

**Boomerang Effect of Cultural Self-Awareness: A Heuristic Study**

**Creusa A. J. Brigatti**

**A Research Paper**

**in**

**The Department**

**of**

**Creative Arts Therapies**

**Presented in Partial Fulfillment of the Requirements  
for the Degree of Master of Arts at  
Concordia University  
Montreal, Quebec, Canada**

**September 2006**

**© Creusa A. J. Brigatti, 2006**



Library and  
Archives Canada

Bibliothèque et  
Archives Canada

Published Heritage  
Branch

Direction du  
Patrimoine de l'édition

395 Wellington Street  
Ottawa ON K1A 0N4  
Canada

395, rue Wellington  
Ottawa ON K1A 0N4  
Canada

*Your file* *Votre référence*  
*ISBN: 978-0-494-34584-9*  
*Our file* *Notre référence*  
*ISBN: 978-0-494-34584-9*

**NOTICE:**

The author has granted a non-exclusive license allowing Library and Archives Canada to reproduce, publish, archive, preserve, conserve, communicate to the public by telecommunication or on the Internet, loan, distribute and sell theses worldwide, for commercial or non-commercial purposes, in microform, paper, electronic and/or any other formats.

The author retains copyright ownership and moral rights in this thesis. Neither the thesis nor substantial extracts from it may be printed or otherwise reproduced without the author's permission.

**AVIS:**

L'auteur a accordé une licence non exclusive permettant à la Bibliothèque et Archives Canada de reproduire, publier, archiver, sauvegarder, conserver, transmettre au public par télécommunication ou par l'Internet, prêter, distribuer et vendre des thèses partout dans le monde, à des fins commerciales ou autres, sur support microforme, papier, électronique et/ou autres formats.

L'auteur conserve la propriété du droit d'auteur et des droits moraux qui protègent cette thèse. Ni la thèse ni des extraits substantiels de celle-ci ne doivent être imprimés ou autrement reproduits sans son autorisation.

---

In compliance with the Canadian Privacy Act some supporting forms may have been removed from this thesis.

Conformément à la loi canadienne sur la protection de la vie privée, quelques formulaires secondaires ont été enlevés de cette thèse.

While these forms may be included in the document page count, their removal does not represent any loss of content from the thesis.

Bien que ces formulaires aient inclus dans la pagination, il n'y aura aucun contenu manquant.

  
**Canada**

## ABSTRACT

### Boomerang Effect of Cultural Self-Awareness: A Heuristic Study

Creusa A. J. Brigatti

Considering my recent immigration to Canada, and understanding that my identity has been profoundly shaped by the culture of the group in which I grew up, I became interested in investigating the possible impact of my cultural background in the therapeutic relationships with my clients; a concern that led me to the discussion of *cultural awareness*. With the demographics continuously changing around the globe, the literature in the field of mental health demonstrates the increasing need for cultural awareness in order to avoid cultural assimilation or malpractice in the clinical and research settings. There is, however, a lack of practical examples of *how* professionals can actually achieve such awareness.

Founded on the ideas of Edward T. Hall (1976), the purpose of this heuristic self-inquiry is to share the path I took to expand my own cultural awareness, and, by doing so, to demonstrate that an art therapist could approach such a task by leaving her or his comfort zone and creatively working with possible countertransferences to the experience. During a two-month cross-cultural art therapy experience in Peru, I investigated my own cultural countertransferences through visual and written journals. As I journeyed inward, ‘forgotten’ cultural assumptions and worldviews that were rooted in my childhood surfaced to my conscious mind: they haunted my dreams, stirred my emotions, and culminated in an encounter with the *Shadow* side of my personality. Now I remember; now I am more aware.

## ACKNOWLEDGMENTS

I acknowledge the financial support received in 2005-2006 from Hydro Quebec (Graduate Award), MEQ (Ministry of Quebec Education) Student Mobility Bursary, and Power Corporation of Canada Foundation.

My most heartfelt thanks to all my friends, colleagues, professors and instructors, who patiently supported and encouraged me along this journey, in special:

- The Art Therapy group that participated in the cross-cultural practice experience in Peru in the summer of 2005;
- Lynn Kapitan, PhD, ATR-BC, supervisor of the art therapy group in Peru, who ‘prescribed’ the transformative ‘remedy’ of *playing* for my initial resistances to the heuristic experience – I am keeping the prescription!;
- The entire community of Alto Cayma, Arequipa, Peru;
- Louise Lacroix, MA, ATR, ATPQ, my research advisor, who guided me through the process of bringing my truth to birth with much warmth, flexibility, and competence; and
- John Gilbert, my husband and greatest supporter, and Tina Witham, a generous friend, for their editorial expertise.



The completion of this work is dedicated

to the memory of my father,  
who was always ready to play and daydream;

...

to my mother,  
who, to the best of her abilities, supported my curious and  
independent character;

...

and to John Gilbert, my partner in life:  
I couldn't have done it without your ongoing love,  
support, and encouragement.

## Table of Contents

<b>List of Figures</b> .....	ix
<b>Introduction</b> .....	1
<b>Chapter One</b>	
Introducing Myself.....	4
My Research Project.....	10
My Hypothesis.....	11
My Questions.....	11
Main Assumptions.....	12
Definitions of Relevant Terms.....	12
<b>Chapter Two - Methodology</b>	
Art Therapy and Research.....	15
Art Therapy and Heuristics.....	17
The Heuristic Research Method.....	18
A Critique of Moustakas' Heuristic Method.....	21
Concepts and Processes of Heuristic Research Method	
Tacit knowing.....	23
Identifying with the focus of inquiry.....	23
Self-dialogue.....	23
Intuition.....	24
Indwelling.....	24
Focusing.....	24
Internal frame of reference.....	25
Phases of Heuristic Research.....	25
Initial engagement.....	26
Immersion.....	26
Incubation.....	27
Illumination.....	30
Explication.....	30
Creative synthesis.....	31

### **Chapter Three – Literature Review**

#### **Cross-cultural Issues in Therapeutic Relationships**

Expanding on Culture.....	32
Cultural Unconscious or Ethnic Unconscious.....	34
Intercultural Communications.....	35
Cultural Awareness and the Therapeutic Relationship.....	36
Issues in the Therapeutic Relationship.....	37
Building Blocks of Culture .....	41

Transference and Countertransference .....	44
--	----

#### **Creative Expression**

The Many Faces of the Image.....	53
Creative Expression and Social Action .....	54
The Image and Countertransference.....	54
Dreams .....	55
The Squiggle Game.....	58

### **Chapter Four – Conducting the Study**

Setting .....	60
---------------	----

#### **The Community of Alto Cayma**

Gatekeepers and Key Informants.....	61
The People.....	62
Art Therapy in a Community Context .....	64

Participants.....	66
-------------------	----

Co-Researchers .....	66
----------------------	----

Methods of Data Collection.....	66
---------------------------------	----

Information on the Community .....	67
------------------------------------	----

Methods of Organizing and Synthesizing Data.....	68
--	----

Data Analysis .....	69
---------------------	----

<b>Chapter Five – Findings and Discussion.....</b>	<b>73</b>
--	-----------

Validity in Heuristic Research.....	73
-------------------------------------	----

Answering Primary Question.....	75
1) Motherhood.....	76
2) My perception of women’s roles in a Latin society.....	80
3) An encounter with my <i>Shadow</i> .....	88
Answering Secondary Question.....	97
The Phenomena of Progression and Regression.....	101
Creative Expression and Countertransference.....	102
Integrating the Experience into Personal Context.....	103
<b>Chapter Six – Final Comments.....</b>	<b>107</b>
Relevance and Limitations of the Study .....	110
Possible Future Directions.....	111
Creative Synthesis.....	111
<b>Appendix 1 – Consent Information Letter.....</b>	<b>115</b>
<b>Appendix 1A – Carta de Informacion de Consentimiento.....</b>	<b>116</b>
<b>Appendix 2 – Consent Form.....</b>	<b>117</b>
<b>Appendix 2A – Carta de Consentimiento.....</b>	<b>118</b>
<b>References.....</b>	<b>119</b>

## List of Figures

Figure 1 – A Moment of Introspection.....	29
Figure 2 – Motherhood.....	78
Figure 3 – Woman With a Bundle.....	82
Figure 4 – Women and Bullfighting.....	86
Figure 5 – Ancient Wisdom.....	89
Figure 6 – Ne Me Quitte Pas.....	92
Figure 7 – Letting Go of Control.....	95
Figure 8 – Lightness of Being.....	113

## INTRODUCTION

Why should mental health practitioners care about culture? Because culture influences every aspect of human experience, and it is in turn influenced by the ideas and behaviors of the members of the culture (Brodsky et al., 2004; Coseo, 1997; Loftsdóttir, 2002; Tseng & Streltzer, 2004). Further, because no one is free of cultural biases (Hall, 1976), the cultural make-up of a client and of a therapist is bound to influence the therapeutic encounter.

As North American demographics shift, issues concerning intercultural communications have become an ethical responsibility in the field of mental health (Goldman, 1994). There seems to be a concern (Beiser, 2003; Coseo, 1997; Hocoy, 2002), however, that art therapy's assumptions and values, originated in a dominant Euro-American context, might be imposed on communities considered minority, which would characterize cultural assimilation or malpractice (Hocoy). Perpetuation of racism seems to be at the top of the list of the many dangers of disavowing possible cultural imposition by mental health practitioners (Perez Foster, 1998; Sue & Sue, 2003; Tseng & Streltzer, 2004). Cultural awareness, which is the ability to identify and transcend hidden aspects of one's cultural experience (Hall, 1976), could avoid such malpractice (Hocoy). Little has been written, however, on *how* professionals can actually achieve such awareness.

Edward T. Hall (1976), an anthropologist considered by many as the founder of intercultural communication studies, argues that due to an inherent need for stability and predictability, we often seek out groups in which people tend to behave basically in the

same way we do. Consequently, the way we behave is taken as the norm and is often outside of our awareness. Hall suggests that *the way* one can become aware of one's usual system of behavior is "by interacting with others who do not share that system" (p. 39) and by "using oneself as a sensitive recording device... of every reaction or tendency to escalate" (p. 45) during such interactions.

Therapists' over reactions and 'tendency to escalate' (Hall, 1976) in a therapeutic encounter are understood as manifestations of the phenomenon of countertransference. Following the Jungian perspective, the exploration of such phenomenon has been encouraged for over half a century now (Steinberg, 1990), for it can help mental health professionals to deepen their understanding of potentially hidden messages within the therapeutic encounter.

Therefore, following Hall's (1976) suggestions, I joined an art therapy group for a two-month cross-cultural practice experience in Peru; an immersion program that lends itself well to the research of *cultural awareness* due to its practical aspect. Little I knew then of the path to which my initiative was leading me. Like a boomerang that when thrown in the air surely returns to its point of origin, my trip abroad took me back to my origins; it initiated an intense inward journey, awakening 'dormant' cultural assumptions of mine and culminating in an encounter with the *Shadow* side of my *Self*.

The primary focus of my work is a heuristic exploration of my own countertransferences that emerged during the experience in Peru. My purpose is to demonstrate, by means of a self-investigation, one way in which art therapists could expand their cultural awareness.

The discussions around the need of cultural awareness in the mental health professions are complex and often controversial, encompassing many more angles than I could possibly address in this paper, due to the complexity of the topic and my emergent knowledge of it. Nevertheless, it is my belief that such an exercise will further my ability to provide my clients with more empathic and ethically sound interventions.

This paper is organized into six chapters: chapter one introduces elements of my personal history as they relate to my investigation,<sup>1</sup> and describes the project; chapter two describes the methodology; chapter three is a literature review studying cross-cultural issues in the helping professions, transference and countertransference in therapy, and the use of creative expression as a means to further professional and personal growth; chapter four includes a detailed description of how the study was conducted; chapter five presents and discusses my findings; and chapter six defines my final arguments including the relevance and limitations of the study, speculating on possible future directions, and, finally, it presents a creative synthesis of the study.

---

<sup>1</sup> A heuristic investigation places the researcher at the center of the study and requires a truthful introduction of the researcher's personal history linked to the investigation (Moustakas, 1990).



## CHAPTER ONE

### Introducing Myself

Marshall R. Singer (1998) states: “In terms of human behavior ... there exists (for people) only subjective reality, that is, the universe as individuals perceive it” (p. 97). He argues that even the way one perceives things is influenced by cultures. Therefore, what follows is a description of how I *learned to perceive* the environment in which I grew up, and how that perception shaped my decisions starting from adolescence. The passages illustrated here are relevant to my present heuristic investigation for they form the foundation of my cultural experience. I went as far as I felt comfortable in my narrative, taking care to portray my story truthfully while remaining respectful to my parents and siblings.

According to Singer (1998), no two human beings react to external stimuli in the same way. Hence, I cannot say my upbringing can be considered a Brazilian norm, and neither can my perception of the Brazilian culture be generalized. I have learned, however, that certain phenomena with which I have personally struggled are believed to be particular to the Brazilian society and have been observed in larger groups. Therefore, the reader will find some reference to supporting literature in this section, but for the most part of it, due to the heuristic nature of my investigation, the narrative that follows is personal.

I was born in Brazil, in a Catholic working-class family in 1967. My family lived in the countryside of the State of Sao Paulo, and my parents, both of Italian descent, worked in the sugarcane fields. I am the youngest of five siblings, and the second girl.

Brazil is the largest and most populous country in South America, and it is also “the world’s largest Roman Catholic... nation” (Wikipedia, n.d., Brazil). Ford, Vieira, and Villela (2003) state that, in general, the Brazilian familial structure is still considered patriarchal, i.e., husbands are considered the household providers and maintain moral superiority and control over their wives’ sexuality. My father was the one who wanted a fifth child, and his will prevailed. Already caring for four young children, and helping in the fields to supplement the family income, my mother had no time or energy to spend with a newborn. Soon, however, I learned that I had her attention when I was sick; so I was often sick. This distorted way of relating to the world was corrected in my early 20’s, but I still often make sense of how I perceive the world around me through my body.

My mother was a strong-willed woman overall, and aspired to provide a better future for her children, but she was often confronted by my father’s apparent lack of ambition. Somehow, she convinced him that we should move to a town with a better school. I was two and a half when we moved to an industrial town in the State of Sao Paulo, where I lived until I was 18, and where my family remains until today.

Gender distinction seemed to be the norm for educating children. My father treated the boys harshly, so that they would become tough. My sister and I, especially me because I was the youngest, were pampered by him and in turn were expected always to be ‘good girls,’ look pretty and never get angry, ‘because girls are ugly when they are angry,’ I was told. I remember being terrified of losing my father’s love, so I bottled all kinds of angry feelings inside and kept being nice. Further, our neighborhood was safe, but I was not allowed to play on the streets, even ride a bike, because I was a girl. For all those restrictions I resented being a girl. Nevertheless, I was very close to my father since

my mother was always too busy to play, probably due to an unbalanced division of house chores.

Ford et al. (2003) contextualize my perceptions about my restrictive upbringing. Gilberto Freyre (as cited in Ford et al.), a Brazilian sociologist, has studied the phenomenon of gender distinction in the Brazilian society and explains:

*Rua* [the street] is associated with the male, public and political domain, or realm of danger and change, whilst *casa* [the house] is associated with the female, private, personal, domestic domain, or the realm of safety and continuity. Elaborating this gender distinction in sexual terms leads to the notion of the male as active, adventurous, initiating and knowing, and the female as the passive, negative and innocent. (p. 54)

By the age of eight, I had already developed a passion for reading, and Portuguese translations of books such as *Tistou of the Green Thumbs* (Druon, 1957) and *The Little Prince* (Saint-Exupéry, 1971), both from French children's literature, were among my bedside readings. The freedom I perceived in such stories expanded my horizons and engendered in me an early desire to explore ways of breaking free from the parochial environment into which I had been born.

On the pragmatic side, however, I had my mother reminding me of our poor status, and of how useless were my 'dreams,' since, as a woman, I was expected to be married by the age of 20, have a house, a husband and children for which to care. That was the path taken by most of the girls in my community; it sounded like a death sentence to me.

In spite of an almost general compliance with an early marriage, it was not happiness that I perceived in my surroundings; it was instead dullness and depression. Women seemed always so helpless and hopeless. It was as if they had resigned to a fate that slowly sucked all *joie de vivre* out of them. A fate they could not fight, a spell they did not know how to break, or some sort of masochism? I still do not have the answer to this question. Some men seemed oblivious; others seemed to display an immense sense of entitlement, and the great majority both.

When my father died, in 1977, I became very silent and even closer to my books. None of my siblings shared any curiosity for what books represented to me. My aspirations were considered to be wholly fantastical, and the evident lack of mirroring made me feel 'different' and out of place. My mother rejected the idea of re-marrying, even though she was only forty-two; she let us know that she had no interest in 'reporting' to another man. As far as I was concerned, I had lost the one person in the family, besides myself, who had the ability to dream.

Recognizing my passion for studying, my mother contradicted her discourse on the uselessness of aspiring for something different than a marriage at 20, and, instead of 'training' me in the house chores, she encouraged me to study to 'become someone.' Through studying I slowly developed strength to confront my fate as a woman in a Latin environment, learning at some point, though, that everything has a price.

I won a full scholarship for an exchange program abroad when I was 17. My decision to accept it was foreign to my family, especially to my mother who feared for my safety, but I traveled anyhow. I spent a year in the United States, where I learned

English, studied arts for the first time, and learned how to ride a bicycle! Upon my return to Brazil, I moved to another city to go to university and work.

Throughout my 20's, I completed a B.A. degree in Language/Translation and worked for a large telecommunication company, traveling often for business within Brazil and abroad. By my early 30's, I held a managerial position and I was independent financially. But my life lacked balance in the area of personal relationships. Because I felt somewhat guilty about my academic and professional achievements, I downplayed their value before my family, especially my siblings; nevertheless, slowly we grew distant from each other. My romantic partners often pointed out my independent and curious character as the reason why they could not stay by my side, and my romances became a succession of short stories filled with jealousy, possessiveness, misunderstandings, and betrayal.

I spoke my mind, which ran contrary to what was expected from a woman in the groups in which I participated. I refused to comply with an archaic myth that a girl should save herself for a 'prince,' who would come one day and rescue her from her womanly frailty, protect her from all evil and make her happy, for she then belonged to him. I was not shy in letting people know I despised the idea entirely.

I was thirsty for life. I wanted to exercise the right to make choices, to pursue my dreams and ambitions, and I hoped that one day I would meet someone who shared the same values; someone capable of accepting my independence. Even though nobody said it explicitly, it is my experience that such aspirations are not well received or encouraged in a Latin, Catholic, and sexist environment.

Something felt twisted inside though, and I became conscious that I had been presented with and internalized a dichotomous way of understanding women's roles in that society, for while I had been *educated* to comply with the fate of being a submissive housewife, I also felt my mother expected me to resist on behalf of us both. We spoke about her marriage, and I learned that it had not been her choice, and so it is my impression that she lived by my father's side with resignation and resentment. I felt lost, not knowing what 'role' to play.

The lack of balance was also apparent in my professional life. I had become workaholic in a competitive and sexist environment even though I found competition abominable. Further, the increasing gap between the poor and the rich in Brazil seemed positively correlated with the violence in the large cities, and two young colleagues of mine were brutally assassinated in the city of Sao Paulo in a short span of time. It felt like the entire 'culture' was spitting me out.

By that time, I had resumed taking art courses. With the initial purpose of lowering my level of stress, arts also renewed a sense of hope and empowerment that I had lost along the way. With no relationships that truly required me to stay in Brazil, I decided to emigrate to Canada seeking a safer and more egalitarian environment.

The integration of personal material into my investigation occurs in chapter five.

## My Research Project

Throughout my first year in the Creative Arts Therapies (CATS) master's program (art therapy option), I experienced several episodes of countertransference – specific feelings and emotional responses aroused in the therapist by the specific qualities of a client (Sandler, Dare, & Holder, as cited in Ross, 2000). Somewhat amazed and puzzled by the power of such feelings, which sometimes changed my mood and bothered my appetite, I regularly discussed them in supervision and often used creative expression – spontaneous drawings, paintings – to further my understanding of them and of their place in the therapeutic relationship.

Due to my immigrant status in Canada, chances are quite high that all my therapeutic encounters will have an intercultural flavor. I also envision myself returning to Brazil to work with impoverished communities as an art therapist. Thus my interest in investigating the possible impact of my cultural background in the therapeutic relationships with clients, and my reactions to this 'crossing of borders:'

Upbringing in South America



North American education and  
living experience →

Return to South America as  
an art therapist

My concerns regarding the impact of my cultural background in the therapeutic relationship relates to the development of *cultural awareness* in the mental health profession. Hall (1976) suggests that one can expand cultural awareness by interacting with people who do not belong to one's comfort zone, and by noticing in oneself every

‘tendency to escalate’ (Hall) during such interactions. Hence, I decided to have a first-hand experience on how art therapists could expand their cultural awareness by investigating possible cultural countertransferences during a cross-cultural art therapy experience. Further, the cross-cultural art therapy summer program in Peru (presented in chapter four) offered me the opportunity to experience the challenges of returning to a Latin environment while being part of a group supervised by an experienced art therapist.

My study was inspired by Coseo’s (1997) investigation of ‘culturally-charged reactions’ (Coseo) towards clients from groups considered minority. My research differs from hers mainly in the definition of the setting. She conducted her study in the United States, her comfort zone (Coseo), whereas I, following Hall’s (1976) suggestions, became an outsider in an environment very similar to the one in which I grew up, and that I chose to leave for perceiving it as hostile.

### *My Hypothesis*

The experience of being immersed in a cultural group different than the one in which I feel comfortable will help me to become conscious of possible internalized and unconscious cultural biases and misconceptions.

### *My Questions*

- 1) Primary question: Which countertransference issues were most likely to have been informed by cultural differences?
- 2) Secondary question: How did the creative expression process help?



