

Adrift on the Med: My Struggle to Join the Group

Peter Zelaskowski

Presented at the International Association for Group Psychotherapy and Group Processes' III Regional Mediterranean Congress, Barcelona 2008

Once a boundary is crossed, something has changed. (Agazarian, 1991)

I moved to Barcelona in September 1999. I came here with my Spanish wife (she too is a migrant from León in the west of Spain) and children. I remember the tremendous excitement and anticipation at the prospect of living in Barcelona, a city still basking in post-Olympic fame and grandeur. It seemed everybody was wowed by where I was going and fully understanding of why I was leaving. Nonetheless, I had doubts. I was fearful of leaving so much behind, of not having the resources to cope with such a change and had little idea of whether I could fit-in in my new home.

Migration is a change ... of such magnitude that it not only puts one's identity on the line but puts it at risk. One experiences a wholesale loss of one's meaningful and valued objects: people, things, places, language, culture ... (Grinberg and Grinberg, quoted in Bledin, 2003)

The aspect of my journey I wish to discuss here is that of my entry into the group, in particular, my first encounters with the local group psychotherapeutic milieu. I will apply ideas developed by Yvonne Agazarian in her group-as-a-whole systems theory to this process. The entry phase into a group is central to the subsequent development of the migrant / host culture relationship. It is at this point where the seed is laid for the subsequent identity and belonging crisis so common to the migrant. I would argue that migration necessarily involves a crisis of identity and belonging in the individual and that migration is a primary source of crisis in the host group or culture. This has been so with mass migrations throughout history and, in particular, during the twentieth century. Fascism, for example, can be understood as any concerted efforts to resist the differentiation crisis brought on by migration.

Foulkes' concept of the matrix (an invisible network of communication serving as the backdrop for all here and now activity) helps us understand just how the migrating individual not only is shaped by (the more manifest process) but also shapes (the latent process) the matrix of the host group, irrespective of whether they have adopted a total immersion role or a total avoidance role as ways of managing the migrant identity and belonging crisis. The avoidant migrant, so typical of the 'expat' English abroad, is in mourning for the lost group and seeks out the safety of his/her cultural, linguistic or religious subgroup to help reduce his sense of loss and resolve the threat posed to his/her identity by the host group. It is through the formation of 'functional' subgroups within the larger group, according to Agazarian, (1991) that the hitherto undifferentiated large group can begin to develop and grow through differentiation. The immersed migrant who has not sought out an expat subgroup generally tends to defer his/her crisis of loss, identity and belonging for a later date.

The journey from the north of Europe to the South is a very familiar and well trodden path. In the popular mind it is a kind of secular pilgrimage, expressing devotion to the twin gods of sun and sand, an experience which typically turns out to be an immersion in more primitive parts of ourselves. We head south to escape our heads, to get closer

to our hearts, bodies and genitals. I grew up with a very limited set of fantasies and stereotypes about southern Europe, a distinctly part-object (a term coined by Melanie Klein to describe how the infant splits the world, primarily mother, into good and bad parts – so part-object thinking is primitive, reductive, simplistic...) view of countries such as Spain. For the vast majority of north to south holiday makers it is the part-object primitive non-complex version of a place and people that is sought. Who wants to deal with life's complexities when you're on holiday? For the migrant, the person who stays on once the holiday has terminated, this part-object view becomes the initial frame of reference through which all experience is filtered. Through initial culture shock and other regressive pressures, local people and local culture gradually begin to be experienced as strange and unloving, like incompetent and hated parents – a set of internal representations defined by a failure to neither conform to my part-object view, "it just wasn't like I expected", nor meet my most basic needs, "they don't do it like we do back home". To survive and adapt the individual drifts towards subgroups that occupy spaces at the margins of society and culture, subgroups that become a refuge, a ghetto and breeding-ground for hatred and pooled distortions of the local culture.

Emigration means leaving behind the familiar world of external objects and, often, the internal world of familiar objects. A new immigrant, who has left behind his/her mother, father, and motherland, might be regarded as psychologically in the position of an infant, dependent on the new mother-country to provide protection and nurturing. (Bledin, 2003)

My migration south to Spain subsequently enabled me, as a psychotherapist working here in Barcelona largely within the English speaking communities, to empathise with the many people I come across in my practice struggling with themes that resonated with my own journey: loss, isolation, depression, culture shock and cultural dislocation, identity struggles, over-indulgence, addiction,.. In particular, the gradually emerging awareness of the centrality to my identity of the group I left behind, combined with the gradually unfolding struggle to join my new group.

