interpreters, advocacy)—are followed by a useful appendix of references and resources.

Blackwell only uses the term "trauma" in the lay sense. He argues,

It is useful to be aware of the list of symptoms which constitute PTSD as they are experiences often presented by people who have suffered traumatic events. The nightmares, flashbacks, startle responses, etc. are real enough. What is unhelpful is to regard them as some sort of medical syndrome to be treated and then cured, rather than as painful and distressing aspects of experience which have to be related to and understood. (p. 19)

Personally, I would have liked this book to include information about the impact of trauma on the body/mind, as I remember my need for this when I began working with asylum seekers and refugees. Some clients were confused about their responses, and providing myself with information helped me hold and support them. For instance, I found the pressure-cooker metaphor helpful to share with clients (i.e., taking control and letting out a little pressure at a time). Another helpful metaphor was Rothschild's "putting on the brakes." I also used grounding and relaxation techniques (and tapes in other languages), drawing, and cognitive exercises. A key challenge of this work is to blend in these techniques/approaches as appropriate within the ongoing client-therapist dialogue.

The therapeutic approach with these clients is Adult-Adult, in which clients need to pace the work—and choose the focus—themselves. Blackwell cautions:

In this approach transference and regression are not encouraged. They are recognized and understood, but not regarded as therapeutic tools for "working through." Regression and dependency are to be recognized and addressed by enabling the client to mobilize adult ego functions to contain regressed feelings, and by being explicit about the limitations of the therapist's powers. The therapist therefore functions not as a parent figure but as a representative of human society, and of hope. (p. 21)

I learned the unhelpfulness of too much

empathy in this work. This is such a challenge when you may be providing a consistent relationship within the sea of inconsistency and loss that is the client's reality. I remember working with a 17-year-old African woman who was pregnant. She had escaped the rebel leader who had abused and shot her and had been helped by the church to escape the country. What a strong invitation I felt to reassure, to give false hope that she was now safe. Yet the reality was that she would probably be deported once she turned 18, after the intrusive questions, rejection letters and harassment. Blackwell stresses the role of the therapist as bearing witness to the client's experience, which involves "the recognition and validation of the client's experience at all its different levels. This activity of recognizing, validating and struggling to make sense of violent, chaotic and disorienting experiences is the core of the work" (p. 20).

The issues and feelings this work brings up can overwhelm the therapist. It is important to have space in which countertransference responses can be accessed, honored, and processed. Blackwell emphasizes that this is not an area in which to go it alone; the therapist needs strong collegial support and good, specialist supervision. When the therapist starts this work, I think such support is particularly important.

The refugee's and the therapist's perspectives are approached by "looking at different levels of social and psychological discourse, different levels of human life, and recognizing the way they are part of the matrix of experience through which we all become, and go on becoming, who we are" (p. 16). A "matrix of experience" is constructed starting from the wide layer of context. The Political Level of experience is discussed first, followed by the Cultural Level, then the Interpersonal Level, and finally the Intrapsychic Level. Impact on any one level of experience will affect the others. We are asked to consider, for instance, refugees' reality of "cultural transition" and how this may impact them. I found this framework helpful for entering clients' frames of reference and thinking about where they have come from and how they might be attempting to make sense of where they are and of what has happened to them.

The same layers of experience are referred to in the third part of the book, which focuses on therapists' frames of reference. Therapists are encouraged to acknowledge and question their own political and cultural lens and to reflect on their own interpersonal and intrapsychic processes. My experiences working in this field reinforce the necessity of continually questioning within and across this matrix. Hearing these clients' experiences of loss, persecution, and exile has challenged me deeply. I have had to question my assumptions about therapy, cultures, identity, and civilization—indeed, about the very OKness of the human race, capable as we are of such cruelty and objectification. Also, my belief in the "humane" nature of our own society has been vigorously questioned.

Providing counseling and psychotherapy for refugees who want it should be increased. Alongside this, we need to develop our awareness of injustice in the world and in our own countries and of the impact these can have on individuals. How easily we collude in not facing and not feeling these injustices! And if we do acknowledge them, the next layer of protection may be to find comfort in the hope that our democratic societies will wake up and treat people better. As a society, we need to open up the debate about values. Is it our ability to consume more or our capacity to love—within and outside of our own groupings—that gives us our humanity?

**A note on terminology: In Britain, the term "refugee" is used in either a legal or a generic sense. "Refugee status" is temporary or permanent legal status granted to an "asylum seeker." In this book, the term is used generically to refer to all those people seeking refuge in a host country, whether or not legal status has been given.*

Celia Simpson is the new reviews editor for the Institute of Transactional Analysis (ITA) journal, Interactions, and its newsletter, the ITA News. She can be reached at integrate@theredkite.net.