### *Main Assumptions*

- Issues of ethnic transference and countertransference would emerge due to cultural differences;
- Racism may occur in both directions;
- People from the community may react to my multicultural identity: I am Brazilian, nevertheless I am White,<sup>2</sup> blue eyed, and a Canadian citizen;<sup>3</sup>
- The creative process would serve as a container for the personal exploration;
- It would be an enriching experience, appreciated by the community and by the art therapy students.

### *Definition of Relevant Terms*

**Culture** has been defined in hundreds of different ways. For the purposes of this paper, I will refer to Tseng and Streltzer's (2004) definition: "Culture refers to the unique behavior patterns and lifestyle shared by a group of people that distinguish it from other groups" (p. 1). I also wish to highlight Winnicott's (1971/1992) idea of 'inherited tradition' when addressing culture, which makes me think of values, beliefs, customs, ideas, crafts, etc, that are transmitted from generation to generation for various reasons, such as pride, necessity, tradition, lack of choice and even unquestioned loyalty, or compliance, to religious or societal norms.

**Cultural awareness** is "the first in a series of steps towards achieving multicultural

---

<sup>2</sup> There is a general assumption that Brazilians have dark colored skin and eyes.

<sup>3</sup> Based on my personal experience, looking for better opportunities abroad, having double nationalities and *enjoying* life in a foreign culture is not always well understood in Latin countries where the family closeness is regarded as the norm.

competence” (George, Greene, & Blackwell, 2005, p. 132). It is defined as “the process of conducting a self-examination of one’s own biases towards other cultures and the in-depth exploration of one’s cultural and professional background... [it] also involves being aware of the existence of documented racism in healthcare delivery” (Campinha-Bacote, 2002, para. 3).

To develop cultural awareness means to be able to identify and transcend hidden aspects of one’s cultural experience – assumptions, worldview, biases, expectations – which might have sunk under one’s conscious mind over time, and that can only be accessed through conscious effort (Hall, 1976).

**Ethnic group** and **cultural group** are used interchangeably throughout the paper to refer to “people who are linked by common ancestry and are regarded as part of a group by the individual and society” (Coseo, 1997, p. 146).

**Ethnic or racial countertransference** refers to the therapist’s feelings or attitudes toward a client because of client’s ethnic or racial background (Tseng & Streltzer, 2004).

**Ethnic or racial transference** refers to “a situation in which a patient develops a certain relationship, feeling, or attitude toward the therapist because of the therapist’s ethnic or racial background” (Tseng & Streltzer, 2004, p. 9).

**Ethnicity** is defined “as the degree of identification of a person with an ethnic group that is in some way his or her group of origin” (Herron, 1995, p. 524). Dokter (1998) reminds us that ethnicity “involves conscious and unconscious processes that fulfil [*sic*] a deep psychological need for identity and historical continuity” (p. 147).

**Intercultural communication** is defined by Bennett (1998) as “communication between people of different cultures” (p. 3).

A **Minority group** is “a group that has little power or representation relative to other groups within a society” (The American Heritage Dictionaries, 2000, 2<sup>nd</sup> definition). It is a qualitative rather than a quantitative definition; for instance, in a sexist society, women are considered a minority even if they represent the largest group in numbers (Pederson, as cited in Goldman, 1994).

**Racism** is defined by Coseo (1997) as: “The belief that humans are subdivided into distinct hereditary groups that are innately different in their social behavior and mental capacities and therefore can be ranked as superior or inferior” (p. 146).

By **creative expression** my focus is on consistent written and visual journaling as a means to record and process dreams, self-dialogues, discussions with my on-site supervisor and research advisor, and also peer discussions.

## CHAPTER TWO - METHODOLOGY

### Art Therapy and Research

Even though research is not a new practice in art therapy, the emphasis on how it should be practiced, and to what aims, has become more explicit over the last two decades (McNiff, 1998). Whereas some art therapists openly question the need for research in the area – ‘we *all* know art therapy works!’ – others strongly argue that if art therapists want to be taken seriously by the general public, including managed care companies, we *must* get out there and ‘count teeth’ (Gantt, 1998) – a reference to quantitative studies. Pertinent literature in the field (e.g., Bloomgarden & Netzer, 1998; Kapitan, 1998; Linesch, 1995; Lusebrink, 2004; Manheim, 1998; McNamee, 2004, McNiff, 1998; Spaniol, 1998) demonstrates that the research debate is well alive, and that besides acknowledging the distinctions of purpose and value within our profession, we continue searching for more innovative approaches to doing relevant research without dismissing the creative, intuitive processes that are inherent to our profession.

There seems to be a resistance by art therapists to approach research in a more creative manner (Bloomgarden & Netzer, 1998, McNiff, 1989). McNiff (1989) states that art therapists’ ‘shyness’ in using in research the same elements of the practice of creative arts therapies is perhaps due to the fact that we all have been educated that valid science and subjective experiences do not walk together. Subjective refers to “what concerns or occurs to the *individual* subject and his experiences, qualities, and dispositions...” (Lincoln & Guba, 1985, p. 292). McNiff suggests that we might still feel caught up between the disciplines of art and therapy, and therefore experience conflict when we are

encouraged to find our own voice as creative art therapy researchers, and at the same time attend to a reality – that of the managed care systems – that prefers ‘outcome data’ (Gantt, 1998) and objective accounts of a phenomenon.

Kapitan (1998) argues that persuading graduate students to pursue research in order to survive in the working field is counterproductive for it implies “accepting an identification with powerlessness as a primary motivation for expanding the knowledge of the profession” (p. 22). In her article, “In Pursuit of the Irresistible: Art Therapy Research in the Hunting Tradition,” Kapitan (1998) suggests a creative approach to teaching the discipline of research. She reminds us that we still carry within the primitive desire to hunt and gather, for as humans “we are born looking for what we lack” (Kapitan, p. 23). So, in re-searching one reenacts the hunter’s nature of going ‘out there’ to find what is needed for one’s survival, and, sometimes, for the group’s survival (Kapitan).

Creating an analogy between the hunting tradition and research in art therapy, without dismissing the place and need of outcome and predication-based research in the field, Kapitan (1998) encourages the students to get in touch with their images, memories, personal myths and archetypes, that will help them to identify their skills and strengths and guide them in their pursuit of what is ‘irresistible’ to them. This creative and empowering attitude encouraged by the instructor is most likely to help students to awaken to their unique calling, and also to encourage research projects that will promote ‘critical conversations’ (Kapitan); this leading to growth in the personal and professional lives of everyone involved, and being highly beneficial to the field.

In conclusion, there is a consensus amongst authors (e.g., Bloomgarden & Netzer, 1998; Gantt, 1998; Kapitan, 1998; McNiff, 1998) that research is necessary and welcome in our field, and that there is always a method that best fits the type of question being asked. While the discussion about *qualitative vs. quantitative* remains alive, perhaps the focus could be on *how* we can improve our use of the methods at hand so that we can refine our understanding of human experiences and behavior (Polkinghorne, 1982).

### Art Therapy and Heuristics

Heuristics as a research method and the art therapy as a profession have many common grounds. Heuristics encourages creativity, demands the researcher's involvement throughout the process, and promotes personal growth – all inherent qualities of the art therapy profession (Bloomgarden & Netzer, 1998). In heuristics the researcher is required to examine his personal involvement in the experience, to trust his intuition and tacit knowledge, and to validate his internal frame of reference – all of these elements also inherent to art therapy.

It seems like a perfect match: A method that emphasizes experience, self-trust in finding the essence of a human experience through unique creative explorations, and art therapy – a therapeutic modality that uses the arts as a core element, and that seeks to strengthen one's ability to explore the meaning of their world, honoring their internal frame of reference, through creative expression. However, according to Bloomgarden and Netzer (1998), heuristic research method is not so popular amongst art therapists, and “One can only speculate as to why heuristics has received so little exposure and has not gained more recognition in the art therapy community” (p. 51).

Heuristics is a demanding approach that places the researcher at the center of the investigation, exposing personal data, and often stirring up old and unwanted feelings and wounds. It is a journey inward in which the researcher is seeking for something that needs to be learned, acquired, before the life journey can proceed. This way of knowing, of being informed, through personal accounts of perception, intuition, sense, are essential for the personal and professional growth of an art therapist. It is necessary, however, to acknowledge and validate the fact that individuals have their own personalities that influence how they make sense of the world.

### The Heuristic Research Method

The heuristic method, as described by Moustakas (1990), chose me for it supports the type of self-exploratory inquiry I had already begun to experience: The concern for my investigation grew out of a combination of personal and professional experiences; I believe the exploration of such concern will increase my self-awareness and self-knowledge as a human being; and I find it relevant to the practice of art therapy as it may inspire others to identify their unique ways of pursuing a more competent practice - all of these are essential elements in a heuristic journey.

The meaning of *heuristic* comes from the Greek word *heuriskein*: to discover or to find. It is also related to the famous expression *eureka* used by the Greek mathematician Archimedes when he experienced an ‘aha!’ phenomenon – a ‘striking realization’ (Moustakas, 1990).

Heuristics as a research model has its origin in existential and phenomenological philosophy (Bloomgarden & Netzer, 1998); it is an exploratory experience concerned

with meanings, not measurements. It can be used in any science, or in any research project that deals with new territories being explored, and brings the personal experience and discoveries of the researcher to the fore (Patton, 2002; Sela-Smith, 2002). Since the early 60's, with Moustakas' (1990) publication of his investigation on *Loneliness* (1961), the model gained recognition as an organized and systematic form of investigating human experiences.

Moustakas (1990) defines the heuristic process as “a way of engaging in [qualitative] scientific search through methods and processes aimed at discovery; a way of self-inquiry and dialogue with others aimed at finding the underlying meanings of important human experiences” (p. 15), in contrast with “traditional empirical investigations [that] presuppose cause-effect relationships” (p. 38). In search of a better understanding of the *Self* in relation to and in context with the external world, the heuristic process can serve as a gateway to knowledge that is deep-seated and integrated within the individual (Moustakas).

Moustakas (1990) has identified six phases to guide heuristic investigations: initial engagement, immersion, incubation, illumination, explication, and creative synthesis, which will be described in detail later in this chapter. He advises, though, that these phases are not to be followed mechanically. To be an authentic heuristic inquiry, the researcher must *surrender* to the process of inner-search and allow for the question and methodology to emerge out of inspiration (Moustakas).

Heuristic inquiry is in its essence autobiographical, and its essential core is the researcher's self-experience, passionate and yet reflective search, awareness, and



discovery. The researcher is personally and fully involved throughout the process, and it is expected to experience growth of self-awareness and self-knowledge while gaining deeper understanding of a phenomenon. Besides involving creative self-processes and discoveries, heuristic inquiries are also socially significant because basically every personal concern regarding human experiences has a social implication (Moustakas, 1990).

The heuristic quest starts within the researcher like puzzlement, or a hunch, related to her or his personal and/or professional life experiences (Bloomgarden & Netzer, 1998), and from it a personally meaningful concern is identified. It is a concern for which the researcher aspires for an in-depth understanding, and that will hold her or him focused and committed throughout the process of preparing, collecting, organizing, analyzing, and synthesizing data.

After the researcher's self-reflexive exploration, embedded knowledge, which is integrated within the self, will be unleashed leading to an inevitable expansion and deepening of personal knowledge and understanding of the *Self* in relation to and within a broader context (Bloomgarden & Netzer, 1998; Sela-Smith, 2002). The researcher's increased knowledge is then incorporated to the respective field of studies, and other researchers can further explore the topic.

Passion, commitment and patience are essential in a heuristic quest; the process should not be rushed, and the researcher's 'story' should unveil naturally for it brings in itself the transformational element expected in heuristic inquiries (Moustakas, 1990; Sela-Smith, 2002). Maturity is an asset, for old and consciously forgotten wounds might

be re-opened during the self-investigation process. Engaging in a heuristic process is like jumping into unknown waters, says Moustakas, for it may be ‘refreshing and peaceful,’ but it may as well be disturbing and quite uncomfortable.

Regarding *truth*, the heuristic research method encourages creativity and allows room for subjectivity as the researcher seeks for the best way to tell a story, to disclose his or her own ‘truth.’ Douglas and Moustakas (1985) further argue:

One is not only free but obliged to follow the path that holds most promise for disclosing truth; it is the focused attentiveness and internal alertness, rather than predetermined methods and procedures, that guides the researcher into revelations of meaning. (p. 49)

#### *A Critique of Moustakas’ Heuristic Method*

In 2002, Sandy Sela-Smith published: “Heuristic Research: A Review and Critique of Moustakas’s Method,” in which she acknowledges Moustakas’ (1990) significant contribution to research in psychology, but argues that his method ‘possesses internal conflicts’ (Sela-Smith). She goes on to say that Moustakas engaged in his investigation of *Loneliness* (1961) when he was put in the position of deciding whether his daughter, who fell severely ill, should undergo a complicated surgery; overwhelmed, he wandered the streets *feeling lonely*. Having to focus on the decision to be made, he was facing the unknown and was frightened (Sela-Smith, 2002). Unable to articulate his feelings, Moustakas felt no one understood how *lonely* he felt having to make such a decision. Meanwhile, his daughter had the surgery and survived it – his wife gave consent.

Sela-Smith (2002) argues that perhaps “due to unacknowledged resistance to experiencing unbearable pain, Moustakas’s research focus shifted from ‘the self’s experience’ of the experience [being lonely] to focusing on ‘the idea of the experience’ [loneliness]” (p. 53). For Sela-Smith, a *heuristic self-inquiry* must be presented from the stance of ‘*I-who-feels,*’ with questions such as “What is *my* experience of feeling lonely?” instead of *observing* the experience within oneself and collecting observation of others to answer questions like “What is *the* experience of loneliness?” (p. 74). The tacit dimension of personal knowledge can reveal what needs to be better understood, and can only be entered when one surrenders to the self-investigation. Hence, Sela-Smith finds that Moustakas contradicts a significant aspect of the heuristic self-inquiry process proposed by himself: the *free-fall* aspect – the need to surrender to the phases he himself identified as guides to the heuristic process.

For instance, initially Moustakas (1990) describes the heuristic method as one that involves self-search, self-dialogue, and self-discovery from the beginning and throughout the investigation, and that such investigation should not rely on external methodological structures, for they could limit awareness or channel it (Douglas & Moustakas, 1985, p. 44). However, when describing the application of the phases of his method he suggests the researcher should make lists, construct methods and procedures to identify ‘an effective question,’ to collect, and to analyze data (Moustakas, 1990, p. 42).

## *Concepts and Processes of Heuristic Research Method*

*Tacit knowing* – “We know more than we can tell...” (Polanyi, 1969, p. 131).

Polanyi defines tacit knowing as an “act of integration” (p. 140) that is at the base of every heuristic self-inquiry. In fact, it underlies all the other concepts in heuristic inquiry for, as much as it is mystery, the tacit is also ‘visionary’ (Douglas & Moustakas, 1985) informing the researcher which direction to go throughout the process (Polanyi). It is actually the base for all other types of knowledge as it integrates experience, feeling, and meaning (Sela-Smith, 2002). Operating often outside of ordinary awareness, *tacit knowing* is the concept responsible for those vague and formless hunches and insights that characterize heuristic discovery; directly connected to *indwelling*, it expands the possibilities of new awareness, understanding and meaning making in human experiences (Moustakas, 1990, Polanyi). It is considered a ‘deep dimension of knowledge’ that is believed to grow continually, every time the individual faces a new experience (Polanyi; Sela-Smith).

*Identifying with the focus of inquiry: One with the question* – The discovering of the research question is the essential opening of a heuristic quest, and it may represent half of the discovery (Polanyi, 1969). It is the guide of the self-inquiry process for it comes from within, often causing a certain un-easiness that the researcher will seek to resolve (Sela-Smith, 2002). Once the question has been identified and clearly stated, the researcher should try to *live the question* as much as possible in order to understand it.

*Self-dialogue* is more than just writing one’s ideas or responses down; it is the process of asking oneself questions and taking the time to answer them as if in a dialogue

with another person, allowing for the dialogue to take whatever direction it may (Moustakas, 1990). It is important throughout the heuristic self-inquiry since it is an actively investigative and exploratory approach.

*Intuition* lies between implicit (tacit) and explicit (observable) knowledges (Moustakas, 1990); i.e., one can perceive or sense something that begun as a hunch (implicit), and then observe it again and again, allowing for connections to occur, going from parts to the whole, and from the whole to the parts, until an integration of 'truth' is achieved (explicit). In heuristics self-inquiry, intuition, instead of formal techniques, determines the steps that the researcher takes (Sela-Smith, 2002).

*Indwelling* refers to the ability to turn inwards in search of a deeper understanding of human experience. It is a deliberate and painstaking process that requires much patience for one has to stay with a phenomenon or a feeling, sadness or delight for instance, and return to it as often as necessary until one is able to experience and describe it in a variety of ways: through images, poetry, and movements for instance (Moustakas, 1990). As one *indwells* on a human concern or experience, the chances that personal tacit knowledge will be untapped increase. Once untapped, it will be pushed into one's consciousness and expand the individual's explicit knowledge of the experience (Moustakas; Polanyi, 1969).

*Focusing*, both a concept and a process, helps one to relax and become more receptive to perceptions that enable elucidation and identification of core themes and their relating feelings and thoughts. It allows one to move towards the essence of what matters most in the investigation (Moustakas, 1990). Polanyi (1969) was interested in the

'quality' of *focusing* in descriptive sciences, and called our attention to the fact that when we look *at* things, we often lose their meaning; for instance, when a pianist concentrates his attention on his fingers, he can paralyze his performance. Therefore, the ideal thing to do is to look *from*, or *through* a phenomenon to find its meaning, so that one can interiorize the experience instead of alienating or losing it (Polanyi). For instance, by focusing on our bodily responses to the experience being investigated we can learn *through* our bodies how to perceive and how to make sense of it (Polanyi).

*Internal frame of reference* is the actual medium of a heuristic self-inquiry, its point of departure and of return. Even if co-researchers are contributing to the study, it is the main researcher's question that seeks to be answered. By looking at her or his experiences in perceptions, thoughts, feelings, and senses, the researcher will provide portrayals of a subjective experience that resulted from a surrendering to a process of self-search, in which objective control was set aside and the unknown welcomed.

#### *Phases of Heuristic Research*

Moustakas (1990) has identified six phases to guide heuristic investigations: initial engagement, immersion, incubation, illumination, explication, and creative synthesis. These phases are not supposed to be followed mechanically, advises Moustakas, as each heuristic researcher should identify her or his personal way of truthfully telling the story of the investigation. Personally, I found that the phases identified by Moustakas helped me to structure such a personal journey. I also observed that the third, fourth and fifth phases found a natural rhythm, interweaving themselves throughout the process.

In the *initial engagement* phase, the researcher identifies an area of intense interest with important significance both in social and personal contexts (Moustakas, 1990). During this phase, the researcher is most likely to engage in self-dialogues, searching for significant links between autobiographical material and relationships within a social context, and trying to develop a path for exploration. The researcher looks within for tacit awareness, and allows intuition to run freely. To be able to endure the necessary focus throughout a heuristic inquiry, the researcher should feel passionate about the chosen question (Sela-Smith, 2002).

In my case, the initial engagement started when I first decided to take part in the experience in Peru. In spite of financial restrictions, I simply *knew* – tacit knowing – that the experience in Peru could result in personal and professional transformations, but I did not know why. And neither did I know how to approach such experience as research. After several meetings with a few of my professors in the Creative Arts Therapies program, I was able to validate my multicultural life experiences, my desire to further my cultural awareness in my practice as an art therapist, and my openness to the process of investigating countertransference issues through creative expressions. In spite of the excitement, I was not fully aware of what needed to be done – it truly felt like ‘jumping into unknown waters’ (Moustakas, 1990). The whole project made me nervous, and yet I could hardly wait to arrive in Peru and start *my* journey, *my* own pursuit of that that became irresistible to me (Kapitan, 1998).

*Immersion* – Craig (as cited in Patton, 2002) reminds us that heuristics is a method that permits one to be deeply in the moment, “immersed in mysteries and miracles, and still be engaged in meaningful research experience” (p. 108). Once the question is

defined, the researcher has the chance to become intimate with it, focused and concentrated. The researcher should make use of self-dialogue and self-search, intuitive clues and hunches, dialogues with others, and not restrict or discard any possibility of new awareness that could lead to a better understanding of the phenomenon in question. Sela-Smith (2002) adds that it is not uncommon that metaphoric dreams bring relevant information to the researcher's quest in this phase.

A few days before I left for Peru, my research advisor, Ms. Louise Lacroix – MA, ATR, ATPQ, asked me: *Why is it that you need to work on cultural awareness?* I realized then that there was more to my quest than I could have known at that moment, and I learned later that this is also a common feeling experienced by researchers conducting a heuristic investigation (Kapitan, 1998; Polanyi, 1969).

Throughout the months I spent in Peru, immersed in my work within a community of Andean migrants, my advisor's question was constant in my thoughts, revisited as frequently as possible in discussions during on-site supervision, and it took many different shapes and identities in my dreams, which I registered through drawings and journaling. My primary research question – which countertransference issues were most likely to have been informed by cultural differences – remained, because I 'felt' that by identifying my cultural countertransferences, I was most likely going to become aware of why is it that I was seeking to expand my cultural awareness.

*Incubation* – During the third phase, a resting period begins naturally and without planning (Sela-Smith, 2002). The seed that was planted “undergoes silent nourishment, support, and care that produces a creative awareness of some dimension of a phenomenon



or a creative integration of its parts or qualities” (Moustakas, 1990, p. 29). The unconscious *Self* has received the input needed in the *immersion* phase, and now one’s tacit dimension and intuition continue to integrate each part of collected data, eventually culminating in an extended or new understanding of the lived phenomenon. The information gathered is reviewed and reorganized into new attitudes, new behaviors, and new ways of perceiving (Moustakas).

