

## CHAPTER 9

# Working therapeutically with generational trauma

*Intercultural practice is like driving an unacquainted car on the opposite side of the road in another country. You are not entirely without skills, but must observe new scenery, note different signs, adjust your orientation and navigate the unusual. The challenge met will cause discomfort, but must be normalized to safely negotiate the unknown and unfamiliar.*

### Introduction

**A**lthough the emphasis of the book is on black lives, it will have relevant application to other racial minorities, and my hope is that it will deepen the knowledge of a reader of any ethnic background and identity persuasion. The tools and concepts in this chapter are offered to practitioners coming from a variety of theoretical modalities and therapeutic backgrounds, and can be made applicable in any setting; it is relevant to one-to-one client work, couple and group settings, and can be utilized in psychodrama, art therapy, milieu therapy and clinical supervision.

### Key therapeutic concepts and tools

#### *Working with generational trauma*

#### How it presents

When activated in **crisis situations** look out for:

- hyperarousal of emotions, that is hypervigilance and hypersensitivity

- fight/flight responses
- pressure of speech and thought
- upset and hurt
- anger and rage
- pre-occupation with the trauma event
- adaptation to the majority group by toning down, editing and filtering out one's authenticity
- fawning by adopting a co-opted (false) persona
- feeling a victim
- isolation and victimization
- feelings of inadequacy
- shame and identity wounding
- excessive ego-justification
- strategizing and choreographing one's behaviour in white presence.

In **chronic situations** look out for:

- defeatist thinking
- defunct and outmoded life scripts
- chronic and archaic shame manifesting in negative and defeatist personal scripts
- ever-present low-level depression
- the constant negative presence of the internal oppressor
- feeling stuck and unproductive
- resignation to life
- hardening of character from repeated violence to the soul
- loss of self-esteem and self-confidence
- loss of belief in self
- psychosomatic symptoms, for example hair loss, loss of weight, weight gain, poor sleep, high blood pressure, loss of libido, impotence.

How to address it

**Phase 1: working with the manifest content**

Facilitate safety through offering the generosity of space for the client to be heard. When generational trauma is triggered by present-day racism, something terribly disruptive occurs intrapsychically and causes

a dislocation – a psychic fracture. This is a destabilizing time for the black person, so a careful space must be created for the granular effects of this kind of mental disturbance to be held without too much therapeutic interruption. The client needs to let out and exhaust their distress (the pain-wound) and consequent hauntings that trouble the soul as occurs in the aftershock of an impact.

In the initial stages of this kind of trauma work, the client tends to talk at you, instead of engaging with you. This is an important stage of the process, enabling the reporting of what has happened to the client to be heard. This stage of the process works best if the practitioner can be an attentive listener and safe container for the distress. A genuinely engaged and curious therapist is one who is interested in hearing the minutiae of the trauma, in the knowledge that this is the *rinsing* of the trauma wound. The reporting stage of the trauma work is crucial to helping the person regain a sense of stabilization after the disruptive nature of the traumatic experience. Placing the trauma in a safe pair of hands is critical when working with racialized pain that has also activated historical trauma wounds.

### **Phase 2: trauma processing**

Enable the client to name the dread. Naming what has actually happened enables the client to stabilize the mind and get hold of what needs to be addressed and healed. Identifying, for example, that what the client is experiencing is a clear case of 'workplace harassment' or 'racial profiling' can provide a steadying therapeutic banister rail for negotiating the trauma experience. Reflecting to the client that it appears that they have become tired of being stuck in the circular pattern of a dirty wash cycle could act as a wakeup call and provide reality orientation. Such an intervention can be centring and grounding for the client, meaning that the earlier phase 1 mode of incessant reporting of events starts to be regulated.

In the naming of the dread process, it may be necessary to offer some psychoeducation, an intervention that presents reality and enlightenment via education. For example, it may be helpful to distinguish how microaggressions in society or microinequities in the workplace can lead to a semi-permanent state of feeling 'haunted' by these *soul-injuries*. Self-regulation as the next step in the process is critical in enabling the client to start to take charge of their emotions and begin to see the reasons for them and the need to reclaim control.

