

ON THE USE OF LANGUAGE IN PSYCHOTHERAPY WITH EMIGRES FROM THE FORMER SOVIET UNION

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Because most emigres from the former Soviet Union have greater competence in their native tongue than in English, the use of English and switching the language during a therapy session may have a serious impact on the course of that therapy. The use of English can be a valuable means of introducing new concepts that have no equivalents in the Russian language and exploring emotionally charged material. The client's choice of language may also be a clue to difficulties experienced during the adaptation period to the new country.

Despite the fact that emigres from the former Soviet Union since the 1970s are predominantly of Jewish descent and all of them have some features of "Homo Sovieticus" (Goldstein, 1984) — a new "species" conditioned by decades of life in a totalitarian society — they come from a wide variety of ethnic, geographic, and sociocultural backgrounds. Even if they learned English before or during the process of adaptation to this country, it would be an exaggeration to consider all of them bilinguals.

Yet, as I started working with Soviet emigres in 1980, just several months after my arrival in the United States, I realized that treatment was to be conducted in both Russian and English. There were moments when I had to switch from one language to the other, sometimes consciously and at other times instinctively.

This article reviews the complex issues surrounding the use of the mother tongue and the new language in psychotherapy. Switching the language during a session with bilingual emigres may have a serious impact on the course of therapy.

THE ACQUISITION OF LANGUAGE

According to L.R. Marcos' (1976) classification, bilinguals may be subordinate or proficient, compound or coordinate, special-

ized or unspecialized, and compatible or incompatible. Subordinate bilinguals have a different level of competence in the two languages, whereas proficient bilinguals display a native speaker's command of both languages. Most Russian emigres are subordinate bilinguals, with a higher level of competence in their native tongue, which in most cases is Russian; however, for those emigres who came to this country as a young child, a latency-aged child, or even an early adolescent, their native tongue is considered to be English.

Of those emigres who are fluent in English, most are considered to be proficient coordinate bilinguals. That is, they have "an advanced competence in both English and Russian and have learned the second language (English) at a postinfancy period in a separate contextual environment" (Perez Foster, 1992, p. 63).

Lev Vygotsky, a Russian psychologist and linguist, was the first to view the acquisition of a language (i.e., the meaning of words) as a dynamic interpersonal and interactive process between mother and child. For Vygotsky (1984, p. 146), "all higher functions are internalized social relationships." Meaning results from the internalization of interpersonal negotiations "involving what can be agreed upon as shared. And such mutually negotiated meanings...

grow, change, develop, and are struggled over by two people and thus ultimately owned by us" (Perez Foster, 1992, p. 72).

In recent years, neurologic and psycholinguistic evidence has accumulated in support of the language independence phenomenon. That is, proficient bilinguals possibly store portions of their two languages in separate organizational systems in the brain. "These systems maintain parallel encoding mechanisms such that each language code has its own stream of associations between message words and events in the ideational system" (Perez Foster, 1992, p. 63). Might not the cognitive and affective components of the bilingual patients' relations with others be organized, stored, and possibly experienced along linguistic lines as well? Perez Foster (1992) suggests that the second language, learned at a later developmental period through interpersonal relationships with very different objects, may create an obstacle to the re-enactment of early intra- and interpersonal relationships with significant others in therapy. Treatment in the native tongue is seen as providing more access to early developmental issues and evoking the unique interpersonal dialectics of that era.

Yet, once one acknowledges the existence of the language independence phenomenon, determining which is the mother tongue and which is the second language is very problematic for some emigres.

Many emigres come from the non-Russian republics of the former Soviet Union where Russian was the official state language, but was not spoken at home. In some schools teaching was conducted in the national language of the republic while Russian was taught as a second language, and in others the national language was taught as the second language.

In addition, many emigres spoke more than one or two languages at home. For example, many Bukharian Jews from the Asian republics of Uzbekistan and Tadjikistan spoke the Jewish dialect of Persian called "Tadjiki," as well as Russian and

Uzbek or Tadjik, respectively. Depending on where they came from, they consider either "Tadjiki" or Russian to be their mother tongue. For the emigres who lived outside such large cities as Tashkent or Dushanbe, Russian often was the third language, after the Jewish dialect and Uzbek. Jews from Moldavia often spoke Yiddish and Rumanian before they learned Russian.

As I was growing up in Vilnius, Lithuania in the 1950s, at least four languages were spoken in my house: Russian, Yiddish, Lithuanian, and Hebrew, plus Polish that one of my nannies spoke. It is not very easy to determine the mother tongue of a child who grows up speaking Russian to her father, Lithuanian to her mother, Russian and Polish to her nannies, and English to her first English teacher, an Irish Jew from Dublin who could not leave Lithuania after World War II — all this while her parents talked Yiddish and Hebrew between themselves when they wanted to be secretive and did not want their daughter to understand them.