Although the *incubation* period of my personal inquiry began in Peru, after a few weeks of being immersed in the fieldwork and collecting data, it was intensified when I returned to Montreal, my comfort zone. I felt turmoil, and grew to understand why some researchers are tempted to skip this phase (Moustakas, 1990): It was not easy to sustain the patience and resignation required to make sense of all the data that had been collected and absorbed. Further, a great amount of humbleness was required, for it was during this phase that much internal confrontation occurred between my *learned* cultural attitudes and worldview and my new understandings that were being shaped by everything I had experienced in Peru. Figure 1 was created during that introspective phase. The creation of it helped me to ground myself upon my return to Montreal, which was a bigger challenge than I had expected. Even though I was happy to return to the comfort of our home, part of me deeply desired to continue my work in the Peruvian community.

The making of this mixed media piece was spontaneous, as were all my works related to the experience in Peru, i.e., the images first caught my attention and were then grouped together in a matter of hours or sometimes days. A dialogue with the image being created was frequent, from which I gained insight for the next steps to take. By dialogue I mean questions such as: “*How are you related to me at this time?... You seem*

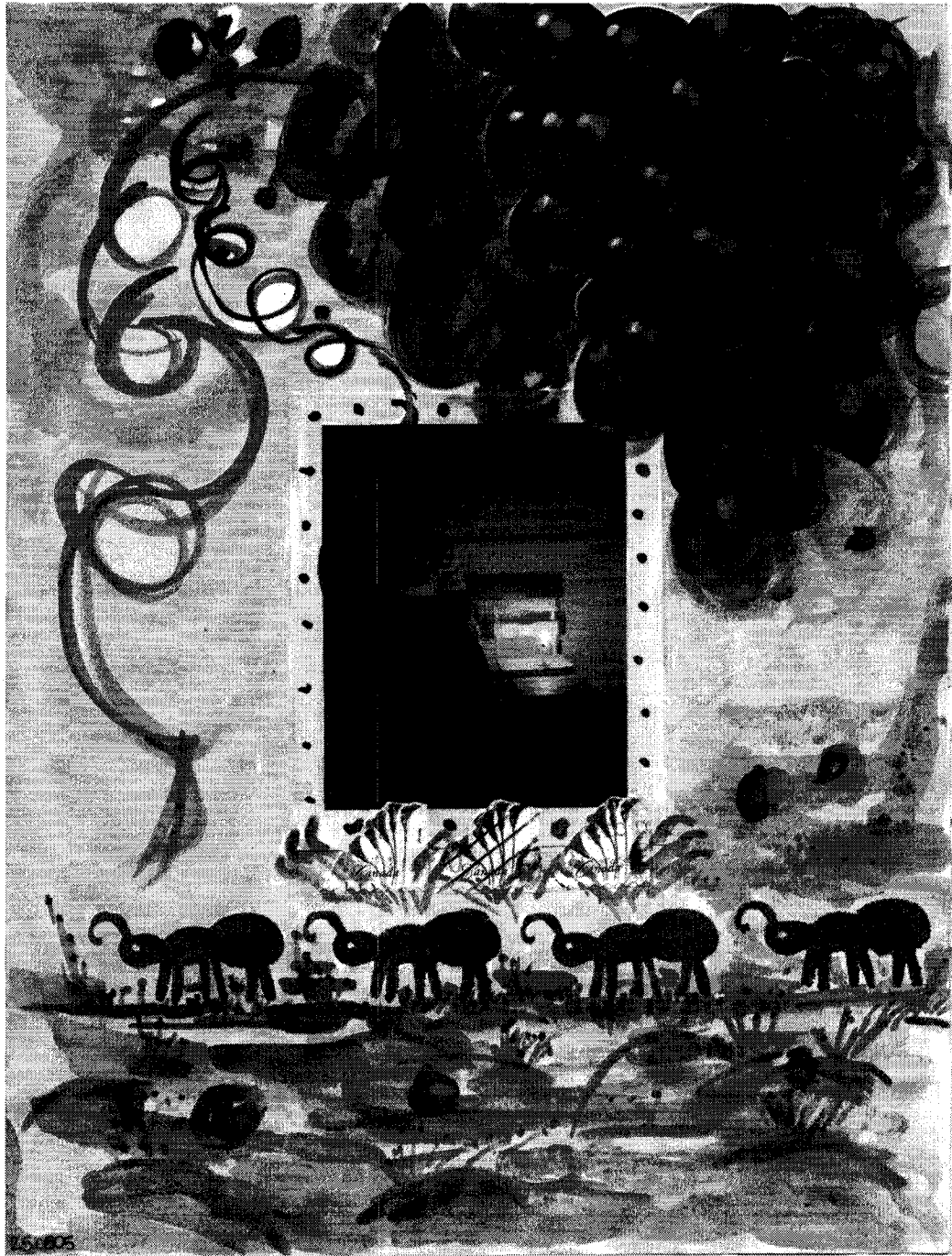


Figure 1 – A Moment of Introspection

Mixed Media – 21 x 27,5cm

*focused... is there anything you need right now?"* This particular image seems to reflect the solitude I was experiencing, and my consciousness that only by allowing myself to surrender to that solitary moment, while not losing focus of the work I had ahead of me (represented by the ants), and the need for nurturance (expressed by the presence of the grapes and by the bright colors used in the work), I would be able to make sense of how the experience in Peru had impacted my personal and professional life.

*Illumination* occurs naturally and when the researcher is receptive to the discoveries integrated by the tacit dimension of the *Self* (Moustakas, 1990); the inner work that occurred in the previous phases enters conscious awareness (Sela-Smith, 2002).

Moustakas (1990) acknowledges that a certain degree of reflectiveness is essential, but reinforces that it is through tacit work that meanings and essences will emerge, now clustered into themes, and sometimes with new questions that will expand the research dimension. Misunderstood or distorted, and yet important, pieces of the experience will make their appearance, opening doors to transformation and new awareness of something that might have been present all along, just beyond one's immediate awareness.

Experiences of *illumination* were present throughout my process, and were intensified after my return to Montreal and after months of *incubation* and reflection on the data.

Specific examples of *illumination* will be provided in chapter five.

*Explication* – The researcher further examines the data and seeks a plausible elucidation of the themes, essential meanings, and qualities that emerged from the tacit dimension of the *Self* and that underlie the lived experience (Sela-Smith, 2002).

Focusing, indwelling, self-searching, and self-disclosure are approaches often used by

researchers in this phase (Moustakas, 1990), and the material that was indwelled in the deep-conscious during the *incubation* phase is most likely to emerge to ‘waking consciousness’ (Sela-Smith, p. 68). Major pieces of the experience are explained in detail, and are then put together into a whole experience considering the researcher’s internal frame of reference, so that it can be presented and discussed with others.

*Explication* of major themes of my journey is presented in chapter five.

*Creative synthesis* – Combining intuition, imagination, and personal knowledge of meanings and essences, the researcher is expected to creatively represent the integration of the lived experience (Moustakas, 1990). The final work may be a poem, a painting, a narrative, or any form of embodiment of the lived experience, revealing a sense of connection and transformation acquired during the experience (Sela-Smith, 2002). It carries the task of telling the ‘story’ that has unveiled as a result of the union of the “deep-unconscious and the waking consciousness” (Sela-Smith, p. 68), and of the communication between the researcher’s inner and outer realities. Sela-Smith argues that a *creative synthesis* can only happen when and if the researcher has been able to surrender to the natural development of the previous stages of the self-inquiry.

The *creative synthesis* of my journey is presented in chapter six.

## CHAPTER THREE – LITERATURE REVIEW

### Cross-Cultural Issues in Therapeutic Relationships

#### *Expanding on Culture*

Even though physical features of members from different ethnic groups vary, a human body is recognized universally, which places all of us in the same group to begin with – we are human beings. Scientists who pursue an understanding of human development across life span acknowledge the complexity and uniqueness of each individual, and also the commonalities and patterns that exist across different ethnic groups of people (Kail & Cavanaugh, 2000). So we have all emerged from a single cell; this is universal. Then what? Then we enter into a ‘context-specific’ situation (Weinberg, 2003), which begins with our family dynamics, which is in turn part of a larger context. As we grow up, we are introduced into other groups: friends, school, neighbors, social clubs, religious groups, etc, that most likely will share unique ‘communication systems’ (Hall, 1976), i.e., patterns of verbal and nonverbal language that allow one to understand and feel understood by others without great effort.

Culture is what gives an individual her or his identity (Hall, 1976, 1998; Singer, 1998); it provides individuals from a specific group with common understandings of reality that allows one to find meaning in a social world (Weinberg, 2003).

Within a culture, there are several complete ‘communication systems’ (Hall, 1976) from which one *learns* what is and what is not appropriate behavior. For instance, from the beginning of our lives we are taught: which language to speak and how to speak it;

the tones of voice to be used; which postures and gestures are or are not appropriate; what distance to keep from people; how to relate to time; how to play; to make love; to defend oneself (Hall; Weinberg, 2003). These are but a few examples of complete communication systems that inform us about cultural symbols that we internalize through interactions with family, friends, and from mass media (Weinberg).

Therefore, there seems to be a consensus in the literature researched that culture is learned, not innate (Barnlund, 1998; Bennett, 1998; Hall, 1976, 1998; Singer, 1998; Weinberg, 2003). As stated by Hall (1976):

Culture is man's medium; there is not one aspect of human life that is not touched and altered by culture. This means personality, how people express themselves, ... the way they think, ... move, how problems are solved, how their cities are planned and laid out, how transportation systems function and are organized, as well as how economic and government systems are put together and function. (p. 14)

Hall (1998) states that culture is communication, and argues that eighty to ninety per cent of what is communicated to us is done nonverbally and, more often than not, outside of our awareness. So individuals from a specific cultural group are linked through conscious and unconscious cultural material – symbols, messages and values – that surround them since birth. Further, Weinberg (2003) suggests that individuals interpret, internalize, and finally crystallize cultural material, which becomes then part of one's social identity – often explained as a 'feeling of belonging' (Weinberg).

According to Hall (1976), information modified by learning is malleable, and therefore can be changed. However, old habits die hard; once learned, behavioral

patterns, part of one's social identity, seem to be gradually assimilated by the unconscious mind, from where they naturally orchestrate one's interactions without the individual's awareness (Hall). Hence, it seems that the most important codes that govern one's way of being – learned from and shared by one's ethnic group – are embodied, assimilated by the nervous system, stored over time in the 'cultural unconscious,' and not readily available to the conscious mind (Hall; Herron, 1995).

### *Cultural Unconscious or Ethnic Unconscious*

Hall (1976) states that the *cultural unconscious* stores learned familiar communication systems, controls one's actions and interactions, and can only be understood through a conscious analysis of how one interacts with others in a 'strange territory,' because the nervous system – normally stable in a familiar context – might become 'annoyed' with a sensation of being 'lost' when in a strange environment or in intercultural encounters.

William G. Herron's (1995) take on the social aspect of the unconscious is very similar to Hall's (1976). Herron speaks of *unconscious processes* that can only be explained by one's cultural background, and that offer various degrees of accessibility. He refers to those processes as the *ethnic unconscious*, i.e., "repressed material that each generation shares with the next and is shared by most people of that ethnic group" (Herron, p. 521).

The discussion over the terminology, *cultural* or *ethnic unconscious*, and over the two authors' differing approaches could be extended and become a topic in itself. However, for the purpose of my investigation, what is important is the acknowledgment

of such unconscious structures; how they seem to be transmitted over generations, and embodied in different levels of the individuals – visceral, emotional, and cognitive (Dosamantes-Beaudry, 1997; Lewis, 1997); and *how* those structures could be made accessible to the clinician and researcher.

### *Intercultural Communications*

Concerns with intercultural communication were, until just a few decades ago, part of the agenda of ‘diplomats, expatriates’ (Bennett, 1998), anthropologists, and the more conscious world travelers. As a result of great technological development, individuals have become more mobile and cross borders every day either for tourism, studies, work, immigration, or seeking refuge. The reasons may vary, but the fact remains: Societies are undergoing demographic changes all around the globe, and individuals are constantly interacting with different people. We all face the challenge to understand what it requires to be “both culturally diverse and unified in common goals” (Bennett, p. 1).

Historically, Bennett (1998) explains, human beings respond to what is different with a ‘fight or flight’ attitude. Flight or avoidance seems to be generally considered as the first option. If forced to confront ‘the different,’ a fight is likely to ensue. Also, if it is impossible to avoid the ‘different people,’ conversion would be the next step. In cases of non-compliance, the ‘different people’ would be alleviated so that a sense of stability and predictability could be restored (Bennett).

We are already in the 21<sup>st</sup> century, but the same mechanisms seem to be in use to preserve the sense of stability and sameness so dear to human beings. Gated-communities, entire neighborhoods defined by the ethnicity of its residents, are modern



examples of how ‘the different’ is still avoided. If avoidance does not work, the desire for sameness can be identified in the still prevailing notion of the ‘melting pot’ – “a place where people from different races, countries, or social classes come to live *together*” (italics added) (Longman Dictionary, 1995, p. 889). And, unfortunately, examples of genocide and hate crimes to eliminate ‘the bothersome different’ are not purely behind us. ‘The different’ is also eliminated in our societies through indifference (Bennett, 1998). Being subject to indifference in our organizations and neighborhoods, the lives of the groups considered minority become miserable; they cannot overcome their difficulties, and they will most likely not survive (Bennett).

### *Cultural Awareness and the Therapeutic Relationship*

Cultural awareness and self-awareness walk hand in hand. As already defined in this paper, to develop cultural awareness means to be able to transcend the hidden, or repressed (Herron, 1995) aspects of one’s cultural experience – assumptions, worldview, biases, prejudices, expectations – which might have been stored in one’s unconscious mind, and that can only be accessed through conscious effort (Hall, 1976). An honest self-examination of one’s own cultural identity should increase one’s cultural awareness, which represents the first step toward a more ethical, competent and socially responsible practice in multi-ethnic settings and across cultures (George et al., 2005; Sue & Sue, 2003; Tseng & Streltzer, 2004).

Relevant writings in anthropology (e.g., Loftsdóttir, 2002), art therapy (e.g., Coseo, 1997; George et al., 2005; Hocoy, 2002), public health (e.g., Minkler, 2004), psychiatry (e.g., Tseng & Streltzer, 2004), psychology (e.g., Brodsky et al., 2004), psychotherapy

(e.g., Lewis, 1997), all seem to agree that it is crucial and ethically required of all health practitioners to develop an awareness of their own cultural identity, and gain a better understanding of the ‘hidden’ cultural systems that we all carry within (Hall, 1976, 1998). There seems to be also a consensus that such a practice could avoid the imposition of dominant Euro-American values into the therapeutic relationship.

### *Issues in the Therapeutic Relationship*

To contextualize the discussion around issues that might be present in an intercultural therapeutic relationship – client and therapist being from different ethnic groups – I will use North America, where art therapy is widely practiced, as an example.

North America consists of a variety of ethnic groups: Caucasian, African American, Hispanic, Asian American, and Native American. With the exception of the Caucasian group, composed of Euro-American population, the others are denominated as ‘ethnic minority groups’ (Perez Foster, 1998). This ethnic diversity translates into a variety of *learned* (Hall, 1976) and *embodied* (Dosamantes-Beaudry, 1997) unique traditions, assumptions, personal beliefs, worldviews, values, myths, and behaviors being brought into the therapeutic relationship by the client *and* by the therapist. Given the historical perspective of how individuals deal with difference, therapists need to be aware of *how* all of these unique elements enter into treatment decisions. Understanding differences, appreciating and respecting them is crucial to the practical aspects of an ethical treatment.

The theories and practice of mental health professions, including counseling, psychiatry, psychotherapy, and art therapy as well, have been developed mainly within dominant Euro-American contexts (Hocoy, 2002; Sue & Sue, 2003; Tseng & Streltzer,

2004). Consequently, their worldviews, assumptions, traditions, values, attitudes, ethical standards, and regulations are embedded and reflect largely the perspective of health and illness of a dominant culture, including the parameters that define normality and abnormality. It is most improbable that ethnic minority groups living in North America, for instance, and those who live in different countries, share the same worldview, values and regulations (Sue & Sue).

In 1981, Denise E. Lofgren wrote about how a Navajo client of hers was misdiagnosed with schizophrenia because her Navajo cultural background was simply overlooked. Bias in diagnosis and treatment is but one of the problems that might occur in a setting where the social and cultural perspectives of the individuals are dismissed. Some 25 years have passed since Lofgren's article and some professionals still argue that 'good counseling is good counseling' (Sue & Sue, 2003), and avoid any dialogue around power imbalance and power oppression – imposition of values of a dominant group upon members of an ethnic minority group – in the field.

Sue and Sue (2003) argue that the problem with the definition of 'good counseling' is that it is supported by traditional "monocultural and ethnocentric norms that excluded other cultural groups" (p. 10). Research shows that the assumed 'good counseling' (Sue & Sue) does not seem so effective with clients from minorities groups: Minority groups are the least users of mental health services, and when they actually seek treatment, dropout rates amongst them are the highest compared to other groups (Perez Foster, 1998). They often receive less favorable medical and mental care; and treatments are not as available to them as to majority groups (Tseng & Streltzer, 2004).

Perpetuation of ‘Western cultural imperialism’ (Hocoy, 2002) by professionals upon members from minority ethnic groups should be of crucial concern to those in the field of mental health (Hocoy; Sue & Sue, 2003). Again, if we take a glimpse at historical facts we realize that racism has been segregating groups that do not share the same values as the dominant groups for centuries, and still goes on. For instance, Sue & Sue points out how slavery imposed a “pathological system of social organizations on the African American family, resulting in disorganization and a constant fight for survival” (p. 161). Another example cited by Sue and Sue is how the American Indians became immigrants in their own land; how they have been subjected to ‘civilization’ by government policies, and how they have been imposed a definition of race by the federal government. Learned helplessness, gambling, and substance abuse are some of the consequences resulting from such measures (Sue & Sue).

“Conquest, dislocation, cultural genocide, segregation, and coerced assimilation” (Sue & Sue, 2003, p. 161); all of these measures were applied in the name of something in which the majority groups – mainly White – really believe(d). Considering that one’s values, beliefs, worldviews, and behavior patterns – all those elements that constitute one’s social identity (Hall, 1976) – are transmitted across generations, and are assimilated by one’s unconscious mind, from where they orchestrate one’s interactions without one’s awareness, I wonder how much ‘Whiteness’ we, art therapists trained in North America and part of a dominant group, carry around and within us without any awareness. Bush (2004) states: “Whiteness has been assumed, considered the norm, the center and thereby rendered invisible, mostly to whites” (p. 6). Besides, according to George et al. (2005), “The membership of the American Art Therapy Association (AATA) ... is 90%

Caucasian American and 91% female... [therefore, a] large number of female therapists from the dominant culture treating persons from diverse cultures” (p. 132).

On a good note, the discussion and concern around providing a competent service to clients from minority groups seem to be well lit in the mental health profession. For instance, Ito and Maramba (2002) report promising results from providing their clients with ethnic-specific psychiatric services in which, in general, the staff members and the clients are of the same ethnicity. The use of such intervention resulted in more ethnic minority usage, improved outcomes, reduced emergency, and inpatient services (Ito & Maramba). Talwar, Iyer, and Doby-Copeland (2004) point out that the fields of social work and counseling in the United States also have changed their recruitment policies, and more ethnic minority professionals are being hired to bring more balance into the therapeutic relationships; unfortunately, art therapy does not seem to share such reality (Talwar et al.).

The ethnic-specific services proposed by Ito and Maramba (2002) seem valid and relevant to the field of mental health, as they are yielding interesting results. I am, however, somewhat skeptical about the practicability of such a commitment, for how often would it be consistently possible to pair up clients and therapists sharing the same cultural background? I would also be interested in further studies measuring the interest of the individuals from groups considered minorities for such specific pairing; I wonder if the results would demonstrate a significant interest in it. I also wonder whether this type of intervention would not be, somehow, reinforcing that inherent human need for ‘sameness’ (Hall, 1976), which has forever been a cause of prejudice in the world.

In France, the practice of ethnopsychiatry – “a subdiscipline crossbreeding anthropology and psychiatry” (Nathan, n.d., para. 1) – has been present for over two decades, also provoked by a massive demographic change due to immigration. Georges Devereux, anthropologist, psychoanalyst, Hellenist, founder and master of ethnopsychiatry, questioned, amongst other things, our ability to learn how to live with others (Nathan). The *Centre Universitaire d'Aide Psychologique aux familles migrantes - Georges Devereux* was founded in Paris, in 1993, where enthusiastic followers, such as Tobie Nathan, are continuing the work that Devereux envisioned (<http://www.ethnopsychiatrie.net/>).

In Montreal, a city with a large population of immigrants and refugees, the Montreal Children's Hospital is the first one in Canada to create programs to attend the specific needs of Montreal's multiethnic population. The purpose of the programs is to promote cross-cultural sensitivity and contribute to the development of cross-cultural health care at the service delivery and institutional (<http://www.thechildren.com/search.asp?l=e&query=transcultural>).

### *Building Blocks of Culture*

Sorti (1999) has identified four aspects of culture that are fundamental to an understanding of cultural differences:

- Concept of *Self* – People from different cultures experience the *Self* differently. From a broad range of alternatives, *individualist* and *collectivist* are the two extreme poles of personal identity. In an *individualist* group, the individual is the ‘smallest unit of survival’ (Sorti). Independence, self-reliance, personal freedom

are key elements for one's well being, and people usually keep a greater psychological and emotional distance from one another. Whereas in a *collectivist* group, the immediate family of the individual is usually considered the 'smallest unit of survival' (Sorti). Survival, success and harmony of the group ensure the individual's well being. There is not much psychological and emotional distance amongst group members, although there is more distance between groups and non-group members when compared to *individualist* groups (Sorti).