If safety, insight, new awareness and self-regulation are all reasonably established at this stage, ego strength continues to build. The ongoing work may highlight other possible themes such as identity shame, identity wounding and forms of historical enmeshment that could also be part of the trauma dynamic.

### **Phase 3: working with latent content**

At this stage of the trauma work, when ego strength is more fully regained, it may feel safer to address the triggering of past trauma, as it is often the case that present-day trauma activates trans- and intergenerational trauma. The aim of latent content work is to look deeper for a broader understanding of the trauma experience. This will help you develop a greater critical consciousness of how to manage inevitable racialized trauma.

This work involves exploring and asking questions such as *What else has been opened up for you as a result of your experience? You have hinted that your current situation has opened up your parents' suffering of overt racism when they came to this country ... can we talk about that?* The aim of holding and fielding carefully what is triggered and activated from the past is important in interrupting the concertina effect, that is, where the emotional impact from old trauma collapses into and on to the present trauma in an uncontrollable way.

If manifest and latent content are fielded well, the client's ego strength can develop. If stability continues, the client may feel reassured enough to bear working through old pain differently and can return to the present challenges with renewed insight and emotional strength. They may even be able to see their contribution or part played in the current trauma situation. For example, they may come to recognize that they have never made their voice heard for fear of reprisal, or they may have tolerated forms of emotional abuse without creating boundaries, or might have kept their head down for a long time so as not to cause a stir; in doing any or all of this, they may see that they have lost sight of a better reality that was there to be enjoyed. Self-ownership, as opposed to externalizing and projecting, is a major step towards healing and reclaiming control. From this point, trauma processing and resource building will hopefully enable a healthier return to mental and emotional wellbeing.

#### **Phase 4: integration and sublimation**

This is the last and most dynamic stage of generational trauma work. In this phase, the practitioner facilitates the process of integration of the disrupted selves by creating an encouraging and proactive environment for effective restoration, leading to hope and empowerment. The client will be stronger for having straighter lines of narrative about their experiences, instead of split, disjointed and untreated areas where pain resided. It is important to include reminders of the strengths resulting from overcoming trauma. Strength can be experienced from and within vulnerability. Actively encourage the client's sublimation through their engagement in their choice of activities. Sublimation in this context means utilizing the energies that stemmed from the trauma and redirecting them towards some form of creative pursuit or intellectual endeavour, for example writing, poetry, singing, retraining, meaningful activism.

#### *Working with the internal oppressor (Alleyne, 2006)*

Help your client to understand the concept of the internal enemy, which they have created consciously and unconsciously within; they can then develop inner resources to reframe and change its inhibiting impact. The internal oppressor must be distinguished from internalized oppression: it is part of the self, a part of the ego-structure that functions as an inhibitor and interferes with the moving on process in black lives. This is necessary psychoeducative work in generational trauma work.

Start this process by helping the client to identify their internalized scripts and how they were created. Some psychoeducation about what scripts are might be helpful. They can be described as the meaning we give to events that happen to us, a process that usually starts in childhood. Understanding generational and personal scripts that are influenced by what we have internalized from our parents, and those that have been shaped by our societal and cultural experiences, will offer insight and awareness. They may help the client see what might be influencing their thoughts and the patterns in their lives that prevent them from moving on and the actualization process. Deepening an understanding of the internal oppressor can help to reframe, with more positive thoughts and actions, leading to the achievement of full potential and heightened critical consciousness of racialized lived experiences.

### *Recognizing pitfalls of cultural relativism for cross-cultural competence*

Cultural relativism is the idea that a person's belief and practices should be understood based on that person's own culture, and that the norms and values of one culture should not be evaluated against the norms and values of another. For this important reason, it is essential to recognize what are the potential hidden, unsuspected traps, and troublesome areas of difficulty that you might encounter.