Joining the group

Despite that the founding figures of British Group Analysis, Foulkes and de Maré, having clearly impacted in the Spanish group psychotherapy scene, my initial experience was both confusing and distressing. It became quite clear to me early on that some fundamental differences between the two psychotherapeutic cultures between which I was migrating were going to impose clear limitations on the nature of the role I could assume in my new chosen home. My initial experience helped clarify much about the scale of what I had embarked upon and helped set an emotional tone for the struggles awaiting me. At the time I (naively?) believed that the existence of the European Union (EU) and the concomitant dissolution of national boundaries would somehow make this all relatively straightforward. On the contrary, some boundaries are now more difficult to cross within the EU as states and significant elements of their populations have become increasingly protectionist in relation to their cultural, economic and linguistic space. Added to which, something of an arrogant British colonial mentality began to surface in me – I imagined that I would be exporting group analysis to Spain, which was of course just what they needed, because 'Man! have they got problems with time and organization!'

As group psychotherapists we are frequently working with the experiences of leaving and joining and the concomitant impact on the dynamics of the group. The powerful impact on the joining individual, the significant and potentially destabilising consequences for the group: the regressive forces unleashed, the renewed sibling rivalries, the lost safety of the old group..... My arrival in Spain (it didn't occur to me that I was moving to Catalonia – one is never joining the group one imagines oneself to be joining!) coincided with a number of major congresses in the field of group and gave me an extraordinary opportunity to begin to get to know my new group and, in it, begin to negotiate a role. At both I experienced an embracing and welcoming warmth. However, I left both feeling angry, confused and uncomfortably aware of myself as an obsessive and anal northern European. None of the small or large group sessions started on time. Sessions were cancelled either to make up for lost time or make way for charismatic speakers. Where was the respect for the group and its boundaries. I felt literally 'at sea', with a sudden defining internal image of myself floating aimlessly, having cast myself adrift on the Mediterranean. Of much deeper importance for my career opportunities, I learned that to survive as a psychotherapist here you need to be either a psychologist or a doctor or a psychiatrist (I was a teacher before training as a psychotherapist) and that there was no place for lay psychotherapists such as me! I thought I'd be exporting group analysis, in fact in local terms, I wasn't even qualified! The only thing I could really offer, for which there was a market and for which I was qualified, was English teaching!

Joining a group

The new member joins a group with a repertoire of possible roles he could adopt. This repertoire is organized on the basis of a more or less me / not me hierarchy. So some roles may closely correspond with a self ideal, others to familiar and ingrained intrapersonal and relational behaviours.

Most typically in a group, an individual will helplessly, unwittingly and persistently repeat, in the group, the major role behaviors that they learnt in childhood, thus keeping their relationship with their environment stable and predictable. (Agazarian, 1991)

From the moment of entry, although the role finding starts well before, there then occurs an unconscious process of role negotiation involving the search for some kind of cohesion between the needs of the new member and the needs of the group. Often during sessions in which a new member is welcomed it can feel like a job interview, with the group interrogating the new member and unconsciously communicating something like, 'we have a vacant role in our group and we want to know whether you fit the bill'. In Agazarian's model it is as if the member volunteers for a role. I have observed on several occasions the phenomenon of new members being welcomed and seeming to have experienced a positive first session and then unexpectedly disappearing. Typically, this is the new member that the group encourages to divulge too much, who then cannot bare the shame of over-exposure. Earlier in my career I believed that seeming comfortable and telling one's story were signs of successful selection, preparation and adaptation. However it is clear that the group's hostility can be disguised by a caring embrace. If I observe this to be happening, with a view to facilitating the new member's entry and survival in the group, I generally intervene to limit the excessive sharing of the new member and to shift the focus onto the group's unconscious attack.

Understanding the differences between interpreting to an individual and interpreting to the group-as-a-whole has important implications for the therapist. For example, when the therapist makes an individual interpretation to the scapegoat, no matter how phrased, the therapist has joined the group communication pattern to deviant and has thus reinforced the pattern and joined the scapegoating! (Agazarian, 1987)

Depending on the developmental phase of the group, the new member is a potential candidate for a number of possible roles. According to Agazarian (1991) the major dynamic purpose of roles in a group 'is to provide a stabilizing function for both the individual and for the group-as-a-whole'. For example, in the early leader dependent phase the group may be in need of somebody to take on the role of the patient. For the group-as-a-whole the identified patient serves a developmental and a containing function. The identified patient becomes the member in need of the therapist's attention, the test of his clinical competence or omnipotence (depending on the degree of dependence). The therapist's response helps either reinforce the group's dependence or prompts the group to turn more towards each other. The identified patient role is brought into being by the ever-present interpersonal process of projective identification, through which the group disavows itself of any need it may have for the therapist by locating that need in the group patient.

Projective identification in groups is the simple activity of projecting the unacceptable, unacknowledged part of the self into a convenient role as a "container" and treating it as unacceptable. The most obvious form of this is the creation of the role of the group Scapegoat or the group Identified Patient. (Agazarian, 1987)

In this context the phenomenon of the premature drop-out after the first session arises out of the tremendous unconscious pressure imposed on a new member to carry something for the group. This can cause them to feel pushed or manipulated into a particular role, which they subsequently reject, by refusing to identify with the projections and either reasserting their familiar role preferences or leaving. This is particularly true of the scapegoat role, which Agazarian describes as being a 'containing role' during a transitional phase in the group's development while it passes from a stage characterized by fusion and merger to a stage in which the group begins to explore internal differences. The scapegoat volunteers by producing behaviour that is deviant to group norms – thus threatening the established unity or harmony of the group through symbolizing change and difference. The group will seek to expel the scapegoat if it does not feel ready to address its internal differences.