- Personal versus societal responsibility – This concept has to do with one's worldview, and how one balances personal responsibilities in relation to family, friends, colleagues, and society in general. Again, *universalist* and *particularist* are at the extremes of a continuum. For an *universalist* group "to be fair is to treat everyone alike and not make exceptions for family, friends, or members of your ingroup" (Sorti, 1999, p. 38). Personal feelings are often put aside and situations are approached with more objective consideration. In a *particularist* group, the circumstances of a situation will inform how one should act. There is more room for exceptions, and to be fair means 'to treat everyone as unique' (Sorti).
- Concept of time – Personal interactions are affected by the way people around the globe conceive and handle time *and* space, which is quite diverse (Hall, 1976; Sorti, 1999). *Monochromic* and *polychromic* represent the two poles of a continuum. In *monochromic* systems 'time is money,' so it should not be wasted. People usually do one thing at a time, try to avoid interruptions, and adjust their needs to the demands of time (Sorti). The emphasis is on schedules and promptness (Hall). In *polychromic* systems (Hall), due to circumstances, many

things happen at once and the meaning of ‘interruptions’ gets lost; schedules and deadlines may change often.

- Locus of control – This building block has to do with an individual’s view of how much one can ‘control or manipulate’ the environment to shape one’s destiny. For a group that views the individual as the primary agent of her or his life, the locus of control is mainly *internal*, with few circumstances in life that one should take as ‘given’ (Sorti, 1999). This pattern of thoughts represents more activist cultures. The other extreme of the continuum is represented by *external* locus of control, in which one is subject to his fate: ‘That’s just the way things are’ – a thought that represents more fatalist cultures (Sorti).

Communication systems, which involve verbal and nonverbal languages, are of crucial importance to the understanding of cultural differences (Hall, 1976). Different ethnic groups communicate differently, especially nonverbally. As the other examples above, the two poles of the communication systems continuum are *high context* (HC) and *low context* (LC) groups. In HC groups, communication tends to be more contextualized and involves *learned*, internalized information shared by sender and receiver; therefore, a minimal amount of explicit information is required in the transmitted message for it be understood (Hall). The reverse happens in LC communication. A context is usually missing and, therefore, a greater amount of explicit information is required in the formulated message (Hall).



## Transference and Countertransference

The concepts of transference and countertransference are rooted in the psychoanalytic approach (Agell et al., 1981; Gelso & Mohr, 2001; Weiner, 1998). They are connected to therapeutic processes, including art therapy (Robbins, as cited in Agell et al.), and part of every human relationship in a greater or lesser degree (Rubin, as cited in Agell et al.), whether one is conscious of it or not (Gabbard, 2001). They are still controversial concepts, and the theoretical orientation of the professional defines their place within the therapeutic treatment. For instance, they are seen as 'key concepts' for successful psychoanalytic and psychodynamic treatments, and merely 'modest or trivial' to more humanistic-experiential or cognitive-behavior approaches (Gelso & Mohr, 2001).

Sigmund Freud (as cited in Agell et al., 1981) was the first to propose the idea of transference in the early 1900's. He saw transference as a manifestation of infantile neurosis caused by the individual's repressed and unsatisfied erotic fantasies, and found it 'perfectly normal' that one would direct libidinal expectations to every new person she or he should meet, including the physician or analyst. Initially, as cited in Agell et al., Freud saw transference as an obstacle to analysis, but later recognized that the interpretation of his clients' 'expectations' was a useful source of information that could lead to resolution of neurosis.

Carl Jung (as cited in Steinberg, 1990) also understood transference as 'infantile components of neurosis;' however, he recognized as early as 1913 that transference represented a creative way that the unconscious found to resolve neurosis and exercise the 'urge towards individualization.'

Within the therapeutic relationship, the therapist can also experience certain emotional responses towards clients, a phenomenon known as ‘countertransference’ (CT). Steinberg (1990) states that Freud understood CT as the analysts’ *resistance* and *neurosis*; an inappropriate displacement of emotions from the analyst’s previous relationships onto the patient that should be avoided and overcome through constant self-analysis, because they could *only* hinder the treatment progress. Freud (as cited in Weiner, 1998) strongly believed that “no psycho-analyst goes further than his own complexes and internal resistances permit” (p. 237).

Contrary to Freud, Ferenczi (1919) considered CT an instrument to better understand the analytic situation. Ferenczi opposed Freud’s idea that the analyst should remain apparently unaffected by the relationship with the patient, and suggested that the analyst could have a more effective participation in the analysis if he or she was in resonance with the client, and in control of own CTs. He believed that patients could connect with the analyst’s unconscious and respond to it, and suggested that analysts should go through analysis themselves and supervise their own CT, because *unmastered* CT can potentially hinder the analysis.

By the 1950’s, the concept of CT was considered a more important phenomenon and tool in the therapeutic treatment (Gabbard, 2001; McMahon, 1993). In 1950, Paula Heimann (as cited in Steinberg, 1990) was the first to acknowledge explicitly the positive value of CT in understanding the patient’s unconscious. She introduced a more totalistic definition of CT though, suggesting that *all* of the analyst’s emotional responses to a client were to be considered CTs. For totalists, CT is understood as inevitable in the therapeutic relationship, and potentially useful if the therapist is aware of it (Gelso &

Mohr, 2001).

Steinberg (1990) reveals that Jung also understood it as the therapist's duty to become aware of his or her emotional responses to the client, to accept them, and to reflect them back to the client. Jung (as cited in Steinberg) argued that through CT the therapist can share the sufferings of the client, and that by accepting and understanding those activated feelings within, the therapist can return them to the client in a way that allows for integration to occur.

The influence of the classical psychoanalytic view of CT remains. Weiner (1998), for instance, defines CT as "inappropriate or irrational reactions by therapists to a patient's behavior" (p. 237). He argues that it is generally more accurate not to consider *all* of the therapist's reactions to a client or client's behavior as CT; therefore, the usage of the adjectives *inappropriate* and *irrational*. "As people in their own right, all therapists carry a set of values with them into the treatment room" (p. 238), which together with the client's set of values will delineate a real relationship. For instance, therapists may *realistically* feel anger toward clients who have abused children; sympathy for a client who have suffered financial losses; physical attraction towards a client; they may enjoy a compliment; resent criticism, and so on. However, should the professional find himself or herself 'devastated' by a client's criticism, or 'especially' gratified with a client's compliment, or with the success of a treatment, it would be a responsible practice to investigate: "Why do these particular ... reactions occur now and in relation to this particular person?" (Steinberg, 1990, p. 28).

As mentioned above, the definition of the concept and its place in the treatment

depend largely on the theoretical orientation of the professional. In general, there seems to be a consensus amongst professionals from different approaches, even behaviorists (Gelso & Mohr, 2001), that CT is useful in the therapeutic treatment to help therapists to increase self-understanding and understanding of the people they are trying to help.

The therapeutic relationship, as any relationship, is psychologically complex. Communication between client and therapist happens on several levels: consciously, unconsciously, from the conscious of one part to the unconscious of the other, within one's own *Self* (McMahon, 1993), and verbally and nonverbally (Hall, 1976). Perhaps due to this complexity, we find in pertinent literature many different types of CT; the following types are discussed here due to their relevance to my investigation: (a) generalized and specific; (b) objective; (c) positive and negative; (d) neurotic; (e) somatic; (f) aggressive; (g) archetypal; and (h) cultural and culturally reinforced.

(a) Generalized and specific CT - *Generalized CT* is usually determined by the therapist's 'general' needs and attitudes that shape her or his interpersonal relationships (Weiner, 1998). For instance, a therapist with strong nurturing needs may be particularly interested in treating patients who become dependent, and not so much those who resist a dependent relationship. The therapist may be deriving personal gratification from the client's dependence, instead of attentively listening to the client's needs (Weiner).

*Specific CT* represents a response to something that the client does or says that connects with a specific situation the therapist has lived or is experiencing (Weiner, 1998). For instance, a therapist facing marital problems may have difficulties in attending a client who is facing similar issues. Therapists may experience many reactions in such a

situation, such as: anger toward the client for bringing the subject up; they may project their own limitations onto the client and judge the client incompetent for not handling the problem effectively (Weiner). Even though specific CT tends to dissipate as clients move onto other issues, therapists should be able to recognize and control their reactions to avoid harming the client and the therapeutic alliance.

(b) Objective CT - Winnicott (as cited in Gabbard, 2001) argued that sometimes therapists' reactions towards a patient have less to do with the therapist's intrapsychic conflicts, and "much more to do with the patient's behavior and need to evoke specific reactions in others" (Gabbard, p. 984). Gabbard explains that Winnicott called this type of CT *objective*, in which the therapist would react to the client in the same way others do. For instance, a client may be so arrogant that everyone, including the therapist, cannot help but hate him or her. Once aware of this dynamic, the therapist can help the client to become aware and understand his or her role in conflicting relationships.

c) Positive and negative CT – All CT reactions are considered mainly negative, because they refer to distorted ways of perceiving reality (Weiner, 1998). Therefore, *negative* and *positive* CT has to do with the 'tone' of the therapist's reactions. A positive CT will most likely lead a therapist to be overly nice to a client, for instance, allowing sessions to run over time, or behaving seductively toward a client. Hoping that a client would miss appointments is an example of negative CT. Therapists have a better chance of anticipating and reversing their influence when they are aware of their feelings.

(d) Neurotic CT refers to the "analyst's irrational responses ... as a combination of his or her own neurosis and that of the patient" (Steinberg, 1990, p. 38). It is similar to

the *objective CT* suggested by Winnicott (as cited in Gabbard, 2001), with the difference being that the neurosis of the client finds a ‘fit’ with the therapist’s neurosis (unresolved and often unconscious conflicts), which then distorts the therapist’s perception of the client’s conflicts. The therapist ends up colluding with the client due to an unawareness of his or her own issues and inability to separate the psychological material of both parts. In such a case, because the therapist and the client are ‘mutually unconscious’ (Steinberg), the possibility of insight is most likely blocked.

(e) Somatic CT – soma meaning body – encompasses “the ‘physical’ as well as emotional responses aroused in the therapist” (Ross, 2000, p. 453). Ross argues that psychoanalysis started with the ‘hysterical body,’ and that Freud and Ferenczi realized the close relationship of mind and body even in the early 1900’s. It is Georg Groddeck (as cited in Ross), however, who is often considered the ‘founder of psychosomatic medicine.’ In spite of the early recognition, it seems to be an area of psychotherapy that is not well explored nor understood as yet (Cain, 1990). Nevertheless, therapists are paying more attention to the ‘stories that their bodies have to tell’ (Ross). It seems to be in general agreement that somatizing – the expression of psychological conflicts through bodily symptoms – is rooted in the pre-verbal phase of the infant-caregiver relationship (Bowlby, as cited in Ross). As we saw in the discussion of transference, clients often transfer their unresolved emotional conflicts onto the therapist, who is seen to embody the client’s as well as his or her own emotions, thus becoming ‘situationally ill’ (Kernberg, as cited in Ross). Somatic CT can help therapists understand the physical and emotional aspect of the client’s experience, and expand the therapist’s self-awareness of her or his own unresolved inner conflicts.

(f) Aggressive CT – A therapist’s anger towards a patient may also reveal several different dynamics of the client’s inner world (Steinberg, 1990), for instance: (a) the patient feels anxious about developing a good working alliance with the therapist (fear of intimacy) and unconsciously manipulates the therapist into negative reactions toward him or herself so that there is a ‘real’ reason to distrust the process; (b) the patient feels angry at the therapist and cannot discuss the issue openly; (c) the therapist’s anger may be masking other feelings he or she might be experiencing toward the client; (d) the therapist might be experiencing the client’s conflicted inner relationships (*objective CT*); (e) an anticipation of separation and self-assertion on the part of the client, i.e, the client is building up inner energies, including anger, necessary to break through an oppressive pattern in his or her life.

(g) Archetypal CT – Archetypes are “The psychic form of preformed mechanism for the development of consciousness by ordering the chaos of perceptions into meaningful patterns” (Chalquist, 2004). Jung (as cited in Steinberg, 1990) believed that when the individual is going through a process of individuation, the unconscious – which ‘does not lie’ (Edwards, 2001) – increasingly seeks unity with the ego – which “sometimes needs to defend itself against the truth” (Edwards, p. 83). This encounter of ego and unconscious takes on the form of archetypal images, which represent the ‘collective unconscious,’ such as: the *Shadow*, the *Self*, the *Hero*, the *Great Mother*, *Death*, *Rebirth*, the *Divine Child*, *Animal/Animus*, etc. The encounter with the *Shadow* is believed to be the first one (Steinberg), with the purpose of preparing the path for the encounter with the *Self* archetype (Van de Castle, 1994). Therefore, an *archetypal CT* may indicate to the therapist that there is a need for integration of a more ‘collective’

matter so that the client can go through the individuation process. As in the other examples of CT, *archetypal CT* may also indicate the therapist's need for individuation.

(h) Cultural and culturally reinforced CT – Particularly important for my investigation, the cultural aspect of transference and CT has only recently appeared in the psychotherapy literature (Gelso & Mohr, 2001). There seems to be an agreement that such experiences, when left 'unnoticed' or unresolved, account significantly for the high drop-out rate of members from groups considered minority who seek psychological treatment (Gelso & Mohr; Perez Foster, 1998; Sue & Sue, 2003; Tseng & Streltzer, 2004). It is also noted in the literature that cultural transference and CT may occur whenever therapist's and client's cultural – racial, ethnic, gender, sexual orientation, socioeconomic – groups differ, and not only when the therapist is a member from a dominant group and the client from a minority group.

Perez Foster (1998) defines *cultural CT* as the "complex and interacting set of: culturally derived personal life values; academically based theoretical/practice beliefs; emotionally driven biases about ethnic groups; and feelings about their own ethnic self-identity" (p. 256). She argues that mental health practitioners educated and trained in North America are inevitably influenced by their own cultural 'affiliations' and also by the Euro-American assumptions embedded in their training. Combined with the assumptions brought by the client, Perez Foster sees the cross-cultural therapeutic dyad as an encounter with potential multiple points of dissonance. The phenomena of 'silent communications' (Perez Foster), i.e., the therapist's emotional responses toward a client that are left unspoken or 'unnoticed' as if forbidden, are for Perez Foster 'the number one' reason for high premature drop out rates for clients from ethnic minority groups.



Gelso and Mohr (2001) differentiate *cultural* and *culturally reinforced CT*. They define *cultural CT* as the “therapist’s culture-related distortions of the patient or rigid interpersonal behaviors rooted in his or her direct or vicarious experience with members of the patient’s RSM [racial/ethnic or sexual orientation minority] group” (Gelso & Mohr, p. 59). It is a general type of assumption; for instance, the assumption that members of minority groups lack the capacity for insight, and therefore are not suited for insight-oriented therapies (Perez Foster, 1998).

*Culturally reinforced CT* is rooted in early childhood experience: “culture-related distortions of or rigid interpersonal behaviors in response to the [patient] that are connected to and partly stemming from unresolved conflicts early in the [therapist]’s life with significant others” (Gelso & Mohr, 2001, p. 60). For instance, a Latino female therapist finds herself extremely upset with a White male client who has decided to divorce his wife, with whom he has a 12-year-old daughter, to marry a younger woman. After exploring her disproportionate reaction to her client’s decision, she realizes that she was transferring onto the client her cultural assumption that *all* men are womanizers, and also ‘re-living’ her childhood experience of ‘losing’ her father to another family.

As much as CT is recognized as a valuable instrument in therapy, the actual efficacy of such an instrument can only be verified through the meaning therapists may derive from the exploration of such experiences. Therapists need to acknowledge and understand the nature of their feelings toward their clients as much as possible, as soon as a red flag is raised, because clients will most likely pick up on unconscious cues that will permeate the relationship. It is therapists’ responsibility to keep the alliance safe by separating their emotional needs from those of their clients’. Countertransference, as we

saw above, can be a very useful tool in the treatment, and may even represent the client's eminent individuation (Steinberg, 1990). But it can also represent serious hindrances to progress in treatment, in which case the therapist should be prepared to recommend the client to another professional.

## Creative Expression

### *The Many Faces of the Image*

Many authors have demonstrated the practicability of creative expression in providing means for the exploration, understanding, and sometimes change of traumatic situations. In her article: "Creativity as a Means of Coping with Anxiety," Grossman (1981) speaks of creativity as being an innate human tool to cope with the chaos of inner and outer worlds. Henderson and Gladding (1998) remind us that different forms of the creative arts, such as drama, music, visual art and literature, have been used to prevent and treat mental health disorders, and enrich the lives of ordinary people from antiquity until today. Junge (1998), in *Creative Realities: The Search for Meanings*, addresses the inward and outward journeys of individuals when in search of a more meaningful life. Lewis (1997) believes that the creative arts can be a positive element in transcending cultural barriers and advancing growth.

Following a Jungian perspective, the image can: (a) bring into one's conscious awareness previously denied and/or unconscious aspects of one's psyche, and (b) trigger the healing potential of one's psyche, especially the *Self* archetype that seeks integration and self-actualization (Hocoy, 2005).

### *Creative Expression and Social Action*

In the process of researching the place of creative expression in the therapeutic relationship in which client and therapist are from different ethnic groups, I found a close connection between art therapy and social action or peace making. For instance, Dosamantes-Beaudry (1997) speaks of the importance of therapists ‘embodying’ their own cultural identity so that they can effectively accompany their clients on their inner journey “to interiorize a sense of self and a cultural identity” (p. 135).

Gersie (1995), Golub (2005), and Kalmanowitz and Lloyd (1999) describe their experiences in working out of their comfort zone, in places where *systemic poverty* and social imbalance have been established. Systemic poverty stands for a situation that has permeated a person’s life, reduced the options of self-actualization, and placed the individual in a situation of instinctual struggle for survival. These authors reported that in their experiences the use of creative expression provided participants with at least a means to acknowledge, exteriorize and find some validation in their struggles.

Hocoy (2005) points out that art therapy and social action are closely linked due to the “versatility and power of the image” (p. 7), in which personal and collective realities of suffering can be brought into consciousness through symbolic forms, creating an opportunity for self-awareness.

### *The Image and Countertransference*

In art therapy, the image also serves the purpose of containing the experience of transference and countertransference. Joy Schaverian (1990) believes that the “picture ...

becomes a vessel for the mixing of conscious and unconscious elements from the psyche of the patient with those of the therapist” (p. 16). The artwork seems to have the ability to capture and preserve the essence of the therapeutic relationship (Schaverian), for besides creating a physical distance from matters that are difficult to address, the creation of a visual piece allows one to return to it at a more appropriate time; days, weeks, or even years later.

In “Developing Cultural Awareness for Creative Arts Therapists,” Coseo (1997) describes how she gained deeper insight of the therapeutic relationship with her African American clients. Through an in-depth creative exploration and analysis of ‘culturally-charged reactions’ that emerged in the sessions, Coseo states that she was able to develop greater sensitivity and a more empathic understanding of her client’s reality. The use of journaling and creative responses lowered her defenses and helped her to deal with conscious and unconscious beliefs, expectations and misconceptions about her clients’ cultural background. For Coseo, creative exploration was an effective tool to contain and work through those reactions.

My heuristic investigation builds on Coseo’s (1997) work, and the data for my research was also collected through the use of creative expressions. The recording and discussion of my dreams and the ability to surrender to the making of squiggle drawings were two highlights of my experience in qualitative data collection.

### *Dreams*

The fascinating world of dreams has provoked much discussion since early times. Socrates (as cited in Van de Castle, 1994) in ancient Greece, asked: “What proof could

you give if anyone should ask us now, at the present moment, whether we are asleep and our thoughts are a dream, or whether we are awake and talking to each other in a waking condition?" (p. 4). Since then, dreams have been considered many different things, from communications from the gods to meaningless material (McMahon, 1993).

Van de Castle (1994) explains that Freud, for whom sexuality was an important element of the unconscious, linked dreams with repressed early sexual conflicts. That understanding of dreams is nowadays more related to the concept of daydreaming than to the dreams experienced in sleeping condition (McMahon, 1993).

Jung (1964) believed that dreams were an attempt of the unconscious to communicate with the conscious mind in order to maintain or restore psychic balance, and that seeking to understand dreams could help one in the quest for wholeness: "By following the messages appearing in dreams ... the path leading to self-realization and personal wholeness [can] be discovered" (Jung, as cited in Van de Castle, 1994, p. 145). Van de Castle explains that Jung often used dreams as 'signposts' to guide his decisions in personal and professional matters.

Whitmont and Perera (1989/1994) also believe in the revealing quality of dreams, and define dreams as a "portal to the source of life" (p. 180). They attribute to dreams the power of presenting a 'situation as it is' (Whitmont & Perera). Hence, dreams may have a threatening general feeling sometimes; they are, however, simply bringing the objectivity of reality to the dreamer's consciousness. From this stance, all dreams are good for they carry 'guiding messages' from the 'Guiding Self' with the purpose of helping the individual to adapt and integrate.

Other creative art therapists have used dreams and/or creative responses to further their understanding of the therapeutic relationship, such as Coseo (1997), Kielo (1988), and McMahon (1993), to name only a few. I am someone who often remembers dreams, and so I also took on the challenge of looking at them in a more systematic manner as a source of data for my investigation.

The intensity of my dreams varies. In my early 20's, I had recurrent dreams that lasted for years and that were only resolved in psychotherapy. Sometimes, I have one-time dreams that seem to reveal, through symbolic contexts, how I have *honestly* internalized certain events or feelings related to interpersonal relationships. In such cases, the general mood of the dream usually informs whether it is a matter on which I need to work, or if I may simply enjoy the intrapsychic communication. This experience seems to resemble Jung's (1964) belief that dreams are an attempt of the unconscious mind to communicate with the conscious mind, and actually guide one's decisions. Other times, I dream of a loved one who is far away, and I am taken by a comforting feeling, as if I had actually been with the person. And other times, my dreams seem to be just a confused review of my busy mind.

While in Peru, I remained attentive to my dreams, which turned out to be intense nocturnal experiences. Due to the intensity and vividness of some of them, I would wake up and stay awake for the remainder of the night, in a state of amazement. The difference in altitude between Montreal (Canada) and Arequipa (Peru) must have affected my dreaming patterns, for Montreal is at 82m (270ft) above sea level ([http://en.wikipedia.org/wiki/Montreal-Mirabel\\_International\\_Airport](http://en.wikipedia.org/wiki/Montreal-Mirabel_International_Airport)), whereas Arequipa is at 2,538m (8,327ft) (<http://www.wunderground.com/global/stations/84752.html>). Such difference in

altitude caused difficulty to breathing and severe headaches in many of the participants in the Peru experience, especially in the first days. However, out of the eight art therapy students, I seemed to be the only one who frequently experienced intense dreams.