Becoming aware of such pitfalls in therapy practice requires an awareness of the rules of cross-cultural engagement. For example, Eurocentric counselling and psychotherapy theories have a goal-orientated focus on (a) independence, (b) self-actualization and (c) personal individuation, and there is a tendency to explain behaviour and psychic phenomena mainly as a function of intrapsychic challenges. The danger of this individual and internal-based focus is that it can exclude and neglect an equally important emphasis on external factors and the collective. For ethnic minorities, what happens to the racial self in the outside world is the reality of their lived experiences. These deserve inclusion – their rightful place in the therapy space. Racism is a real part of clients' lives. Intercultural competency challenges us to create a synthesis between the external and internal, the individual and collective, and to honour the healthy tension between different races and cultures.

### *Reframing Eurocentrism in therapy practice*

It is important to understand Eurocentrism, which is generally defined as a cultural phenomenon that views the cultures and histories of non-Western cultures and societies from a European or western perspective. 'western' and 'non-western' are broad terms used in the context of describing common social norms, belief systems, traditions and so forth, in Europe and the UK and in Africa, Asia and indigenous peoples respectively. Some examples where Eurocentric bias can occur are listed below.

*Table 9.1 Eurocentric bias*

| <b>Western values</b>  | <b>Non-western values</b>   |
|--|---|
| Eurocentric values tend to give primacy to individuals, individualism, uniqueness and autonomy   | Non-Western values tend to give primacy to the collective, orthodoxy and levels of compliance   |
| In the west, the emphasis is on 'me' and 'my' (the goal of individuation)  | Non-western emphasis is more on 'us' and 'our' (collective individuation goals)   |
| There is a striving for self-actualization   | Emphasis is on collective actualisation   |
| Eurocentric values place emphasis on the nuclear family structure  | Non-western values place emphasis on the extended family culture  |
| Eurocentric values place emphasis on non-conformity  | Non-western values place emphasis on conformity   |
| In the west, the emphasis is on freedom  | Non-western emphasis is placed more on security   |
| In the west, the emphasis is on youth  | Non-western emphasis is placed more on maturity   |
| In the west, there is more openness to expressing views and feelings   | In non-western cultures, there is a holding in of views and feelings as a show of respect   |
| In western cultures, there is more of a focus on ideas of creativity   | In non-western cultures, education appears to be more about learning by rote and submitting to teachers, tutors and educators   |
| In western cultures, sarcasm (saying the opposite to what you mean), satire (using biting humour to criticize, ridicule and expose), innuendo (often disparaging, sexually suggestive or toilet humour), banter (jokey conversation) and the understatement (deliberately making something less significant than it is), are staples that particularly define British humour | In non-western cultures, humour seems less aggressive, less at the expense of others, less self-enhancing or deprecating, less self-defeating. Humour is relatively benign and observational, with a tendency to highlight and enhance relationships, as well as lift spirits through adversity |

|   |  |
|---|--|
| Western cultures tend to be more liberal about sex and sexuality                  | Non-western cultures tend to be more conservative; liberal views and behaviour regarding diversity in sexuality are still taboo      |
| In western cultures, elders are frequently being seen as the dying breed          | In non-western cultural, elders still seem to command a particular position and role of influence                                    |
| In the west, communication is more open, direct and nuanced                       | In non-western cultures, communication can be more closed and concrete   |
| In the west, shame seems to be managed by verbal dexterity and clever positioning | In non-western cultures, shame is 'loss of face' and damage to the personal integrity needed to function as part of the social order |

### *Understanding cultural myopia*

Cultural myopia is a form of near-sightedness, grounded in the belief that one's own culture is appropriate and applicable in all situations to all people. This is a narrow and cockeyed view of seeing all of humanity as the same. Cultural myopia can present as arrogance, ignorance and fear. All of this can lead people to say things like 'I don't see your colour, I see you as a human being'. The question is: why not see colour? We notice that someone is a woman, tall, has brown eyes and wears glasses. What is so wrong in seeing that they are black with dark skin? Seeing the world solely through a limited Eurocentric worldview, and nothing existing outside these comfortable parameters, misses the rest of humanity in a clear view perspective. It is therefore important to notice all of what is different in cross-cultural engagement, including whether someone is black. Noticing difference is not a problem nor is it a race offence. Rather, it normalizes race dynamics so that the black person feels seen, acknowledged and embraced.