THE MEANING OF LANGUAGE

Language can also be a reflection of class differences. In pre-revolutionary Lithuania, then a part of the Russian Empire, Russian was spoken by the educated upper-class Jews, whereas lower middle-class Jews spoke Yiddish to each other.

In addition, language can acquire other meanings. After World War II, in Vilnius, which used to be a cradle of Jewish culture in the 1920s and 1930s, Russian acquired several contradictory meanings. It was the language of Stalin and of totalitarian oppression, but at the same time it was the language of the nation that had conquered Hitlerism and liberated the ghettos and concentration camps. It was the language of the powerful Soviet empire, and it also united and allowed mutual communication among the many ethnic groups of this multilingual city. I recall myself at the age of 5, and my little Lithuanian playmate both proclaiming that we were Russians. At my

Lithuanian-English school named after the Lithuanian woman poet Salomeja Neris, I was one of the few Jews among the children of the Lithuanian city elite. I remember socializing in Russian with my Russian and Jewish friends, and then going to "Lithuanian" dances where I was one of the two or three Jewish children.

A small nation with a collective ego injured by long years of oppression and danger of assimilation, Lithuanians have been very protective of the purity of their archaic tongue. For me Lithuanian was the language of isolation and sadness experienced by a Jewish child of Holocaust survivors. Maybe it is not incidental then, that my Lithuanian, heard from birth and mastered at the age of 7, has almost merged with English in my linguistic arsenal, whereas the Russian of my early childhood and of my happier student youth in Moscow has stayed much more intact.

LOSS OF THE MOTHER TONGUE

Immigration to a new society brings with it a series of losses — of the familiar culture and surroundings, or material possessions, of friends and families. No less significant is the loss of the mother tongue, which is described below by Julia Mirsky (1991, p. 620), a Russian-Israeli psychologist:

The loss of mother-tongue is accompanied by a deep sense of loss of self-identity and of internal objects. Learning a new language involves an internalization of new object and self-representations, and reactivates the internal process of separation....In immigration the conflict between dependency and autonomy needs is reactivated, and that can be observed more clearly in adolescent immigrants for whom the homeland and the new country stand almost directly for their parents. Immigration becomes possible only when the splitting mechanism is applied, and the regressive pull towards dependency is denied. But, as the conflict remains unresolved, it re-emerges from time to time after immigration, and the love and anger must be

worked through and integrated before a whole and realistic interpretation of both countries (and of the original love objects) can be established.

In my clinical work, I have observed many children who, after from two to three or even ten to fifteen years in this country, would absolutely refuse to speak Russian, and despite their passive ability to understand it, would talk to their parents or therapist only in English. In these cases, a child's rejection of Russian language and culture was symptomatic of family problems and of the difficulties the parents had in mourning their losses during the adaptation period. Consider these two cases:

Lena G., 15 years old, came to the United States at the age of 9. By the age of 15 she spoke only English to her parents, even though she understood them when they addressed her in Russian. She started recalling forgotten Russian words and actually speaking Russian only when her paternal grandmother came to visit for the first time after the "perestroika." Lena's parents had begun their life in the new country by rejecting everything Russian, including the language. Lena's father, a talented mathematician, was bitter and angry with the Soviet regime that would not allow him to succeed in the academic world because of his Jewish origins. Once in this country, not only did the family prefer to speak somewhat primitive English but they also concealed from Lena the fact that her mother was an ethnic Russian, without a drop of Jewish blood. Lena's father, who at first embraced Judaism, became disappointed in it a few years later, and the family gave up attempts to raise Lena in the Jewish tradition. Soon after that, Lena's parents, embittered and angry with each other, mainly because of the father's failure to achieve success in this country and the mother's disappointment in him, separated. Lena, equally distant from her father and his new Russian girlfriend, and from her mother with her new American boyfriend, withdrew even further

from them. She continued to speak English to them and openly fantasized about leaving them, going to college and leaving her emigre background and neighborhood behind. Apparently, her confused and depressed parents, ambivalent about their roots, represented for Lena the "bad" emigre community, whereas the new country, especially the America of private schools, Ivy League colleges, and upper-middle-class friends, was "all good."

Nevertheless, the visit of the paternal grandmother who was one of the early nurturing figures in Lena's life helped the "good" part of Lena's childhood re-emerge — early reminiscences of Grandma's cooking, lullabies sung in Russian, the smell of tangerines in the Moscow subway around New Year's Eve — and with it, the mother (grandmother!) tongue, Russian. It was the first time that Lena was able to utter broken Russian phrases in therapy and to cry because she was concerned about her grandfather's health and her grandparents' ability to immigrate in the future.