Some of my dreams in Peru shared a particular concluding image: a bright light that encompassed the entire scene. Later I learned about ‘archetypal dreams,’ which are part of the Jungian theory and explained by Van de Castle (1994) as:

Dreams [that] stir up strong emotions and involve situations not encountered in everyday life: encounters with hidden treasure, temples, bright light; intense awareness of configurations of the sun, moon, and stars; experiences of temporal or spatial infinity; ... feelings of disorientation or euphoria. (p. 148)

Van de Castle (1994) states that archetypes act like a magnet, “attracting relevant experiences” (p. 153), and that archetypal dreams seem to be more frequent in times of crises, which can lead to maturation if the dreamer is able to withstand the confrontation, overcome it, and re-think their rigid attitudes or misconceptions.

In chapter five, I present those dreams I experienced in Peru and that became relevant to this study.

### *The Squiggle Game*

The squiggle technique, or game, has no rules (Winnicott, 1971/1992). First described by Florence Cane (as cited in McNamee, 2004), squiggle (or scribble) drawings are widely used in therapeutic interventions nowadays, both for therapeutic and diagnostic purposes (Betensky, 1995; McNamee; Winnicott). In the clinical setting, it

works like this: The therapist or client starts with random marks on a blank sheet of paper, and then the drawing is developed by the client, or by both if the client chooses.

The clients' narrative on the emergent images and shapes, and possible meanings associated with them, are encouraged, creating an opportunity for the client to address internal experiences verbally and nonverbally (McNamee, 2004). It is speculated that such experiences could promote an integration of the left and right hemispheres of the brain, which could lead one to increased awareness of unconscious dynamics, and ultimately to self-actualization (Lusebrink, 2004; Manheim, 1998; McNamee).

My personal experience with the squiggle technique is that it has helped me to become aware of 'forgotten' feelings. In times when I sense resistance in fully exploring the meaning of certain images, discussing them with another professional or peer has proven to be helpful.



## CHAPTER FOUR – CONDUCTING THE STUDY

### Setting

The existence of an annual cross-cultural art therapy summer program in Peru determined the setting of my research. The program is organized by Mount Mary College,<sup>4</sup> Wisconsin, EUA, and has a mandate to “provide participants with an immersion experience in how the vast majority of the world lives, to deepen and renew a sense of responsibility for our shared world and destiny” (Kapitan, 2005).

The cross-cultural art therapy experience is in fact an integrated summer course that combines lecture, discussion, directed readings, and supervised hands-on art therapy practice in a community setting in Arequipa, Peru (Kapitan, 2005). Participants may stay for five weeks or two months. Possible practicum sites are: a school setting for children with exceptional educational needs, an orphanage sponsored by an order of religious women, and the ‘pueblo joven’ of Alto Cayma – a community in its early stages of development on the outskirts of the city of Arequipa populated by a large influx of migrants. In this last site, one may work with children, women’s crafts groups, and homebound seniors and/or people with disabilities.

Four of the art therapy students decided to practice at the orphanage, and the other four, in Alto Cayma; I was part of the second group.

---

<sup>4</sup> <http://www.mtmary.edu>

## *The Community of Alto Cayma*

### *Gatekeepers and Key Informants*

The information presented in this section has been collected from the website <http://www.serving-alto-cayma.info/home.html>, and from conversations with Father Alex Bussutil –known as Father Alex – and another professional who is highly involved in the community, here referred to as Sonia (pseudonym).

A missionary from the Society of St. Paul, Father Alex has been living in the community for over ten years, and is much appreciated by its people. Recognition of people's basic human dignity, and preservation of their rich cultural identity are part of Father Alex's mission statement for his service in Alto Cayma. Sonia has been dedicated to the work with *campesinos* – individuals from the rural areas – for decades. I consider Father Alex and Sonia to be 'gatekeepers' of the community, as they coordinate and monitor the activities and services offered by the church to the community, and are regarded as 'beloved mentors' by its members. Creswell (1998) explains that gatekeepers are key individuals in field research for they are the ones who can provide, or not, access to a research site.

At the conception of my research, I proposed to gather direct accounts of life experiences from the members of the community in order to describe the people from Alto Cayma. Once at the site, however, I questioned whether their consent to participate in my study, assuming that they would, would be 'fully voluntary and uncoerced' (Miles & Huberman, 1994). I 'sensed' that there was a possibility that their consent might be due an internalized vulnerability and sense of duty to please those that come to serve the

community. Further, I wondered if they would expect any benefit from their participation. These are only some of the many ethical concerns and challenges to be considered by an outside researcher during fieldwork (Creswell, 1998; Minkler, 2004).

Therefore, to avoid any potential harm to the individuals in the community, and any questionable procedure that could jeopardize the presence and practice of the art therapy group there, only Father Alex and Sonia were interviewed for my study. They were, therefore, my *key informants*, i.e., “individuals who provide useful insights into the group and can steer the researcher to information and contacts” (Creswell, p. 60). They were informed about my project through a Consent Information Letter (Appendix 1) translated into Spanish (Appendix 1A). They signed a consent form (Appendix 2), also translated into Spanish (Appendix 2A), and Father Alex requested that the community name, as well as his own, be identified for the purposes of divulgation.

### *The People*

Alto Cayma is made up of 35 settlements on the outskirts of the city of Arequipa, Peru (<http://www.serving-alto-cayma.info/home.html>). Its population is of approximately 31,000 people, mainly migrants from all parts of Peru who left the mountains to find better living conditions in the city. However, life in the city can be even more difficult, especially if one lacks the tools of the trade needed to make a living, which is often the case, for those people have spent most of their lives in rural areas. Yet, in some instances people succeed in obtaining housing, some form of employment, and a better standard of living upon migrating to the city, but it often takes time, effort, and a lot of organization.

The majority of families in the community have left the rural areas due to terrorist attacks – Shining Path guerrillas – that started in 1980 in the countryside of Peru (Wikipedia, n.d., Shining Path). The guerrillas were also rooted in poverty, landlessness, and the absence of the State. The terror waged by both the guerrillas and the Armed Forces caused the displacement of thousands of people (Degregori, 1998) from the countryside of Peru. Even though the terrorist attacks are sporadic nowadays, the physical and psychological scars are still present in the lives of those who have lost their loved ones, and all their belongings. A certain numbness towards life, caused by profound pain and desperation, is one of the outer manifestations of so many losses.

Sonia reported that single mothers are the heads of many of the migrant families. She says that many of those women witnessed the death of their husbands and children by the terrorists; others were abandoned by their husbands; and others have left their husbands after being repeatedly battered. In the families remaining intact, home violence is unfortunately common.

Sonia believes that the combination of extreme poverty intensified by lack of work, lack of education and educational options, and the presence of *machismo* – a concept that connotes male superiority and strength (Kasturirangan, Krishnan, & Riger, 2004) – creates a vicious circle: The man is supposed to support the family financially, but lacks qualification to find a steady job. Sonia goes on to explain that it is common for the husband, the head of the family, to spend an entire day searching for some paying activity, only to come home empty handed late at night. Upon his return, the wife asks for money in order to feed the children who cry from hunger. Feeling humiliated, impotent, and useless, they batter their wife and children to regain, in a very distorted way, a sense

of male authority. Alcohol is often sought as a refuge as well, adds Sonia. The next day brings the same cruel reality back to the fore. Many end up leaving their families, only to start another one somewhere else.

For the past ten years, the *Blessed Theresa of Calcutta Parish*, represented by Father Alex Bussutil, has been the main supporter of the community. Improvements that have resulted from collective organization of efforts in the community of Alto Cayma are: access to medical and dental assistance; visits by social workers to isolated individuals and families; daily distribution of some 500 free meals; organization of groups with common skills that can generate income; financial incentive for those who aspire to learn occupational skills; organization of sponsoring program for children and seniors.

#### *Art Therapy in a Community Context*

Volunteers, skilled or not, are welcome and appreciated by the community, and a *House of Volunteers* has been built to host them. That was our lodging, and where much of the processing of the experience took place through daily supervision meetings and art making.

Due to a transportation strike that started a week after our arrival in Peru, most of the adults in Alto Cayma were out of work, and the children, out of school. It did not take long for the news to spread in the community: ‘There are some ladies – *las gringas* – with art materials by the church!’ For an entire week, we practiced what I will call here ‘street art therapy.’ We accommodated children and adults at available tables and on the floor, inside and outside the church, and provided them with art materials. We

encouraged them to share the art materials, have fun, and introduce their community to us. Every day we interacted with around 70 people in the morning by the church, and with another group of similar size in the afternoon in a sports yard. Children had the opportunity to express themselves through painting, drawing, movement, and through an ingenious construction of a Rock Town – *El Pueblo de las Piedras* – that was initiated by a ten-year-old girl and one of the art therapy students.

To bring closure to the many creative moments we shared with the community, we organized an exhibition at the church including all the works produced during that week. In the exhibition, which the children called *Mi Paysaje* – My Landscape – the children seemed proud to share their works with their parents and relatives, and demonstrated much excitement as they ran towards the altar of the church for more painting and drawing.

From the art therapy group practicing in Alto Cayma, I was the only one who had signed up for a two-month stay. Therefore, I had the opportunity to spend another three full weeks working in the community, and I divided each of my days between the daycare center, the women's crafts group, and also practicing home-based dyad art therapy – with a mother and her disabled son. The solo experience had a different flavor than the one I shared with the group. At first, there was a sense of isolation. However, I soon recognized the opportunity to develop more intimate relationships with at least some of the people in the community. I also realized how constancy of presence is important and how it can deepen relationships in a relatively short period of time.

## Participants

Due to the nature of heuristics, the lived experience of the researcher is the focus of the study (Moustakas, 1990).

### *Co-Researchers*

In our first supervision meeting in Arequipa – Peru, I informed the group of my double role in the experience: *participant*, and *researcher* investigating the impact of my cultural background in cross-cultural therapeutic interactions, through a heuristic self-investigation. There were eight students and a supervisor, and we met daily for two hours before heading to our practicum sites. Together we discussed the many ways the experience was affecting us personally and professionally. In many ways, the group co-participated in my ‘journey.’ As Sela-Smith (2002) suggested, they were all valuable “reflectors of possible areas of resistance that may be out of [researcher’s] conscious awareness” (p. 78).

## Methods of Data Collection

The heuristic research method places on the researcher the responsibility of identifying the methods that will best support and facilitate the flow of a genuine investigation. The methods should emerge from inner awareness and inspiration, and as long as they are ‘congruent with responsible ethical concerns’ (Moustakas, 1990), the researcher is free to create open-ended methods that she or he finds appropriate for the investigation (Bridgman, as cited in Moustakas).

While in Peru, I engaged almost daily in the creation of visual responses – drawings, paintings, collages using materials found within the surrounding environment – that depicted my perceptions of the experience, including my dreams during those two months. I often used the squiggle technique hoping to access information from an unconscious level, allowing for the emergence of tacit knowledge (Polanyi, 1969). I registered daily: thoughts, self-dialogues, conversations with peers, their responses to my visual work, and further questions that emerged from all of the above.

Once back in Montreal, and already in the *incubation* phase, I continued to process the experience through visual and written journaling. I also started tape-recording ideas and thoughts related to the inquiry. As it should be in a heuristic inquiry, I felt I was living and breathing my process. When I sensed that no new data was emerging, and that the process of data analysis ‘urged’ to get started, I considered the process of data collection to be completed.

### *Information on the Community*

Father Alex and Sonia opted for having informal conversations with me, i.e., no pre-formulated questionnaires, or tape recorders. In our conversations I sought to gather factual information that could help me to portray the community and its people in a truthful and respectful manner. More specifically, Sonia provided me with ‘reality checking’ about women’s lives in that specific context.



## Methods of Organizing and Synthesizing Data

In this phase the researcher's task is to gather and organize the material collected so that the investigation and its transformational aspects can be depicted and revealed to the external world in a comprehensive manner (Moustakas, 1990; Sela-Smith, 2002). The researcher enters again periods of immersion with the raw material, with intervals of rest, until the themes that emerged out of the experience are internalized and understood (Moustakas).

Throughout the two months in Peru, I created 63 images divided in two visual sketchbooks, and collected 55 pages of written material. There is also one tape that I recorded after my return to Montreal.

When I started reviewing my raw data, I realized that my images seemed to carry the essence of my days in Peru. Further, when I shared them with friends in Montreal, some of whom were not related to art therapy at all, I got feedback such as: "Now I have a better understanding of what you experienced in Peru."

Since it is the researcher's task to *discover* the best way to make sense and give an account of his or her lived experience (Moustakas, 1990), I 'owned' my easiness in working with my visual responses, and declared it my main raw data.

Certain images I created throughout those two months demonstrated, through a linear timeline, a clear variation in my reactions and feelings experienced in the *beginning*, *middle*, and *final* phases of the experience. For instance, in the beginning, my concerns gravitated more around my personal life in Montreal, such as being away from

my familiar environment and loved ones. In the middle, my concerns were decidedly related to my many reactions to the experience. And at the end, my concerns related to issues of separation from the community.

There was yet another timeline supported by my visual responses: *past* and *present*. There was no linearity in the second one; much the opposite. As much as the images related to the experience in Peru, they also seemed to intertwine freely with experiences from earlier periods of my life, awakening all kinds of ‘forgotten’ feelings. The second timeline interested me particularly because it seemed to point in the direction of *culturally reinforced countertransference*, i.e., “culture-related distortions of or rigid interpersonal behaviors in response to the [patient] that are connected to and partly stemming from unresolved conflicts early in the [therapist]’s life with significant others” (Gelso & Mohr, 2001, p. 60). Therefore, I decided to proceed with a more systematic analysis of my data before finalizing my findings.

### Data Analysis

“It is the focused attentiveness and internal alertness, rather than predetermined methods and procedures, that guides the researcher into revelations of meaning” (Douglas & Moustakas, 1985, p. 49).

The analysis of my data started while I was still in Peru, as it happens in most qualitative studies for which data is gathered in the course of fieldwork (Patton, 2002). During supervision meetings and peer discussions in Peru, I recognized themes that were later confirmed or disconfirmed with analysis of pertinent literature, and a more systematic exploration of the data, i.e., *coding*. Coding, argues Neuman (1997), has two

main objectives: reduction of collected data, which is often large in qualitative methods of research (Patton, 2002), and analytic categorization of the data.

After looking at my images ‘with intention’ (Betensky, 2001), a ‘general sense of the whole’ (Patton, 2002) started happening. Betensky argues that looking at images with intention, “a phenomenologist’s way of looking in order to see” (p. 122), enhances the personal value of one’s experience. This phenomenological procedure was used for the *open coding* of my main data. Following Neuman’s (1997) approach, the open coding is the first step of coding in which “the researcher locates themes and assigns initial codes... in a first attempt to condense the mass of data into categories” (Neuman, p. 422).

I tried to suspend all my *a priori* judgments (Betensky, 2001) and welcome tacit knowledge and intuition (Polanyi, 1969). I reviewed my primary question, and also the definitions of the concepts of culture and countertransference. Then, I open coded my images noting *all* and *any* intense physical and/or emotional reaction to them (Ross, 2000), or any ‘tendency to escalate’ (Hall, 1976).

The open coding of my images took place within two days. I allowed a week to go by, and went back to it. The result was confirmed and 20 images were selected. Moustakas (1990) argues that intervals of rest during data analysis are important so that researcher can renew his or her energy and gain different perspective of the study.

The themes that emerged from the open coding of my data were emotions and feelings, such as: intense sadness, anger, guilt, sorrow, frustration, elation, loneliness, sense of puzzlement; and bodily reactions, such as: knot in the stomach, urge to dance or laugh, desire to vanish the scene.

The next step in the coding process is called *axial coding*, in which one looks into creating subcategories of identified concepts, or finding ways to cluster related open codes (Neuman, 1997).

For the axial coding of my data I created a table with the groups of individuals with whom I had worked in Peru: children, women, seniors, individuals with disabilities. Then I assigned each of the 20 images selected in the open coding to their related group. The great majority of the images were related to women, which confirmed my memory of my most heated reactions in the field. At that moment in the coding process, I reflected on the fact that I had spent a lot of my time with the women in the community, and therefore, it was only natural that I had experienced more reactions towards them. On the other hand, it had been always up to me to choose the group with which to work in the community, and more often than not I chose to work with the women's group.

The visual data was reduced to ten images after the first phase of the axial coding. My next task, still related to axial coding, was to try to identify which images could be depicting "culturally-charged reactions" (Coseo, 1997). I worked with the ten images left and wrote down my feelings about them *at that moment of the coding*, and any event and/or feelings from the past that could possibly be associated with them. My intention was to awaken any dormant feelings. Four images were left after this coding stage.

In order to double-check my findings, I went back to the ten images and selected the written passages from my journal that related to them. My written notes confirmed that all of the four images had been the subject of discussions with my peers in Peru, as a result, many 'analytic insights' (Patton, 2002) had been produced about them. Analytic

insights are notes that result from the first attempts of analysis of the data, usually when the researcher is still in the field. Patton argues that they are important in the initial process of identification of themes, which will be confirmed or disconfirmed later by more systematic analysis of the data. The themes that emerged from my written data confirmed my selection of the images.

The final phase of coding consists of *selective coding*, in which the researcher is expected to create a storyline integrating the codes identified in the axial coding (Neuman, 1997). For this study, the selective coding resulted in the description of the themes identified in the second phase of the axial coding of my visual responses and written journaling. As I mentioned above, *past* and *present* experiences are intertwined in the final storyline of my findings, and they are discussed in the following chapter.

## CHAPTER FIVE – FINDINGS AND DISCUSSION

“I accept the obligation to search for the truth through my own intimations of reality, knowing that there is, and can be, no strict rule by which my conclusions can be justified” (Polanyi, 1969, p. 133).

### Validity in Heuristic Research

Validity in heuristic self-inquiry is established by the researcher’s ability to surrender to the process that pushes itself into the consciousness of the researcher, expanding self-awareness, deepening self-understanding, and self-transformation that can be experienced by others in and through the story that emerges from the researcher’s leap into the unknown (Sela-Smith, 2002). Ultimately, the concepts of ‘true’ or ‘false’ do not apply in heuristic investigation, and the researcher’s answers may change over time as well (Sela-Smith).

The quality of the data collected in a heuristic inquiry is usually highly personal and charged with a broad range of emotions (Moustakas, 1990), making the verification of findings an extremely subjective task. Lincoln and Guba (1985), however, have established ways for qualitative researchers to determine credibility in their studies, such as: peer debriefing, triangulation, negative case analysis, and member checking. Credibility is the qualitative equivalent to internal validity in quantitative research (Lincoln & Guba). Peer debriefing and member checking were applicable and applied to my investigation as I looked for ways of determining credibility to my process and findings.

The on-site supervision meetings and peer discussions in Peru, as well as discussions with my research advisor, provided me with great amount of peer debriefing. Their knowledge, experience and warmth helped me to manage my subjectivity throughout the process, deepen my ‘analytic insights’ (Patton, 2002), and overcome personal resistances to the self-inquiry, which are not unusual in a heuristic investigation (Moustakas, 1990; Sela-Smith, 2002).

‘Member checking’ was possible through Father Alex’s and Sonia’s accounts of the reality of the people in the community of Alto Cayma. They helped me to bring more objectivity into my investigation by confirming or disconfirming my assumptions about those people’s realities.

‘Bracketing’ (Lincoln & Guba, 1985) is yet another way of ensuring objectivity. It refers to a reflexive stance taken by the researcher who tries to understand how his or her personal experiences relate to the phenomenon in question, and how they may impact the research project (Lincoln & Guba). Due to the nature of my investigation, bracketing was utilized throughout.

Patton (2002) argues that at the foundation of qualitative analysis and reporting is ‘thick description,’ i.e., a rich description of the researcher’s lived experience with the purpose of taking “the reader into the setting being described” (p. 437). Since identification of therapists’ ‘inappropriate or irrational reactions’ (Weiner, 1998) – countertransferences – is at core of my study, what follows is a description of my inward journey. I have tried to provide as much of a rich description as possible in order to

honestly portray my inner experience, and provide you, my reader, with the necessary information to participate in it and verify my findings.

At this point, I would like to remind you that the purposes of my study are: a) To expand my cultural awareness; and b) To demonstrate, through my self- investigation, one way in which art therapists could approach the task of expanding their cultural awareness. Therefore, it is *not* part of the scope of this paper to provide accounts of the final resolution of the cultural countertransferences identified in the field, but to demonstrate how *awareness* of such inner dynamics can be raised for further work, most likely in personal therapy.

#### Answering Primary Question:

Which Countertransference Issues Were Most Likely to Have Been Informed by Cultural Differences?

From all the themes that emerged from the indwelling and analysis of my data, three were selected for they seem to reflect ‘culturally-charged reactions’ (Coseo, 1997) informed by my perceptions, developed and internalized in my early years, of the reality of South American women.

They are presented here within a context and discussed considering the patterns of countertransference presented in the literature review, in chapter three. The discussion is supported by an interactive triangulation of material selected from my visual and written journals, notes from my discussions with peers and supervisors, and research of pertinent and relevant literature. The themes will be discussed in this order: 1) Motherhood; 2) My perception of women’s roles in a Latin society; 3) An encounter with my *Shadow*.



## 1) Motherhood

The first days in Peru were filled with introductions, and conversations quickly moved from the general to more personal matters, more or less in this progression: “In which city do you live?... What is your profession?... Where do you work?... Do you come from a large family?... Are you married?... How many children do you have?”