*Engaging curiosity – an essential tool for working with difference and diversity*

Albert Einstein (Quoteslyfe.com) is quoted as saying 'Curiosity is more important than knowledge'. Curiosity leads us to enquire, ask questions,



create hunger to explore and delight in new discovery. Curiosity is the very basis of education – and therefore an analytical tool. It is daring to engage with intrigue and suggests a sense of security in one's self to live outside prescribed boxes, take risks, and, above all, challenge oneself to investigate the way the world is and the way we live. Curiosity lets us really listen to other people because we are interested or, quite simply, just want to know who they are. Reciprocally, we open ourselves to receiving, sharing and exchanging. Curiosity makes us interested in a broad range of information about the world around us. It guards against indifference, which is one of the hallmarks of racism.

To be curious about what is different racially and culturally is to feel the challenge of approaching the world with a healthy narcissistic vulnerability that is able to deal with the potential threat of fragmentation. Rather than pursue an agenda or be always knowing for the sake of being in control, curiosity challenges us to follow where our questions lead us. Curiosity is about occupying the space of uncertainty, the unknown and the unfamiliar. We do not naturally like being in this space, as it takes us right back to the nakedness of our shame, and the anxiety of our greatest vulnerability, that is our primordial (primitive and unsophisticated) self.

Fighting against the vulnerability of shame is to minimize, and even get rid of, the healthy disturbance that arises in meeting the unknown and unfamiliar. At worst, it is therapeutic incompetence, for the fact that we cannot achieve cross-cultural competence by avoiding discomfort. The well-known idiom, or commonly used phrase, curiosity killed the cat suggests that being curious gets you into trouble. Curiosity effectively applied in this context will only reward the practitioner nine lives for developing stamina and authentic competence in the work.

### *Facilitating forgiveness and a state of grace*

Facilitating movement towards a state of grace, is permitting the deity(ies) within us. Striving for a state of grace involves, first and foremost, the work of tuning out archaic rage and pain and beginning to settle at the casual core of who one is as a human being. Because the greatest challenge to life exists within us and not outside, these six elements serve as a useful reminder of the work to be done in actualizing the presence of grace:

1. Forgiveness, often seen as the forerunner to grace, means releasing the tyranny of the past that robs the present.

2. Acceptance of all of oneself.
3. Permission for your presence to shine in all its luminescence.
4. Actualization of the rightful entitlement to partake at humanity's feeding table.
5. Freedom to enjoy and just be.
6. Transformation leading to fulfilment.

Like grace, which is often biblically aligned, forgiveness may be construed as the biblical process of pardoning or releasing someone from the sins of their bad behaviour or wrongdoing – but therapeutic forgiveness is quite the opposite. It is not about pardoning, absolving or exonerating the other from their behaviour. Forgiveness, in the context of psychotherapy, enables the client or patient to see and understand that they are no longer participating in the wrongdoing of another person. This awareness enables the process of separating from enmeshed and codependent situations. Forgiveness can therefore be used as a tool for change, reframing, letting go or bringing about closure. When our clients arrive at a place of forgiveness, this can heal their psychic wounds, thereby releasing them from the tyranny or chokehold of the past.

### *Principles for building real race conversations*

- **Attunement:** this is reactivity to and full engagement with people generally. In the context of intercultural work, it demands that we shift from our comfort zones to meet the unknown and unfamiliar. Authentic engagement as part of attunement allows the other to have a real sense of being seen and felt.
- Develop the art of being reflective, which is the skill of being able to stand back and examine your own feelings, reactions and motives and how these influence what you do or think in a situation. Reflectivity counters biases, identifies your blind spots and, for those struggling against oppression, strengthens self-awareness, leading to a liberation from the 'burdens' of heritage. Developing reflectivity can be a person's agency for actualizing their full potential.
- Put aside your preconceptions.
- Examine your motivations.
- Embrace the discomfort of not knowing.