Misha L., who came from Leningrad at the age of 6, was referred to me when he was 9. Misha was intensely jealous of his 3-year-old brother Eric, he felt unloved and neglected by his father, and he was very oppositional to his chronically depressed mother. Misha attributed all the negative things about his parents to the fact that they were Russian. He played only with American-born children; his best friend was an Hispanic boy born in the United States. He refused to believe that pictures of beautiful Leningrad architecture were Russian (his mother brought the pictures to a family session) because "there could not be anything beautiful about Russia."

Misha's parents did not encourage him to speak Russian to them. Like him, they projected all the negative feelings toward the anti-Semitic and hostile totalitarian state onto the Russian culture and language that they had internalized, that had become a "bad part

of self," and were to be discarded together with the country of origin. In fact, the parents spoke a barbarian emigre argot, mixing mutilated English and Russian words.

Soviet emigre adolescents often master English quite rapidly. While conducting group psychotherapy with them in Russian in the 1980s, I became aware that despite their mastery of English, they felt isolated from their American-born classmates (Halberstadt & Mandel, 1989). Many of them identified themselves with Caribbean blacks because, unlike American blacks, they were also immigrants; one boy had friends among American-Italian children.

Now, in the 1990s, a new source of isolation has arisen. Not only are my adolescent clients who recently came to this country isolated from their American-born classmates, but they are having difficulty relating to their Russian-born peers who had emigrated before the "perestroika" years. The established Russian adolescents converse in English among themselves and often do not accept the newly arrived immigrants into their circle. Ambivalence of the ex-Soviet citizens to their fellow emigres has been well described by Goldstein (1984), Segal (1983), and others. Linguistic differences are an outward manifestation of these feelings. A favorite pastime for snobbish ex-Muscovites and Leningraders is to mock the provincial style of Russian emigre newspapers or the barbaric slang of the Brighton Beach inhabitants.

Consider the case of Svetlana.

An 18-year-old Jewish girl named Svetlana, who arrived from a small village in Azerbaijan and whom I recently saw at the clinic for new immigrants, became extremely depressed because her "Americanized" cousins whom she had not seen for 12 years and whom she idealized based on her early memories of warm and close relationships, started mocking her naive "peasant" ways, her openness, etc. Svetlana's parents spoke very poor Russian, and her own mother

tongue was the local dialect of Azerbaidjani Sephardic Jews. She learned Russian at school where she was one of the better students. Conducting short-term psychotherapy with her in Russian (even though, strictly speaking, it was not her mother tongue) allowed her to connect to her positive experiences at school and gain back her self-esteem, and her belief that she was "normal." She was able to stop trying to please or understand her cousins, and her ability to function, such as traveling by subway on her own and studying English, has improved.

THE USE OF ENGLISH IN THERAPY

It is impossible to avoid switching languages or at least using some English words in psychotherapy with Russian adolescents and adults who are proficient in English and who have been in this country for some time. Sometimes English is the language of the emigre's choice.

Studies comparing interviews of subordinate bilinguals in both their first and second languages reveal that in their second language clients repeatedly were found to be significantly more withdrawn. Some authors suggest that the language barrier provides a kind of "protective detachment" enabling the client to circumvent anxiety caused by the superego. Therefore, the bilingual patient could reveal material in the second language that would be too emotionally charged in the first language. For this reason, a bilingual, culturally sensitive therapist could use language switching with a bilingual client to enhance the therapeutic process.

In my work with Soviet emigre clients who are proficient in English, I have for many years used English to explain new concepts (i.e. privacy) that have no equivalents in the Russian language and that had not been part of the clients' past emotional reality, as well as to introduce new ways of communication and behavior.

For example, in marital and family therapy I use English in these situations:

- *To talk about sexual issues:* For this subject in Russian there is no vocabulary that would not sound either overly scientific or obscene.
- *To provide psychoeducational sessions:* It made sense to introduce American concepts of child rearing, to talk about cultural differences in approaches to disciplining and reprimanding, and to raise issues of child abuse, in English.
- *To provide marital therapy with mixed Russian-American couples:* English is used to discuss different cultural backgrounds and hence different sets of expectations of a marriage and a marital partner.

The choice of language or switching to the other language by a bilingual client can be interpreted as resistance, a way to avoid anxiety associated with unconscious conflicts, or to avoid pain involved in mourning the losses that have not yet been mourned. Language switching can take place in sessions of a bilingual therapist with a bilingual client spontaneously or consciously and can be initiated by either party. The first bilingual Russian client described in psychoanalytic literature — Freud's (1959) memorable Wolf Man — apparently, had no alternative but to speak German. We can only speculate what would have happened if Freud could speak Russian!