The personal flavor of the questions did not surprise me, after all, we were getting to know each other, and it seemed ‘normal’ that we sought for similarities or particularities in each other. I am also aware that South Americans tend to be collectivists (Sorti, 1999), i.e., an individual’s family is his or her primary group, and “identity is a function of one’s membership/role in [the] primary group” (p. 50). North American societies, on the other hand, are understood as more individualist, i.e., “one’s identity is personal and individual” (Sorti, p. 50).

I was not prepared, however, for their varied reactions to the fact that I am not a mother *yet*. Immediately after I let them know that I am married, women and men invariably, would ask me: “*How many kids do you have?*” Women seemed to pity me, assuming that my husband and I are childless due to health issues. They would often get closer to me, touch my arm or hand, soften their voices and ask: “*Is it you or your husband?*” In men I perceived a more defiant tone of voice when they asked me: “*How come you don’t have any children? What are you waiting for?*” A six-year-old girl once asked me bluntly: “*How come little Jesus doesn’t send a little girl to you too?*” In spite of my reassurance that my husband and I are fine, conversations often ended with a promise of their prayers on our behalf, or with an advice for us to ‘hurry up!’

I felt judged and confronted, and I was annoyed with the constant questioning. I remember thinking: “*Can’t they leave me alone?*” But I considered the matter to be a personal one and, therefore, of less relevance than the work that we, art therapists, had ahead of us in the community. I decided to put it aside so that I could focus on being present in my interactions. So I wrote on my journal:

*It seems difficult for them to understand and accept the fact that I am married but don't have any kids. “Why don't you want to have kids?” they ask, and I usually tell them that it is because of my age... But they don't seem too convinced.*

After my conversation with the six-year-old girl though, I had the following dream:

I watched as the water started flowing into the pond... and the fish came with the flow... they were four... and dead. I could see needles sticking out of them and I thought of pulling them out, but decided not to touch the fish. Later, someone mentioned that there were bombs inside the dead fish. The bombs were meant to eliminate ‘us’ because we had not complied with certain “rules”...

Upon awakening from the dream I created Figure 2. When I saw the pictorial representation of the dream I understood the reason why the comments and observations regarding children had annoyed me so. The image seemed to carry the task of informing me that I was not prepared to put the discussion around maternity aside, *and* that the matter was actually ‘ticking’ inside of me, as if demanding an answer.

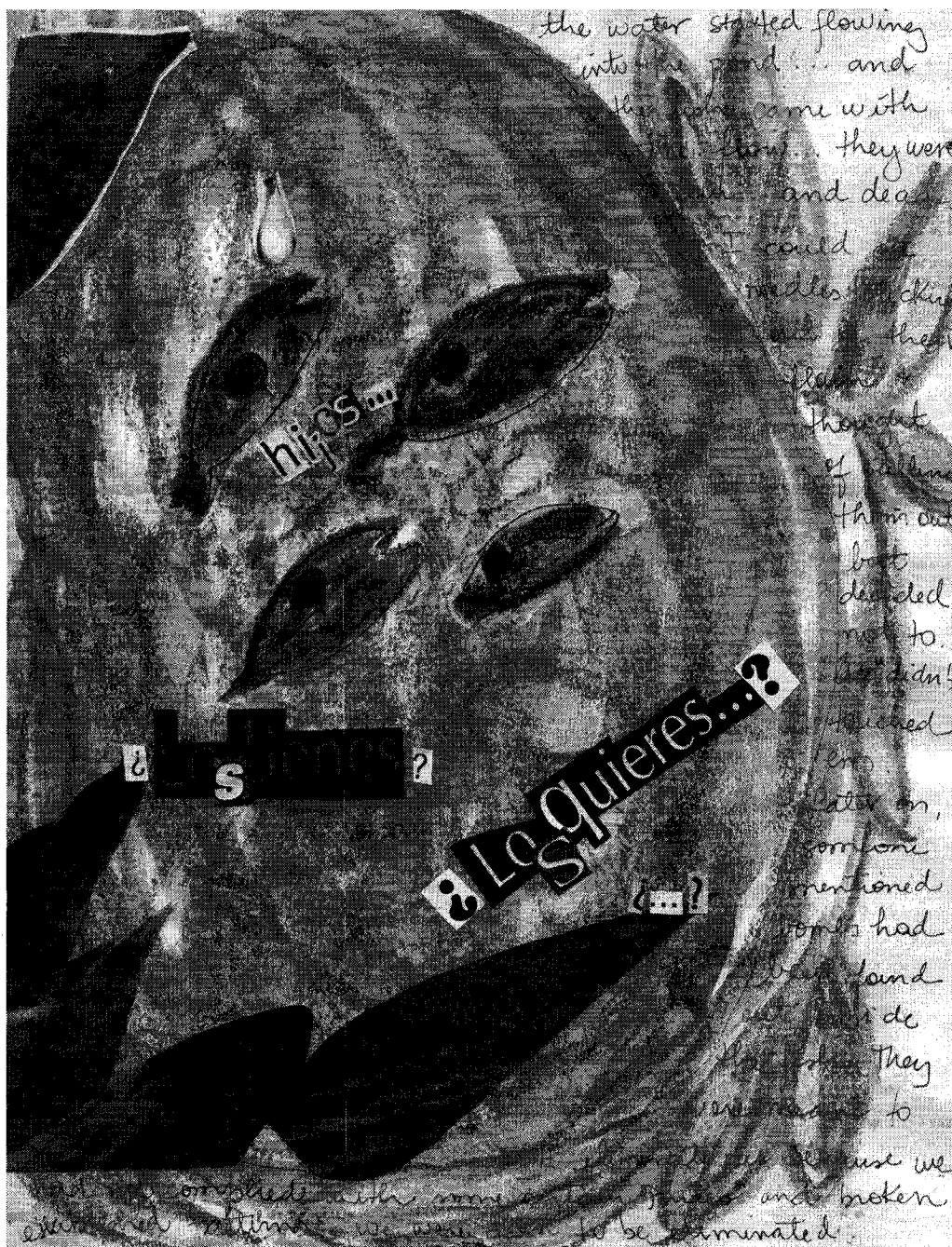


Figure 2 – Motherhood  
Mixed Media – 21 x 27,5cm

The image seems a clear representation of a pregnant belly, with dead fish inside. When looking at the image with my research advisor, she commented on how the word 'Lost,' (from the sentence 'Los tienes?') caught her attention. Indeed, the image seems to reflect a sense of sadness, which, I speculate, could be for feeling 'eliminated' or looked down upon for not 'complying' with what is expected of me as a woman in that environment, or for feeling that I am opting out of a great life experience. In any case, my ambivalence had surfaced.

Putting it into the context of countertransference (CT), I understood this to have been an experience of a *culturally reinforced, specific, neurotic, and negative* countertransference:

a) *Culturally reinforced* – With the constant questioning in Peru, I experienced feelings of shame and culpability, as if I were doing something wrong for not having made up my mind about motherhood yet. Those feelings were familiar to me due to my upbringing in a small town in Brazil where women were expected to 'perform' motherhood (see *Introducing Myself* for details). However, since my immigration to Canada, where individual choices, including that of motherhood, tend to be more valued, those feelings had not bothered me. Therefore, I speculate that I *counter reacted* to the expectations and judgmental attitude that the people in Peru *transferred* onto me. It was a cultural transference that met unresolved conflicts of mine rooted in my childhood, for my resistance in embracing motherhood seems related to an early perception that motherhood is most likely to be a 'burden';

b) *Specific* because it was a strong reaction to a *specific* unresolved subject matter

that had relevance in my life;

c) *Neurotic* because a 'fit' happened between their judgmental questioning and my vulnerability regarding the subject matter; and

d) *Negative* because initially, instead of looking into the issue, I just wanted that feeling of annoyance to go away.

## 2) My perception of women's roles in a Latin society

Two experiences defined this topic. The first one seems to represent an experience of *culturally reinforced, generalized, somatic, and positive CT*.

One morning, I was walking to our supervision meeting in Arequipa and realized that the woman who slowly walked in front of me carried a child in the bundle she had on her back. It is a typical scene in Peru. Indigenous women use their bundles to carry just about everything, including their children. The scene has become a traditional representation of Andean women and it is depicted in many forms of arts and crafts. I had already seen many women with their bundles, but for some reason I perceived that scene differently that morning, and became overwhelmed with a feeling of sadness. I tried to translate into words in my journal the strong physical reaction I experienced:

*When I saw that woman walking by, with her child wrapped in a traditional Peruvian shawl attached to her body, I felt my stomach contracting in pain... I felt sad for her... starting another day of street begging perhaps... she probably walked all the way from the hills to*

*find some work in the city for the day. I heard that when the children are older, some mothers have to, or choose to lock them up at home for the day so that they can get some work in the city. How painful it must be... Many children have died from drinking kerosene or from some other type of domestic accident.*

My feelings of sadness progressively developed into a sharp pain in my abdomen and I searched for some mirroring for that pain. My art therapy colleagues did their best to contain my emotional descriptions of how I perceived the reality of those Peruvian women, who clearly lived in absolute poverty and often raised their children as single-mothers for various reasons. It was, however, after a squiggle drawing that the pain started to shift, and, eventually, dissipated; it was the image of a woman carrying a bundle on her back (Figure 3). The image is vibrant. The sun seems intense, as intense as the Andean sun: hot and bright. The woman, as if mesmerized, stands facing it, while her child, I assume, rests in the bundle. There is movement in the lines of the upper part of her body, but the legs seem static, hesitant. I wrote to her:

*You woman have got the strength of the Earth.*

*Just like the Earth Mother*

*that supports us all with resignation and patience,*

*You carry in your womb fruits of love,*

*sometimes, of force and possession...*

*And even though, you seem to follow your fate of generating life*

*without much questioning... can you question? Would you?*



Figure 3 – Woman With a Bundle  
Squiggle Drawing (Mixed Media) – 21 x 27,5cm

In terms of countertransferences, I understand my strong reaction as being:

a) *Culturally reinforced* because it touched on a feeling of sadness that I seem to have internalized in my early years regarding the reality of women struggling to raise their children while fighting poverty;

b) *Generalized* because it expressed a ‘general’ empathy toward all women struggling with poverty in that context, as opposed to one particular case;

c) *Somatic* because the reaction was highly informed by my body, more specifically, by contracting and sharp pains in the abdominal area –the area of the body in which the fetus remains throughout the gestation period; and

d) *Positive* because the passages from my written journal, shared above, revealed a sense of intense empathy and admiration. At the end of the second passage, the questions seek a better understanding of her reality, without assuming or imposing my ideas on her.

As discussed before in this paper, it is important to remember that *positive* and *negative* CTs are related to the ‘tone’ or quality of the therapist’s feelings toward the client, and that even a *positive* CT can hinder the therapeutic relationship if ignored or overlooked (Weiner, 1998). In the situation described above, if I were to take an Andean woman as a client, my generalized and intense feelings of empathy, combined with my strong physical reactions, if left unmastered, could prevent me from being genuinely present for her and effectively listening to *her* needs.



The second experience under the topic of '*My perception of women's roles in a Latin society*' has been identified as an experience of *culturally reinforced, generalized, aggressive and negative CT*.

Sorti (1999) argues that a good way of experiencing the culture of a group is to participate in their festivities. Towards the end of my stay in Arequipa, I had the opportunity to witness, on one afternoon, two traditional Peruvian events: bullfighting and rooster fighting. Both activities seem to be a demonstration of male struggle for power and dominance, which I speculate from simply watching the way the owners of the animals argued with each other before, during, and after the fights.

Bullfighting seems to be perceived as a social event, as people dress up for the occasion. The crowd was comprised of mainly men. I learned that, during a bullfight, if the bulls are not eager enough to fight against each other, a young cow is brought into the arena to incite them. The bulls are not expected to kill each other though; the more dominant one ends up chasing the opponent out of the arena. Throughout the afternoon, I observed as the cheers progressed from simply enthusiastic to an intense uproar demanding a winner.

The experience at the rooster fighting was even more intense, and I could stand for only 10 minutes. Again, the crowd was predominantly male. Sharp nails were deliberately attached to the roosters' hill and they were incited to kill the opponent. The crowd shouted loud and aggressive commands to the roosters. I was told that usually a lot of money is at stake at rooster fights, and so it is not unusual that the fight continues amongst the gamblers.

The more I thought about the afternoon at the fights the more frustrated I got. Frustrated with what seems to be an inherent human need for the sight of blood, and a need to act out the aggression drive in some way. Also, frustrated with myself for I had been slowly lured into the contagious aggressive emotion in that afternoon, and, at the last bullfight, I caught myself vigorously cheering with the crowd for the bull 'El Matador' – The Killer. It required me a conscious effort to 'wake up' from that collective trance during which aggression was being openly worshiped.

Soon after that afternoon at the fights, I created a visual response attempting to contain and better understand my mixed feelings (Figure 4). The image depicts two women standing by a wall, seeming oblivious of a reality that is happening just behind them while staring at something else. The same type of shawl used by Andean women to wrap their children wraps one of the bulls in the image. The skirt of one of the women reminds me of the red cape used in bullfighting, which, I learned, is red simply due to tradition since bulls are color blind (Wikipedia, n.d., Bullfighting). My wording over the image feels confronting and judgmental.

Putting it into context of CT, I understand my reactions as being:

a) *Culturally reinforced* because, once more, the experience resonated with an internalized perception of the roles played by genders in the culture of the group in which I grew up. There is a Brazilian popular saying that translates more or less as: '*Secure your doe (female goat) because our buck (a male goat) is at large.*' The saying was usually offered as a general piece of advice from the mothers of boys to the mothers of



Se que suas cabritas pinguia porras (Brazilian women) saltas

We prevent aggression/probina in our sons;  
We supervalue 'caterers' on our daughters;

We sleep over the fence when we should  
Speak up for feminists and injustices  
and then we do more whenever we

our sons in war; when they die of hunger,  
discrimination when our daughters are  
assaulted, hurt, killed...

Is it too much to dream of a more  
of the world? Can we wait for a more  
equal world?

we also  
violence  
Can we, in we  
parks our  
daughters  
are

in our bullfights what keep performing racism  
around women is against bullfighting? without minorities? When all we  
going to wake up? Open our eyes! Put the wall of ignorance down.

in our bullfights what keep performing racism  
around women is against bullfighting? without minorities? When all we  
going to wake up? Open our eyes! Put the wall of ignorance down.

in our bullfights what keep performing racism  
around women is against bullfighting? without minorities? When all we  
going to wake up? Open our eyes! Put the wall of ignorance down.

Figure 4 – Women and Bullfighting

Mixed Media – 21 x 27,5cm

young girls who were being ‘chased’ by their sons. It implied that young men were not to be held responsible for their attitudes toward young girls, after all, they were behaving accordingly to the group’s expectations. It is considered the girls’ responsibility to remain out of the boys’ sight if they do not want to be ‘taken’ by them;

b) *Generalized* because it reflected a personal belief that we women, in general, can have a say and *should* assume more responsibility for the attitudes and values that are passed onto children, instead of turning our backs to unquestioned societal norms that will eventually hurt our freedom of expression. As the literature shows (e.g., Hall, 1976; Weinberg, 2003), we human beings seem to *learn* whatever we are taught through the various communication systems established in our groups of contact, starting with our family, and primary caregivers;

c) *Aggressive* and *negative* – Overall, Figure 4 expresses my frustration, indignation, and anger about traditional beliefs and attitudes that are passed on from generation to generation as part of a ‘culture’ without much or any questioning. I characterized this reaction as a CT due to my *negative* experience regarding gender differences in early childhood (for details, refer to the section *Introducing Myself*). I also speculate that such reaction could be, and perhaps should be, understood as a social responsibility, because it relates to a complex discussion over power balance between genders present all over the world, and not only in South America. At this moment of my training, however, I would rather err on the side of being too zealous regarding my over reactions, instead of undermining them and risking starting my practice with unturned stones of obvious prejudices.

### 3) An encounter with my *Shadow* side

Five days after my arrival in Arequipa, Peru, I had the following dream:

The group of art therapists was participating in a race. We seemed very energetic, but not competitive; we wanted to finish the race as a group. Teenagers, boys and girls, were participating in a parallel race. They seemed extremely competitive and aggressive though, for they would kill their weaker participants during the run.

Somehow, I knew about their group agreement: The one who wins must have killed all of the others along the race, and right after proclaiming him or herself the winner, he or she would commit suicide, so that the energy of evil could return to the universe. I saw as the winner committed suicide: The physical body vanished as she or he (I could not differentiate it) violently inserted a sickle between the neck and the left collarbone. Seconds later, an intense stream of silver light, quite bright, rushed to the skies; the cycle of evil would continue...

I woke up in a sweat and could not go back to sleep. The details were very vivid, and I wrote in my journal: *“What was that? It makes me think of the connection of good and evil... how they seem to ‘walk’ hand in hand. But why such a dream now?”*

I remained puzzled for several days, and it was an image from a squiggle drawing (Figure 5) that brought some balance back to my thoughts.



Figure 5 – Ancient Wisdom  
Squiggle Drawing (Pastels) – 21 x 27,5cm

A strong and serene creature flies high in the sky, passing through ancient places, and carrying with it a human head that seems to rest peacefully (or maybe it is 'resting in peace'). The image somehow restored my faith in the goodness of life. If the dream called for a greater awareness about the presence of evil in life, a phenomenon that I consciously tend to overlook, the image from the squiggle drawing seemed to reassure that wisdom has also been part of life since ancient times, guiding humankind through many difficulties, and it is most likely to continue to do so.

My inner *Self*, however, seemed to desire a deeper and more personal exploration around the topic of good and evil in life, and five weeks into the experience, I had another intense dream:

I was standing in an open, green field, and a few meters ahead of me there was a beautiful dark-skinned, young girl, with black hair and a slim body, chained to a pole by her wrists. I felt the sun brutally hot on my skin. She seemed very weak. Her head was falling forward and her legs were bent. Someone started whispering her story in my ear, as if it were a secret or a rumor: She had been the favorite mistress of a White colonel for some time. For some unknown reason, he had left her with a promise to return, but he never did. Without her patron's protection, even her family and friends had rejected her. She was captured, chained to the pole and left to die under the scalding sun. I got closer to her. I wanted to do or say something but it was too late... She looked at me for a moment and then her head fell on her chest; she died. The sun became even more intense and the whole scene disappeared.

Again, I woke up and could not go back to sleep.

I felt confused and did not know how to start dealing with that dream. I drew it as soon as possible (Figure 6), which helped to ease the feeling of anguish left by the gaze of that dying girl; I pitied her. Figure 6 is entitled *Ne Me Quitte Pas*. I shared my drawing and the manifest – most obvious – content of the dream with some of my colleagues. We dwelt on the impact that the image caused in everyone who saw it: powerful, painful, creepy, and mostly sad, were the adjectives most used to describe it. We speculated that the story of the affair that was whispered to me in the dream had probably happened many times in real life between White colonizers and Black slaves in the period of colonialism in the Americas. But the vividness of the details was disturbing, and again *why now?* Why was I having such a dream? What did it mean?

It was one of my peers (who had by then become a good friend) who gently suggested that perhaps I should deepen my investigation on how I *honestly* felt about Latin women, including myself, since the dream could be simply bringing to my consciousness a hidden aspect of a generalized perception of mine. I remember looking at my friend without knowing what to say. She had touched a tender spot of my *Self*, and I understood that that dream was as a breakthrough, a moment of illumination in my investigation (Moustakas, 1990; Sela-Smith, 2002).

I had left for Peru for a heuristic self-inquiry to learn about possibly hidden cultural biases in my character. Without exactly knowing what would happen in those two months, as it often happens in heuristic inquiries (Sela-Smith, 2002), I ventured into a journey into the unknown, trusting that there would be a lot to learn from it. I was aware





Ne me quitte pas...  
Não sei o que te dá  
I saw your eyes...  
suas feições se encaixando  
suas esperanças  
momentos...  
fui marcado de tua  
esperança por a mão  
amiga amante  
que se foi e se voltou  
Eu não te tomarei  
pelo desalento...  
olhando sob o sol  
caliente, mergulhando  
a te queimar a pel

Figure 6 – Ne Me Quitte Pas  
Mixed Media – 21 x 27,5cm

that there was always a chance of returning to Montreal without enough material to write a research paper. But at that particular moment I knew that a painful, but nevertheless wonderful shift had happened inside of me, and that my tacit knowledge (Polanyi, 1969) had found its way through my dreams.

After an honest reflection, self-dialogue with the image, and indwelling on the content of the conversation with my peer, I was able to admit my paternalistic feelings towards women from impoverished groups, especially from South America. The dream seemed to reveal a condescending type of empathy towards them that I had not been able to recognize until then. There was also a feeling of pity towards them that had been masked as an intense compassion. Further, I speculate that there was also a feeling of self-pity being revealed by the dream, for I have, at times, perceived myself as rejected by my family and my own people, and undermined abroad for being part of groups considered minority: women, Latin, immigrant. Although somehow ashamed of such feelings, I experienced a sense of freedom after naming them, and recognizing that I am not all compassion and understanding; just like everything else in the universe, I also have a dark side that challenges me in many situations. Upon my return to Montreal and reviewing Moustakas' (1990) work, I recognized my experience in his description of illumination:

Illumination opens the door to a new awareness, a modification of an old understanding, a synthesis of fragmented knowledge, or an altogether new discovery of something that has been present for some time yet beyond immediate awareness.... In illumination, it is just such missed, misunderstood, or distorted

realities that make their appearance and add something essential to the truth of an experience. (p. 30)

All the other experiences of CT mentioned above seemed to have had the purpose of preparing me for that moment in the experience, in which I was called to acknowledge my dark side, or the *Shadow* side of my personality.

Van de Castle (1994) explains that it is common for one to experience feelings of guilt and shame when the *Shadow* side starts moving into conscious awareness, because it contains all the feelings that one learns to disown in the early years, and such feelings are charged with primitive energy. The *Shadow* side needs to be confronted eventually, argues Van de Castle, so that the energy may be utilized creatively in adult life towards individuation. Acceptance of the disavowed and dark feelings “provides a source of additional energy for continued maturation” (Van de Castle, p. 149), and the encounter with one’s *shadow* is believed to have the purpose of preparing the path for the encounter with the true *Self* (Van de Castle).