- Research and relearn; find out what you don't know. Use Johari's Window as a tool (Luft and Ingham, 1955).
- Acknowledge the advantages of your white privilege.
- Get comfortable with your story. Remember: your story = your background + your life experiences.
- Embrace shame as the source of creativity and learning, for the simple fact that one of the biggest roadblocks to creativity is a feeling of being right. When we think we are absolutely right we stop seeking further information. Being certain puts a halt to curiosity. Healthy shame never allows us to think we know it all and therefore maintains openness to others, the world and all things different.
- Read Eugene Ellis's *The Race Conversation: An essential guide to creating life-changing dialogue* (2021).

### *Flashforwarding: confronting catastrophic thinking*

The flashforward procedure is a specific technique borrowed from EMDR (eye movement desensitization reprocessing (Shapiro, 2001), which I have adapted for basic but effective use in talk therapies. It is a tool that helps walk the client along the corridor of fear when their catastrophic scripts and internal oppressor hold them back from actualizing their full agency and potential. The skill is particularly useful when working with clients who tend to procrastinate and frequently find negative reasons for not moving forward or taking risks. An example of using this skill is taken from my clinical practice with a black female client addressing her imposter syndrome fear.

**Therapist:** 'What do you believe is stopping you from breaking away and setting up your own company?'

**Client:** 'I don't know if I can take the risk.'

**Therapist:** 'What's the fear in taking this risk?'

**Client:** 'I don't know if I believe enough in me.'

**Therapist:** 'What would be your worst-case scenario if you took the risk?'

**Client:** 'Well, failing of course.'

**Therapist:** 'Where would failing leave you – and what would that look like?'

**Client:** ... very long pause ... 'Spooky! I can hear the female ancestors saying, you are capable girl.'

**Therapist:** 'So you are being lifted by the voices of those strong women?'

**Client:** 'Yes, I know I am capable – very capable – and I can't afford to let me – and them down.'

**Therapist:** ... using humour ... 'Say that again Michelle! I missed it the first time! And a little louder please.'

**Client:** ' ... I can do it ... It's what I have been doing FOR white companies for over a decade without recognition. It's time to rise like the phoenix and do it FOR myself ... phew!'

In this illustration, the active and current fear is being processed very closely to address the blocks, reluctance and other catastrophic thoughts. By asking additional questions that focus on the client's fear, the worst-case scenario is 'rinsed' to get the client to her optimal strengths. In this example, I am particularly struck by help coming from the client's ancestry, and it feels important to acknowledge them in the consulting room. The basic tenets of the flash forward procedure in this chosen extract from therapy had paradoxically moved back into the past to help a client move forward with her agency to address and meet her future.

### *Recognize pitfalls and omissions in your practice*

- To strive only to have a theoretical knowledge about how to DO race, difference and cultural diversity work is to strive to be so well educated and equipped to know the right things to say that it may inadvertently educate you away from the immersion and embodiment of fragmentation and rawness of context.
- Those who are particularly engaged in bodywork will be entering the domain where the messiness of the self gets dumped in the therapeutic space. As Van Der Kolk (2015) reminds us, the body keeps the score, so bodywork on its own, or combined with talk therapies, will have the potential for cathecting complex trauma. Be mindful of there being adequate containment and holding for dealing with the charge of complex pain and mental distress.

- Be aware of the aesthetic appeal to de-emphasize the intersectional nature of diversity in intercultural work, where euphemisms are used as sanitized shortcuts to downplay, fuse and avoid what is difficult to name or address. This tempering, and homogenizing effect, perhaps disparagingly referred to as **gentrification** in some quarters, avoids the rawness of context and importance of difference. Here are a few examples of these occurrences that seem to be gaining traction as norms within the field of therapy and organizational diversity work:

**Diversity work** used instead of the specific issue of **race, black people, race conflict** and the **damage of racism**.