Therapy with bilingual clients has been reported on in the literature. Buxbaum (1949) described a German-English bilingual patient who had a fear of participating in psychoanalysis because of the disappointment she had experienced when she had lost a German lover. RoseMarie Perez Foster (1992) worked with a Chilean dancer who chose to speak English to her therapist. In English, which was her second language she felt strong, brave, and independent. In Spanish she was her mother's frightened, dependent child. Spontaneous introduction of her native tongue by the therapist helped enact a transference that might not have

readily taken place if the treatment had proceeded solely in English; it stimulated the intrapsychic material linked to separation issues.

The following case illustrates a similar use of the two languages that had a positive impact on therapy.

A few months ago, an adult proficient bilingual client — Marina A., who came to the United States 13 years ago — was referred to me by an American-born therapist who considered me an expert on adaptation issues and felt that Marina's problems had to do with immigration. Marina speaks English fluently; at our first meeting, when asked which language she would rather use during the session, she immediately chose English. At the very first session it became clear that Marina, who had been separated from her husband and moved in with her parents, was having a difficult time dealing with her mother, who was extremely controlling and intrusive, although she was at the same time very warm and loving "in the Russian way."

To Marina, English clearly represented a more mature, functional part of her ego. She worked at a bank in a managerial position, made a good living, and was liked and respected by her colleagues. At home, where she spoke Russian, she was treated like an adolescent; her mother would reprimand her in front of her 5-year-old son, making her feel inadequate and manipulated both by her parents and by her son. Marina's relationships with her Russian ex-husband and American-born boyfriend were marked by distrust and disappointment.

In the course of therapy conducted in English, we discussed various issues. Only after the therapeutic alliance was formed did I ask Marina about her feelings toward fellow immigrants. She told me about her ambivalence and distance she felt toward new emigres whom she perceived as manipulative and aggressive. I was therefore surprised to learn that she was going to spend a vacation with her son at a Russian resort; in her words, because it was cheap, and there were some planned activities for children. After

Marina returned, she was amazed how enjoyable the vacation turned out to be. She met a woman from her hometown and became friendly with her, she liked the food, she enjoyed watching her son playing with new friends, and she even met a Russian man who seemed attractive to her. As we proceeded with the therapy in English, first I and then Marina started introducing Russian words; for instance, to describe Russian foods. Among other things, we discussed Marina's feelings of love, admiration, and some jealousy toward her bright and independent younger sister who had successfully separated from their mother and who lived on the West Coast with an American boyfriend. In the beginning of the treatment, "Russian topics" seemed to provoke a lot of anxiety in Marina, even though the sessions were conducted in English. Eventually, some Russian words and sentences helped her connect with the love and anger she felt toward her dominating mother and with the sense of rivalry with the "perfect" younger sister. Recently Marina realized she needed a home of her own and started making plans to move out with her son.

In Marina's case even the introduction of a few Russian words seemed to be helpful in enacting transference, enabling her to move on in dealing with separation-individuation issues. In another case, switching from the mother tongue to English with a proficient bilingual client seemed to have an equally positive effect in therapy for different reasons.

One of my junior female colleagues told me about a client who was quite bright and whose English was good for a new immigrant. He was an accomplished mathematician; in Russia he functioned well as a professional, but his interpersonal skills were extremely limited. The client who was going through a bad depression and tended to use rationalization, intellectualization, denial, and displacement as his primary defenses, developed a sexual transference onto the female worker. He started bringing in obscene

letters to resettlement workers written as humorous stories and told obscene jokes to the worker in question. The obscenities were on the level of a latency-aged child. Apparently he was trying to flirt with her in an infantile and primitive manner. The worker did not know how to deal with his regressive behavior, and she was afraid of directly confronting him because of his disturbed relationships with his mother and grandmother. She feared that such a confrontation might appear to him as an extreme rejection. She was protective of the client because of his emotional fragility, yet she felt more and more uncomfortable with his sexual innuendos. I suggested they should have a session in English. The client, eager to have a chance to practice English, happily agreed. The worker was able to talk to him about his acting-out behavior in a way that was less threatening to him than it would have been in the native language. In this case English apparently had a protective effect of a shield that helped the client regain his impulse control and stop his acting out.

CONCLUSION

The conscious use of language with bilingual Soviet emigres is an important factor in the success of therapy. Switching from English to Russian can be a valuable way to achieve therapeutic goals. This article is only the first step in an analysis of the very complex issue of the use of language in therapy.

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