After much indwelling about this last dream, I created Figure 7, *Letting Go of Control*.

Another important realization, or moment of *illumination*, in my process is the fact that all my reactions to the experience in Peru seem to have been informed by cultural *similarities* and not *differences*, as I had assumed in the initial phase of my study. This realization made me reflect on the possibility that I had been trying to dissociate myself from certain aspects of South American ways of living. My inner reactions,



Figure 7 – Letting Go of Control  
Drawing ( Dry Pastels) – 21 x 27,5cm

dreams, and images brought certain assumptions to the surface, suggesting that I carry inside feelings and behaviors I *have learned* when growing up, even though I have consciously rejected them, such as: submissiveness, anger, shame, guilt, and dependency.

Hall's (1976) explanation of the effect of cultural dissociation helps me to understand some of my over reactions to the experience. He argues that whenever we identify a personality trait from which we have tried to dissociate ourselves in a person close to us, we may behave excessively harshly towards that person, because we are usually very hard on ourselves. He goes on to say that the situation has a better chance to be resolved when one is capable of: a) recognizing the existence of a process of identification; b) accepting that the 'real' problems lie in the dissociative aspects of one's personality, and not in the other person or relationship; and c) empathizing deeply with the other person. Hall also reminds us that processes of dissociation and projection are normally unconscious.

The anger I was experiencing when Figure 4 was created was all directed towards *them*, the Latin women who turn their backs to the demonstrations of 'machismo' in their lives, contributing, therefore, to its perpetuation. At that moment, I basically denied my Latin identity and exempted myself from any shared responsibility. For that reason, figure 4 may also be speaking of my attitude of 'turning my back to them' and dissociating myself from them in that matter all together.

My thoughts of a probable over-identification with them happened after much indwelling on the dream depicted in Figure 6. In that dream, I saw the woman's face

extremely close to mine, so close that I could hear her breathing, and I wondered if it could have been my own breathing. Only when I was able to acknowledge a possible process of identification was I then also able to start working on my inner feelings and perceptions.

Once more, I remind you, my reader, that I am presenting here only my initial reflections on the identified cultural countertransferences, for my goal is to demonstrate the path I have traveled in order *to become aware* of the reasons why I needed to work on my own cultural awareness.

Finally, because all the conflicts discussed above relate to women and their roles in society, in more than one instance during this work I felt tempted to utilize the feminist approach to support my discussions. However, I decided, together with my research advisor, that my lived experience in Peru should be reported following the study's original design, and it may serve as the basis for a possible future investigation with a feminist stance defined from the beginning.

#### Answering Secondary Question:

#### How Did the Creative Expression Process Help?

In the section *Creative Expression* – chapter three of this paper – I pointed out other creative art therapists who have explored the use of creative expression as a means of gaining better understanding of human behaviors, and also of the therapeutic encounter (e.g., Coseo, 1997; Kielo, 1988; McMahon, 1993; Schaverian, 1990). In that section, I

also discussed the many stances researchers have taken when investigating the creation of images: from relief from anxiety (e.g., Grossman, 1981) to social action (e.g., Gersie, 1995; Golub, 2005; Kalmanowitz & Lloyd, 1999). Emphasis was given to the experience of producing squiggle (scribble) drawings, because it is a recognized intervention for therapeutic and diagnostic uses (Betensky, 1995; McNamee, 2004; Winnicott, 1971/1992), and it is believed that it could allow for communication of unconscious issues into consciousness (McNamee). The human fascination about dreams, and the efforts to understand their purpose and meaning have also been addressed.

The data for my investigation comprises of visual and written recordings of my personal responses to the experience in Peru. Drawings, paintings, collages, using materials found in the environment, were created in a spontaneous manner, i.e., decided on the spur of the moment. The use of the squiggle technique was preferred whenever I sensed inner resistance to the process of self-inquiry, which occurred mainly when a ‘tender spot’ seemed to have been touched. The recording and discussion of my dreams, and the surrendering to the process of creating the images have been two highlights of my experience in qualitative data collection.

During the analysis phase, I determined my pictorial responses to be my main source of data for they seem to carry the essence of my investigation. Their many layers seem to have captured and revealed certain ‘forgotten’ aspects of my way of perceiving the world.

The details of my experience related to the dream I depicted in Figure 6 is an example of this type of revelation (for details, refer to *An encounter with my shadow*

*side*). The dream revealed feelings so complex and disturbing to me that, had I not made a pictorial imagery of it as soon as possible, I would have probably ‘forgotten’ it after a short while. The image of it became a reminder of a painful, but nevertheless wonderful moment of illumination in my process.

This has been the first time I have worked with dream content in such a way. Later, I learned that the procedure I spontaneously used is similar to the one Jung (1961/1997) applied when working with his and his clients’ dreams. Jung thought that the pictorial imagery of a dream offered a more direct way of dealing with the latent context of it, as opposed to simply talking about the dream. He found that through translating emotions into images, a process he described as “finding the images hidden in the emotions” (Jung), a *psychological self-healing process* could be initiated:

Had I left those images hidden in the emotions, I might have been torn to pieces by them. There is a chance that I might have succeeded in splitting them off; but in that case I would inexorably have fallen into a neurosis and so been ultimately destroyed by them anyhow. As a result of my experiment I learned how helpful it can be, from the therapeutic point of view, to find the particular images which lie behind the emotions. (p. 26)

From a Jungian perspective, images and dreams are at the service of those seeking personal wholeness (Hocoy, 2005; Van de Castle, 1994). They are understood as attempts of communication between the unconscious and conscious aspects of the individual, as they can bring into one’s awareness denied and/or unconscious aspects of one’s psyche. Both can lead a person in the quest for self-realization and wholeness by triggering the



healing potential of one's psyche, especially the *Self* archetype that seeks integration and self-actualization (Hocoy).

I promptly recognized that the dream depicted in Figure 6 could be a manifestation of raw unconscious material surfacing to my consciousness. The creation of a pictorial imagery promoted a feeling of relief for it freed me from the heavy burden of carrying it inside; it was then contained on the paper, and it could be shared with others. Through self-dialogues, and self-disclosure in discussions with my peers, awareness of unknown assumptions started to occur, and old attitudes and behaviors could then be questioned. After much *indwelling*, I experienced a feeling of freedom that I translated into Figure 7.

Furth (1988) states that our consciousness, considering its limitations and its necessary defenses that help us to cope with our realities, cannot understand all the symbols – “deep and complex structures that strive for balance and wholeness” (p. 9) – revealed by our unconsciousness at once. Therefore, as much as I recognize that the creative expression process led me into a quest for wholeness and triggered the healing potential of my psyche, chances are that I have gone as far as I am prepared to at this moment in my life, considering both personal and professional realms. My understanding of the entire process will most likely continue to develop as I continue to mature as a person, and as my ability to work with the symbols presented in dreams continue to improve.

In spite of the feeling of freedom fostered by the creative process in the investigation, the following question still intrigued me: *Why such dreams now?*

From the Jungian perspective, as explained by Furth (1988), we learn that tension between conscious and unconscious processes – knowing and not knowing – is believed to generate a great deal of ‘psychic energy.’ Jung (as cited in Furth) understood psychic energy as “the intensity of a psychic process, its psychological value” (p. 4), and believed it to be intrinsically related to the phenomena of progression and regression, i.e., opposites that create balance and that cannot exist without the other (Furth).

### *The Phenomena of Progression and Regression*

“The psyche is a self-regulating system, [and] there is no balance ... without opposition” (Jung, as cited in Furth, 1988, p. 7). From this perspective, life, as opposed to mere existence, can only exist if there is the pull and push of opposites (Furth), with the *Self* striving for self-actualization and balance, in a compensatory manner, between conscious and unconscious worlds.

Considering that my dream depicted in Figure 6 seems to fit the description of an archetypal dream (for details, please refer to *Dreams*), more specifically, an encounter with my *Shadow* that guided me through the path for an encounter with my *Self*, the following interpretation seems to offer a satisfactory answer to my pending question:

*Why such dreams now?*

In Furth (1988) we find that “the greater the tension, the greater the [psychic] energy available” (p. 8). In my case, I speculate that the challenge of crossing borders in search of *cultural awareness* is an example of the phenomenon of progression, i.e., a moving force that is difficult to stop (Furth, 1988). However, in order to progress, one needs to regress, states Furth. Therefore, I had to regress; I had to look at neglected areas

of my life so that progression, as a human being and as a professional, could occur.

Following Van de Castle's (1994) explanation, the dark side of an individual holds all the assumptions, emotions, beliefs, and feelings that have been denied expression. Because they have been neglected, they are believed to hide in the unconscious psyche, and surface only in moments of stress, confrontation, and tension, constituting a moment of regression (Furth, 1988).

Regression is believed to create a blockage in the flowing of the individual's psychic energy, which can only be recovered when, and if, the individual addresses the issues involved in the blockage (Furth, 1988). Therefore, it can represent a 'progressive moment' in one's life, for when the flow resumes renewed energy is directed to all the areas of the individual's life, and the *psychological self-healing process* takes place (Furth).

For a while, I felt vulnerable and invaded by my own research process. With time to internalize the lived experience, I believe I have been able to reach the initial stage of acceptance of my dark side, for as much as it opposes my *Self*, it also brings balance to it. This has probably been the first time I have allowed myself to acknowledge the opposite forces of my personality without feeling like a 'bad' person. It has probably been the first time I have accepted myself entirely.

#### *Creative Expression and Countertransference*

The creative expression served as a vessel (Schaverian, 1990) for the mixed conscious and unconscious emotions experienced in my countertransferences. Every time

I had the opportunity to look at the depiction of my feelings – shame, anger, frustration, fear, empathy, joy, disillusion, hope, etc. – I was reminded to acknowledge and contextualize my own unresolved issues. I also speculate on how many of those intense feelings could have been projected by the members of the community as a way of alleviating their existential burden. How much of their burden was I carrying in those moments of intense somatic reaction? The practice of creating and reflecting on an image enabled me to return to the work with the community with a renewed and deeper feeling of empathy, and likely being more effective in my interactions.

In summary, the creative expression process of my investigation guided me through a journey into unknown parts of my psyche. It is my experience that it untapped tremendous amounts of psychic energy; supported me throughout painful moments of blockages; helped me to remain true to the demands of my self-exploratory process; helped me to accept and integrate opposing sides of my *Self*, and it helped me to remain focused as I revisited my past, looking for a better understanding of my present life.

#### Integrating the Experience into Personal Context – After Immigration

After the researcher's self-reflexive exploration proposed in the heuristic process defined by Moustakas' (1990), an inevitable expansion and deepening of personal knowledge and understanding of the *Self* in relation to and within a broader context takes place (Bloomgarden & Netzer, 1998; Sela-Smith, 2002). As I have started this study by revealing parts of my personal history, I find necessary to reveal how this experience has

affected my personal life as well. To convey a sense of continuity, I will resume from the point where I left off, the immigration to Canada.

I immigrated to Canada looking for a safer and less judgmental environment. Focused on the process of adaptation to my new life in Montreal, I tried to turn over several pages of my personal history at once; after all, they belonged to the past. I felt safer and perceived Canadian society as being more respectful of independent women compared to Brazil. However, immigration is always a moment of transition, and often of many losses. Developing relationships in Montreal was harder than I had expected. Recently, I came across Dokter's (1998) narration of her experience as an immigrant: "I will never be quite from here, but am also not any more from there.... that makes me displaced and unsettled, without a sense of belonging" (p. 146). Her words mirror my initial experience as I remember wondering: 'Will I ever belong somewhere?'

I continued to involve myself with the arts in Montreal and that helped me to feel grounded. Slowly my new environment started to become 'familiar.'

I had been in Canada for a year when I met John, whom I would marry two years later. We seemed to have recognized the possibility of a good relationship from the beginning, and we had a common goal: to share a playful and creative life with each other. We met at a centre for the arts in town, where I was taking a drawing course and he was working as the musical director for a theatre play. Arts are a major part of our life together, as they have been from the beginning.

John is of English descent, and honesty in relationships is one of his strengths of character. As much as I had longed for honesty in my relationships, the whole situation

was new to me. Therefore, in perceived moments of confrontation, I would find myself regressing to old patterns of relating to romantic partners, and projecting onto John those feelings and behaviors that had become part of my identity, even though consciously I rejected them, such as neediness and jealousy. Weinberg (2003) states that regression, even though painful at times, seems to restore one's illusion of belonging, which seems to related to the inherent human need for stability and predictability explained by Hall (1976).

I have always believed that an individual can modify behaviors and worldviews when and if certain basic conditions are met, and once more I find support in Hall's (1976) words: "Everything man is and does is modified by learning and is therefore malleable" (p. 37). Therefore, feeling accepted by my partner (John), and willing to experience a life free from feelings of imprisonment, I was able to look at my crystallized responses (Weinberg, 2003). The more I resolved to pay attention to them whenever they surfaced, the more I was able to disrupt the behavior and take their power away. Once more, I can identify the presence of the phenomena of progression and regression seeking to bring balance and maturation to the *Self*.

After a while, I declared Montreal my comfort zone, for here I can walk down the streets with some sense of security; I have a partner that respects my independence, and with whom I share a passionate and balanced relationship; and I am preparing myself to become an art therapist. All of these changes make me feel settled.

My trip to Peru, however, made me return to those pages that I thought I had turned over for good at the time of my immigration to Canada. Assumptions related to women's

rights and responsibilities as a partner, a mother, and a citizen of the world, surfaced charged with resentment, frustration, anger, and sadness. Some of them, I realized during the *incubation phase*, pervaded my relationship with John as well. I have been able to acknowledge in myself a certain inability to handle the control of certain situations over to him, even when the situation requires so. A silly example, but which has caused a few discussions over the years, is my difficulty in surrendering to his guidance on the dance floor. My resistance would show in a stiffness of my body, which I would deny if he commented on it.

Lately, I have noticed in myself a greater ability to surrender to the moment. There has been a change in my way of perceiving the usual give-and-take present in a relationship that allows me a deeper appreciation of the details in a shared life. I have been able to trust without fear of losing control, which seems to come inevitably accompanied by a great sense of freedom.

## CHAPTER SIX – FINAL COMMENTS

This heuristic self-inquiry has been an exploration of cultural countertransferences that emerged during a two-month cross-cultural art therapy experience in Peru. Besides expanding my cultural awareness, this study proposed to demonstrate how art therapists could work on their cultural awareness by leaving their comfort zone, and exploring their ‘culturally-charged reactions’ (Coseo, 1997) through creative expression. Overall, it has been my hope that art therapists, as mental health practitioners in their own right, have been sensitized to the reasons why we should care about culture within the therapeutic relationship.

Central to my investigation has been: the concern that art therapy’s assumptions and values might be imposed on individuals from groups considered minority (Beiser, 2003; Hocoy, 2002), characterizing cultural assimilation or malpractice (Hocoy); the belief that *cultural awareness* can avoid such malpractice; and the belief that culture is a *learned* phenomenon (Barnlund, 1998; Bennett, 1998; Hall, 1976, 1998; Singer, 1998; Weinberg, 2003), and, therefore, malleable (Hall, 1976).

Steinberg (1990) states that many who enter the profession of ‘psychological healing’ have already spent some time healing themselves; hence the image of the *wounded healer*. However, since wounds are rarely healed permanently, the scars are a constant reminder of the therapist’s vulnerability, and might be re-opened whenever a client brings into the relationship conscious or unconscious conflicts that are similar to the ones that the therapist has faced. Even though not all feelings between clients and therapists are distorted perceptions of each other – transference or countertransference –



therapists should try to be aware of all their feelings, real or distorted, positive or negative, towards clients in order to preserve the working alliance (Weiner, 1998). The concepts of culturally reinforced (Gelso & Mohr, 2001) and somatic (Ross, 2000) countertransferences were of central relevance to my investigation.

Interested in expanding my own *cultural awareness*, the heuristic self-inquiry research method seemed the most appropriate to my pursuit, for as Craig (as cited in Patton, 2002) reminds us, heuristics is a method that permits one to be deeply in the moment, “immersed in mysteries and miracles, and still be engaged in meaningful research experience” (p. 108). The heuristic method provided me with enough freedom to design the project and choose the tools I judged necessary in the pursuit of what was ‘irresistible’ to me (Kapitan, 1998).

My initial hypothesis was confirmed: The experience of being immersed in a cultural group different than the one in which I feel comfortable helped me to become conscious of internalized and unconscious cultural biases and assumptions.

The experience invalidated my initial assumption that issues of countertransference would occur due to *cultural differences*; it was instead the *perceived similarities* between Peruvian and Brazilian environments that haunted my dreams, stirred up my emotions, and culminated in an encounter with the *Shadow* side of my personality. By discussing my spontaneous creative responses with my peers and supervisors, and by cross-referencing my perceptions with relevant and pertinent literature, I have been able to integrate my learning emotionally and cognitively.

It has been my experience that by focusing on and creatively exploring my over reactions, especially the somatic ones, enough 'psychic energy' (Furth, 1988) was directed to neglected aspects of my personality thus allowing them to surface. The use of creative expression brought equilibrium to my inquiry, making it easier for me to accept and internalize the natural integration of opposing elements of my *Self*.

After exposing and examining some of my vulnerabilities as a human being that crosses borders, I feel better equipped to contain the resistances I might perceive in clients that also have crossed borders, and who might feel caught between 'worlds' and not belonging anywhere.

As for my intention of working as an art therapist with disenfranchised communities in Brazil or around the world, I find in Kapitan (1997) a hopeful guidance that makes me trust that I can reconcile myself with my roots:

Art therapy offers a holding environment where there can be reconciled one's most rejected, violated, and alienated projections. The art therapist is a guide or agent in the process of reconciliation, out of which will be born not merely a better adjusted person but one who has created meaningful and life-affirming forms. (p. 256)

As Hall (1976) argues, "The great gift that the members of the human race have for each other is ... [the] opportunity to achieve awareness of the structure of their *own* system" (p. 39). This investigation has been a gift to me. Supported by colleagues, professors and supervisors, and guided by my tacit knowledge (Polanyi, 1969) and unconscious symbols (Furth, 1988), I have entered the dark cave of my unconscious and found myself face-to-face with my *Shadow*. "He is no hero who never met the dragon, or

who, if he once saw it, declared afterwards that he saw nothing” (Jung, 1955/1997, p. 174). I have walked out of the cave feeling more complete, more trustful, and inevitably freer, for it is the exploration of conflicts that frees one, ‘not the resolution’ (Travis & Callendar, as cited in Kapitan, 1997, p. 259).

### Relevance and Limitations of the Study

In spite of the admitted importance for mental health practitioners, including art therapists, to develop or expand their cultural awareness in clinical and research settings, little has been written on *how* professionals can actually engage in the ‘rigorous and honest self-examination’ of his or her ‘cultural lenses’ (Hocoy, 2002). It is my hope that this project of self-exploration will benefit and inspire professionals, especially art therapists, who wish to practice across cultures, and who are willing to take the path of a journey inward and use arts to examine how their cultural background may influence their professional practice.

Since this is a self-exploratory investigation, generalization is not possible. Further, due to the nature of heuristics, knowing is informed through personal accounts of perception, intuition, and senses (Patton, 2002), which makes verification of results a challenge. The reader relies on the researcher’s accounts of the lived experience, and the researcher relies on words to describe feelings, emotions, and constructs that are often controversial to define.

In agreement with Patton (2002), a particular challenge of this work has been to find a voice, or ‘just the right words’ to describe highly emotional experiences in my

second language. It has also been my editor's concern to keep the essence of my writing throughout the editing process.

### Possible Future Directions

The knowledge I have gained through this self-investigation could be incorporated into a larger study that compared to the lived experience of art therapists using creative expression to explore their reactions to the phenomenon of practicing across borders.

Another direction that seems interesting to me would be to conduct an ethnographic study with the women from the community I visited, seeking to understand their perception of professional women who come from other countries with the purpose of 'helping them.' Yet another direction for working within that same community could be to incorporate aspects of the practice of Social Art Therapy, and together with the community understand if changes are desired, and if so, how the use of arts could be beneficial.

### Creative Synthesis

It is with a certain sadness that I approach this stage of my study. It has been an intense and rich journey that approaches its end. Others will come, I am sure. This one, however, carries with it the freshness of my emergent knowledge as I finish my training in the Creative Arts Therapy program. It also reveals my tentative explanations for complex concepts that are often hard to grasp. It is a story that I have shared with many, and that needs to come to a resting point.

In the final stage of a heuristic inquiry, the researcher is expected to creatively represent the integration of the lived experience, combining intuition, imagination, and personal knowledge of meanings and essences (Moustakas, 1990). The final work may be a poem, a painting, a narrative, or any form of embodiment of the lived experience. It carries the task of telling the ‘story’ that has unveiled as a result of the union of the “deep-unconscious and the waking consciousness” (Sela-Smith, 2002, p. 68), and of the communication between the researcher’s inner and outer realities.

The writing of this paper has been, in many ways, a creative synthesis of my investigation. However, I cannot end this study without sharing a visual piece that I have recently created. Figure 8 is entitled *Lightness of Being* and it was created while I mentally revisited the many moments of laughter, tears, uncertainties, and discoveries that I shared with my art therapy colleagues and with the members of the community of Alto Cayma in Peru.

In the many rings that compose *Lightness of Being*, I see the representation of the many layers of my *Self* that were involved in my self-investigation. In the central golden and orange layers, I sense a great movement of energy that sometimes seems to move in opposite directions in relation to each other, and I speculate that they represent those moments of resistance and intense indwelling that required so much focus to sustain.