For the immigrant, there is considerable pressure (role suction – a concept central to Agazarian's ideas) to slip into the costumes of patient and scapegoat. The over-representation of migrant groups within the penal and mental health systems is a clear and depressing reminder of this phenomenon. My Polish uncle spent many of the last years of his life in a chronic state of depression. He died in a psychiatric institution. He, like my father and grandparents, was part of the massive wave (over a quarter of a million) of Polish immigration in post-war UK, amongst whom figures for severe mental health difficulties were disproportionately high. In a recent report on the more recent post-accession (to the EU) wave of Polish migration to the UK (nearly half a

million alone between May 2004 and June 2006) a similar depressing but unsurprising story is told:

The proportion of Polish migrants with untreated mental distress is high. These migrants are mostly unwilling to avail themselves to institutional help because of stigma related to mental health problems and stereotypical negative view of this kind of help. (Galasiński et al, 2008)

Migrants as pioneers

At a time when immigrants to the UK are asked to 'prove their worth' and at a time when mass migration to Spain is subsiding, when the governing Popular Party has been proposing that immigrants undertake cultural and linguistic education, the role negotiation that takes place at national boundaries is clearly a profound contemporary issue. Spain is in great need of immigrants to complete its harvests but has little taste for immigrants to take on the role of full citizenship.

In my own case, I have accepted that my role as an anal northern European has some local value, however, I have done this on the outside of the local group therapeutic culture. Instead, I have found familiar therapist subgroups that have helped me both manage my transferences and projections and at the same time acquire a sufficient level of professional validation while working here. I belong to the Barcelona Network of English Speaking Therapists (www.barcelonanest.com) a multidisciplinary group that has provided me with a sense of legitimacy and belonging. I have also found work on two university based therapy trainings, both committed to the lay therapist. Many of the art therapists trained by Metafora (www.metafora.org) and for ten years accredited by the University of Barcelona (now accredited by the Universidad de Pompeu Fabra) were originally artists or from other 'lay' professions. Many of the Dance Movement Therapists trained by the Autonomous University of Barcelona (<http://pagines.uab.cat/dmt/>) come from a dance background. Both provide for me a safe subgroup from within which I feel that there is some hope of challenging the prevailing clinical model of what it means to be a therapist within Spain. Both trainings promote the idea of the trainee as pioneer in a new but not-so-welcoming world, negotiating some kind of permit for entering the professional and organized world of therapy. The pioneer role for some students provides an enabling and energizing sense of purpose and direction. For others, it generates much anger and resentment.

On both courses I conduct a large group experience and in both it is the norm for a majority of the students to arrive late. On a number of occasions I have been alone at the start of the session quietly reaffirming to myself the value of maintaining safe, secure and reliable boundaries while under intense pressure to take my eye off the setting. This has not been easy but I believe my insistence on starting and finishing on time, a basic group analytic value and the least we can do, has allowed the groups to begin to explore issues around authority, conflict, cultural identity. Some of the students who have been more successful in opening new doors have told me that the experience of the large group helped them in the struggle as a pioneer to find their voice in a hostile world.

Finally, most, if not all, of the clients in my private practice are struggling with issues emerging out of their experience of migration, whether it be isolation, criminality, addiction or relationship difficulties, I feel that my at times painful and frustrating

Zelaskowski, P. (2008) *Adrift on the Med: My Struggle to Join the Group*

experiences of striving to open doors as a group psychotherapist in Spain have given me the means to be able to build at least some kind of empathic bridge between us.

Bibliography

Agazarian, Y.M. (1987) 'Group-as-a-whole Theory Applied to Scapegoating',
Website: Systems-Centered Training

<http://sctri.com/index.asp?page=/Press/GEP/unpublishedPapers>

Agazarian, Y.M. (1991) 'Introducing the Dynamics of Systems-centered Group
Psychotherapy', *Website: Systems-Centered Training*

<http://sctri.com/index.asp?page=/Press/GEP/unpublishedPapers>

Bledin, K. (2003) 'Migration, Identity and Group Analysis', *Group Analysis*, Vol. 36,
No. 1, 97-110.

Bledin, K. (2004) 'What's in a name? Foulkes, Identity and the Social Unconscious',
Group Analysis, Vol. 37, No. 4, 477-489.

Galasiński D. et al, (2008). *Migration, Stress and Mental Health: An Exploratory
Study of Post-accession Polish Immigrants to the United Kingdom*. University of
Wolverhampton, Centre for Health and Social Care Improvement.

peterzelaskowski@gmail.com

www.groupworks.info