**Unconscious bias** used as a comfortable blanket term for talking about **racism**.

**Brown people** used as a lazy catchall instead of specifying, for example, **south Asian, east Indian, Pakistani, Bangladeshi, Malaysian, Mauritian, Arabs, people of mixed heritage**.

**Inequality** used instead of **racial discrimination**.

**Racial prejudice** used instead of **racism**.

All of the above examples run the risk of downplaying the specificity and nature of intercultural or cross-cultural work and the following suggestions are aids to these challenges.

- Use your clinical supervision as a place to address challenges of racism and oppression in your therapeutic practice. Refer to McKenzie-Mavinga (2016) to deepen your understanding in this area through fuller engagement with oppression and meeting similar challenges in clinical supervision. Supervision with a culturally competent supervisor enables a more inclusive quality check on what is omitted and what needs to be embraced with regard to best practice in the areas of race and cultural issues.
- Familiarize yourself with different cultural concepts regarding the make-up of family constellations. Know the complex attachment and relationship patterns in your clients' references to those who may not be blood relatives, but attachment figures who either may have provided a corrective emotional experience or were the replacement figures in a black client's life.
- Recognize that, for many black men, there is a continuous

- struggle with managing the ever-changing challenges for black masculinity and identity in the absence of the foundation provided by a positive, emotionally available and nurturing black father. If you are a white male or black male therapist, be alert to the fact that, in the transference, you may come to mean much more than what is fostered and introjected in the work.
- Pay attention to archaic personal scripts that see blackness as a 'mark of oppression' and, therefore, a pathology. Such notions will go along with a racist ideology that sees black people as psychologically damaged. The 'damaged black' label has the propensity to engender pity from a white therapist who may, in the therapeutic process, see the malady that is white racism, something to place inside the black person to address therapeutically, as opposed to including and addressing external challenges of societal racism, inequality of opportunity, racial discrimination.
  - There is no monolithic black in blackness. This true statement should alert white therapists to the fact that black is on a continuum of identity differences. It is important to allow black clients to describe their own identity and own their own experiences of what black identity means to them.
  - Don't expect people of colour, LGBTQIA+, differently abled, women and all others on the diversity dimension spectrum to be your tour guides through the worlds of the underrepresented. Do the homework under your own steam and internalize the pursuit as personal investment for deepening inter- or cross-cultural professional competence.

*For black therapists: boundary issues in black-on-black dynamics*

Be aware of boundary issues, which include:

- over-sharing
- being overfriendly and overfamiliar in the proper development of the therapeutic relationship
- assuming cultural knowledge and taking things at face value or for granted because of the black-on-black racial proximity
- failing to explore, expand, and allow space for the client's individual voice and racial/cultural experience to be fully explored

- assumptions that both client and counsellor know what is being referred to
- 'like me' biases can lead to collusive therapeutic bonds being fostered. In these overly close and familiar working relationships, favouritism can prevent important challenges being made, 'friendships' (instead of professional relationships) being maintained, and a sense of 'stuckness' not being named
- making the white other the measure of attainment and/or the critical and punitive overseeing, super-ego self
- shifting and slackening of professional and ethical boundaries.

### *For white therapists: understanding white fragility*

Start the process of understanding your white fragility (DiAngelo, 2018) in the context of day-to-day race conversations and working therapeutically with black clients by exploring the following key questions:

- What is your STORY? Remember your story = your background + your life experiences.
- Who taught you that STORY? What values and belief systems were imparted to you about your race, your culture, the black race and black culture.
- Which cultural scripts from your STORY do you hold dear and how have they shaped your racial identity? Focus on your values and beliefs systems.
- How does your STORY influence your thinking and behaviour today?
- What are three things that you do consciously and unconsciously to protect your white comfort when meeting challenges of race and racism?