The center, which reminds me of an eye, makes me think of those moments of complete surrendering to the experience that allowed me to look inward, further than I had ever looked, and finally grasp new understandings of my experiences as a human being. The intense spot in the middle reminds me of the scars of the wounded-healer

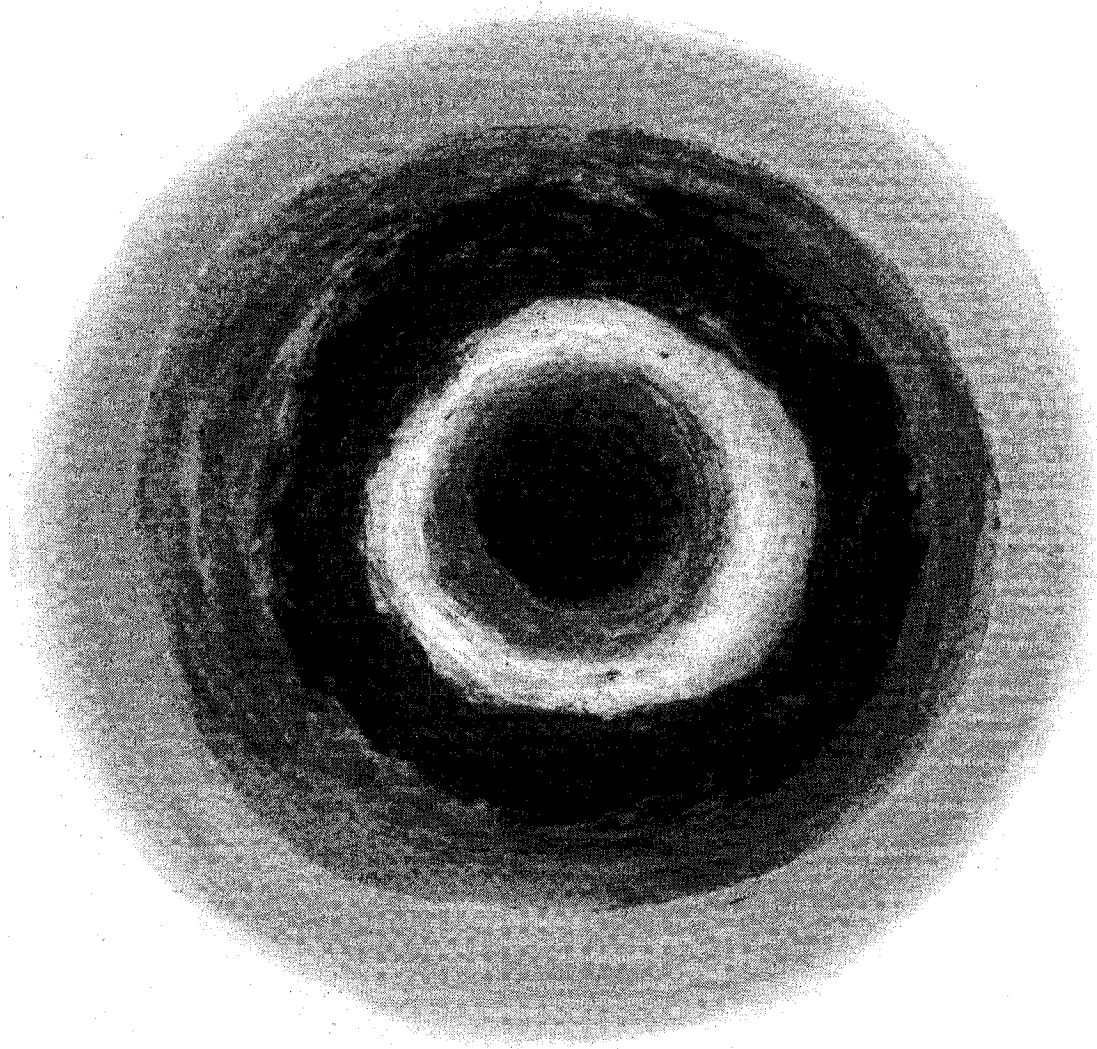


Figure 8 – Lightness of Being

Oil Pastels – 25 x 25cm

mentioned by Steinberg (1990); a reminder of my vulnerabilities that I will gently carry, as I am committed to gently carrying the vulnerabilities of my clients.

Last but not least, the outside ring seems to convey a ‘numinous quality’ (Furth, 1988), a mysterious and holy quality that symbols sometimes bring to our conscious awareness. It feels like it wants to continue expanding and connecting with a bigger reality.

It is with this feeling of expansion and continuing desire to connect with a greater reality that I close this investigation. I have shared with you as much as I could of the pain and the beauty of my journey, and I hope that I have been able to give you at least a glimpse of the transformational process that originated with it.

Appendix 2 - Consent Form

Authorization for photography, audio recording and the use of case material related to art therapy

I, the undersigned \_\_\_\_\_, have read and/or understood the purpose of this study, have had the opportunity to ask questions and I am satisfied with the answers. Therefore, I freely consent and voluntarily agree to participate in this study, and authorize Creusa Brigatti to take any of the material checked below for presentations and/or publications for educational purposes.

	YES	NO
photos of artwork I produced during our art therapy sessions	_____	_____
photos of my personal artwork	_____	_____
photos of artwork that my child's produced during art therapy sessions	_____	_____
audio recordings of our interview	_____	_____
case material (notes from sessions)	_____	_____

I understand that the material will be used for the writing of her research paper, and may also be used in future presentations and publications.

I understand that my identity, or the identity of my child, will be kept confidential, and I understand that I have the right to withdraw my consent at any time.

However, I make the following restriction(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Witness Signature \_\_\_\_\_

Place and Date \_\_\_\_\_



## Appendix 2A - Carta de Consentimiento

### Autorización para fotos, grabación auditiva y uso de materiales de las sesiones de la arte terapia

Yo, suscrito \_\_\_\_\_, he leído y/o he comprendido el propósito de esto proyecto, tuve la oportunidad de hacer preguntas y estoy contento(a) con las respuestas. Por lo tanto, consiento libremente y acuerdo voluntariamente en participar en el proyecto, y autorizo Creusa Brigatti a utilizar cualquier material marcado abajo en presentaciones y/o publicaciones de propósito educacional:

	SÍ	NO
Sacar fotos de los trabajos artísticos que producí durante nuestras sesiones de arte terapia	_____	_____
Sacar fotos de mis otros trabajos artísticos	_____	_____
Sacar fotos de los trabajos artísticos que mí(s) hijo(s) (as) produció (ran) durante las sesiones de arte terapia	_____	_____
Grabar auditivamente nuestra entrevista	_____	_____
Utilizar anotaciones de las sesiones de arte terapia	_____	_____

Comprendo que ella utilizará el(los) material(es) para escribir su proyecto de investigación, y talvez en futuras presentaciones y publicaciones.

Comprendo que mi identidad, o la identidad de mí(s) hijo(s) (as), se quedará siempre confidencial, y comprendo que tengo el derecho de revocar mi consentimiento cuándo quiera, pero antes de la publicación de su proyecto de investigación.

Todavía, tengo las siguiente(s) restricción(es):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Nombre (escriba por favor) \_\_\_\_\_

Signatura \_\_\_\_\_

Signatura del testigo \_\_\_\_\_

## References

- Agell, G., Levick, M. F., Rhyne, J. L., Robbins, A., Rubin, J. A., Ulman, E., et al. (1981). Transference and countertransference in art therapy. *American Journal of Art Therapy, 21*, 3-24.
- Barnlund, D. (1998). Communication in a global village. In M. J. Bennett (Ed.), *Basic concepts of intercultural communication: Selected readings* (pp. 35-51). New York: Intercultural Press.
- Beiser, M. (2003). Why should researchers care about culture? [Electronic version]. *Canadian Journal of Psychiatry, 48*(3), 154-160.
- Bennett, M. J. (1998). Intercultural communication: A current perspective. In M. J. Bennett (Ed.), *Basic concepts of intercultural communication: Selected readings* (pp. 1-34). New York: Intercultural Press.
- Betensky, M. (1995). *What do you see? Phenomenology of therapeutic art expression*. London: Jessica Kingsley.
- Betensky, M. (2001). Phenomenological art therapy. In J. A. Rubin (Ed.), *Approaches to art therapy: Theory and technique* (2<sup>nd</sup> ed) (pp. 121-133). London: Brunner-Routledge.
- Bloomgarden, J., & Netzer, D. (1998). Validating art therapists' tacit knowing: The heuristic experience. *Art Therapy: Journal of the American Art Therapy Association, 15*(1), 51-54.
- Brodsky, A. E., Senuta, K. R., Weiss, C. L. A., Marx, C. M., Loonis, C., Arteaga, S. S., et al. (2004). When one plus one equals three: The role of relationships and context in community research [Electronic version]. *American Journal of Community Psychology, 33*(3/4), June, 229-241.
- Bush, M. E. L. (2004). Race, ethnicity, and whiteness [Electronic version]. *Sage Race Relations Abstracts, 29*(3/4), 5-48.

- Cain, J. (1990). *Le champ psychomatique*. Paris: Presses Universitaires de France.
- Campinha-Bacote. (2002). The process of cultural competence in the delivery of healthcare services: A culturally competent model of care. In *A culturally competent model of care*. Retrieved May 2, 2006, from [http://www.transculturalcare.net/Cultural\\_Competence\\_Model.htm](http://www.transculturalcare.net/Cultural_Competence_Model.htm)
- Chalquist, C. (1997-2004). *A glossary of Jungian terms*. Retrieved May 1, 2006, from <http://www.tearsoflorona.com/jungdefs.html>
- Coseo, A. (1997). Developing cultural awareness for creative arts therapists. *The Arts in Psychotherapy*, 24(2), 145-157.
- Creswell, J. W. (1998). Five qualitative traditions of inquiry. In J. Creswell, *Qualitative inquiry & research design*. Thousand Oaks, CA: Sage.
- Degregori, C. (1998). Harvesting storms: Peasant rondas and the defeat of sendero luminoso in Ayacucho. In S. J. Stern (Ed.), *Shining and other paths* (pp. 128-157). London: Duke University Press.
- Dokter, D. (1998). Being a migrant, working with migrants: Issues of identity and embodiment. In D. Dokter (Ed.), *Arts therapists, refugees and migrants: Reaching across borders* (pp. 145-154). London: Jessica Kingsley.
- Dosamantes-Beaudry, I. (1997). Embodying a cultural identity. *The Arts in Psychotherapy*, 24(2), 129-135.
- Douglas, B. G., & Moustakas, C. (1985). Heuristic inquiry: The internal search to know. *Journal of Humanistic Psychology*, 25(3), Summer 1985, 39-55.
- Druon, M. (1957). *Tistou of the green thumbs*. (Original title: *Tistou les pouces verts*)
- Edwards, M. (2001). Jungian analytic art therapy. In J. A. Rubin (Ed.), *Approaches to art therapy: Theory and technique* (2<sup>nd</sup> ed) (pp. 81-94). London: Brunner-Routledge.

- Ferenczi, S. (1919). *Further contribution to the theory and technique of psychoanalysis*. London: Hogarth Press.
- Ford, N. J., Vieira, E. M., & Villela, W. V. (2003). Beyond stereotypes of male sexuality: Qualitative and quantitative findings from Sao Paulo, Brazil [Electronic version]. *Culture, Health & Sexuality*, 5(1), 53-69.
- Furth, G. M. (1988). *The secret world of drawings: Healing through art*. Boston: Sigo Press.
- Gabbard, G. O. (2001). A contemporary psychoanalytic model of countertransference [Electronic version]. *Psychotherapy in Practice*, 57(8), 983-991.
- Gantt, L. M. (1998). A discussion of art therapy as a science. *Art Therapy: Journal of the American Art Therapy Association*, 15(1), 3-12.
- Gelso, C. J., & Mohr, J. (2001). The working alliance and the transference/countertransference relationship: Their manifestation with racial/ethnic and sexual orientation minority clients and therapists [Electronic version]. *Applied & Preventive Psychology*, 10, 51-68.
- George, J., Greene, B. D., & Blackwell, M. (2005). Three voices on multiculturalism in the art therapy classroom. *Art Therapy: Journal of the American Art Therapy Association*, 22(3), 132-138.
- Gersie, A. (1995). Arts therapies practice in inner-city slums: Beyond the installation of hope [Electronic version]. *The Arts in Psychotherapy*, 22(3), 207-215.
- Goldman, S. (1994). *Intercultural intervention in art therapy*. Unpublished master's thesis, Concordia University, Montreal, Quebec, Canada.
- Golub, D. (2005). Social action art therapy. *Art Therapy: Journal of the American Art Therapy Association*, 22(1), 17-23.

- Grossman, F. G. (1981). Creativity as a means of coping with anxiety. *The Arts in Psychotherapy*, 8, 185-192.
- Hall, E. T. (1976). *Beyond culture*. Garden City, NY: Anchor Press/Doubleday.
- Hall, E. T. (1998). The power of hidden differences. In M. J. Bennett (Ed.), *Basic concepts of intercultural communication: Selected readings* (pp. 53-67). New York: Intercultural Press.
- Henderson, D. A., & Gladding, S. T. (1998). The creative arts in counseling: A multicultural perspective. *The Arts in Psychotherapy*, 25(3), 183-187.
- Herron, W. G. (1995). Development of the ethnic unconscious. *Psychoanalytic Psychology*, 12(4), 521-532.
- Hocoy, D. (2002). Cross-cultural issues in art therapy. *Art Therapy: Journal of the American Art Therapy Association*, 19(4), 141-145.
- Hocoy, D. (2005). Art therapy and social action: A transpersonal framework. *Art Therapy: Journal of the American Art Therapy Association*, 22(1), 7-16.
- Ito, K. L., & Maramba, G. G. (2002). Therapeutic beliefs of Asian American therapists: Views from an ethnic-specific clinic [Electronic version]. *Transcultural Psychiatry*, 39(1), 33-73.
- Jung, C. G. (1964). *Man and his symbols*. New York: Dell Publishing.
- Jung, C. G. (1997). *Jung on active imagination: Key readings selected and introduced by Joan Chodorow*. London: Routledge. (Original works published 1875-1961)
- Junge, M. B. (1998). *Creative realities: The search for meanings*. New York: University Press of America.
- Kail, R. V., & Cavanaugh, J. C. (2000). *Human development: A lifespan view* (2<sup>nd</sup> ed.). Belmont, CA: Wadsworth/Thomson Learning.

- Kalmanowitz, D., & Lloyd, B. (1999). Fragments of art work: Art therapy in the former Yugoslavia [Electronic version]. *The Arts in Psychotherapy*, 26(1), 15-25.
- Kapitan, L. (1997). Making or breaking: Art therapy in the shifting tides of a violent culture. *Art Therapy: Journal of the American Art Therapy Association*, 14(4), 255-260.
- Kapitan, L. (1998). In pursuit of the irresistible: Art therapy research in the hunting tradition. *Art Therapy: Journal of the American Art Therapy Association*, 15(1), 22-28.
- Kapitan, L. (2005). *Art therapy practicum: Cross-cultural; Peru*. Course syllabus and program materials. Milwaukee, WI: Mount Mary College.
- Kasturirangan, A., Krishnan, S., & Riger, S. (2004). The impact of culture and minority status on women's experience of domestic violence. *Trauma, Violence, and Abuse*, 5(4), October, 318-332.
- Kielo, J. B. (1988). *A study of art therapists' countertransference and post session imagery*. Unpublished master's thesis, Concordia University, Montreal, Quebec, Canada.
- Lewis, P. (1997). Multiculturalism and globalism in the arts in psychotherapy. *The Arts in Psychotherapy*, 24(2), 123-127.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury, CA: Sage.
- Linesch, D. (1995). Art therapy research: Learning from experience. *Art Therapy: Journal of the American Art Therapy Association*, 12(4), 261-265.
- Lofgren, D. E. (1981). Art therapy and cultural difference. *American Journal of Art Therapy*, 21, 25-30.
- Loftsdóttir, K. (2002). Never forgetting? Gender and racial-ethnic identity during fieldwork [Electronic version]. *Social Anthropology*, 10(3), 303-317.

- Longman dictionary of contemporary English* (3<sup>rd</sup> ed.). (1995). Great Britain: Clays.
- Lusebrink, V. B. (2004). Art therapy and the brain: An attempt to understand the underlying processes of art expression in therapy. *Art Therapy: Journal of the American Art Therapy Association*, 21(3), 125-135.
- Manheim, A. R. (1998). The relationship between the artistic process and self-actualization. *Art Therapy: Journal of the American Art Therapy Association*, 15(2), 99-106.
- McMahon, S. (1993). *Towards therapeutic understanding through dreams, art and poetry*. Unpublished master's thesis, Concordia University, Montreal, Quebec, Canada.
- McNamee, C. M. (2004). Using both sides of the brain: Experiences that integrate art and talk therapy through scribble drawings. *Art Therapy: Journal of the American Art Therapy Association*, 21(3), 136-142.
- McNiff, S. (1989). *Depth psychology of art*. Springfield, IL: Charles C. Thomas.
- McNiff, S. (1998). Enlarging the vision of art therapy research. *Art Therapy: Journal of the American Art Therapy Association*, 15(2), 86-92.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook*. Thousand Oaks, CA: Sage.
- Minkler, M. (2004). Ethical challenges for the “outside” researcher in community-based participatory research [Electronic version]. *Health Education & Behavior*, 31(6), December, 684-697.
- Moustakas, C. (1961). *Loneliness*. Englewood Cliffs, NJ: Prentice-Hall.
- Moustakas, C. (1990). *Heuristic research: Design, methodology, and applications*. Newbury Park, CA: Sage.

- Nathan, T. (n.d.). *Georges Devereux and clinical ethnopsychiatry* (C. Grandsard, Trans.). Retrieved July 31, 2006, from <http://www.ethnopsychiatrie.net/>
- Neuman, W. L. (1997). Analyzing qualitative data. In *Social research methods: Qualitative and quantitative approaches* (3<sup>rd</sup> ed.) (pp. 418-441). Needham Heights, MA: Allyn & Bacon.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3<sup>rd</sup> ed.). Thousand Oaks, CA: Sage.
- Perez Foster, R. (1998). The clinician's cultural countertransference: The psychodynamics of culturally competent practice [Electronic version]. *Clinical Social Work Journal*, 26(3), Fall, 253-270.
- Polanyi, M. (1969). *Knowing and being* (M. Grene, Ed.). London: Routledge & Kegan Paul.
- Polkinghorne, D. (1982). What makes research humanistic? [Electronic version]. *Journal of Humanistic Psychology*, 22(3), Summer, 47-54.
- Ross, M. (2000). Body talk: Somatic countertransference [Electronic version]. *Psychoanalytic Counselling*, 6(4), November, 451-467.
- Saint- Exupéry, A. (1971). *The little prince*. New York: Harcourt Brace & World.
- Schaverian, J. (1990). Transference as an aspect of art therapy. *Inscape*, September, 10-15.
- Sela-Smith, S. (2002). Heuristic research: A review and critique of Moustakas's method [Electronic version]. *Journal of Humanistic Psychology*, 42(3), Summer, 53-88.
- Singer, M. R. (1998). Culture: A perceptual approach. In M. J. Bennett (Ed.), *Basic concepts of intercultural communication: Selected readings* (pp. 97-109). New York: Intercultural Press.



- Sorti, C. (1999). *Figuring foreigners out: A practical guide*. Yarmouth, Maine: Intercultural Press.
- Spaniol, S. (1998). Towards an ethnographic approach to art therapy research: People with psychiatric disability as collaborators. *Art Therapy: Journal of the American Art Therapy Association*, 15(1), 29-37.
- Steinberg, W. (1990). *Circle of care: Clinical issues in Jungian therapy*. Toronto: Inner City Books.
- Sue, D. W., & Sue, D. (2003). *Counseling the culturally diverse: Theory and practice* (4<sup>th</sup> ed.). New York: John Wiley & Sons.
- Talwar, S., Iyer, J., & Doby-Copeland, C. (2004). The invisible veil: Changing paradigms in the art therapy profession. *Art Therapy: Journal of the American Art Therapy Association*, 21(1), 44-48.
- The American heritage dictionary of the English language* (4<sup>th</sup> ed.). (2000). Retrieved September 5, 2006, from <http://www.bartleby.com/61/0/M0320000.html>
- Tseng, W.-S., & Streltzer, J. (2004). Introduction: Culture and psychiatry. In W.-S. Tseng & J. Streltzer (Eds.), *Cultural competence in clinical psychiatry* (pp. 1-20). Washington, DC: American Psychiatric Publishing.
- Van de Castle, R. L. (1994). *Our dreaming mind*. New York: Ballantine Books.
- Weinberg, H. (2003). The culture of the group and groups from different cultures [Electronic version]. *The Group-Analytic Society*, 36(2), 253-268.
- Weiner, I. B. (1998). *Principles of psychotherapy* (2<sup>nd</sup> ed.). New York: John Wiley & Sons.
- Whitmont, E. C., & Perera, S. B. (1994). *Dreams, a portal to the source*. London: Routledge. (Original work published in 1989)

Wikipedia, the free encyclopedia. (n.d.). *Brazil*. Retrieved August 8, 2006, from <http://en.wikipedia.org/wiki/Brazil>

Wikipedia, the free encyclopedia. (n.d.). *Bullfighting*. Retrieved August 12, 2006, from [http://en.wikipedia.org/wiki/Bullfighting#Styles\\_of\\_bullfighting](http://en.wikipedia.org/wiki/Bullfighting#Styles_of_bullfighting)

Wikipedia, the free encyclopedia. (n.d.). *Shining path*. Retrieved July 19, 2006, from [http://en.wikipedia.org/wiki/Shining\\_Path](http://en.wikipedia.org/wiki/Shining_Path)

Winnicott, D. W. (1992). *Playing and reality*. London: Tavistock/Routledge. (Original work published 1971)

[http://en.wikipedia.org/wiki/Montreal-Mirabel\\_International\\_Airport](http://en.wikipedia.org/wiki/Montreal-Mirabel_International_Airport)

<http://www.ethnopsychiatrie.net/>

<http://www.serving-alto-cayma.info/home.html>

<http://www.thechildren.com/search.asp?l=e&query=transcultural>

[http://www.transculturalcare.net/Cultural\\_Competence\\_Model.htm](http://www.transculturalcare.net/Cultural_Competence_Model.htm)

<http://www.wunderground.com/global/stations/84752.html>