

## *Dialogue with Gohar Homayounpour*

by Vanna Berlincioni

Gohar Homayounpour's extremely interesting contribution passionately outlines her time as a psychoanalyst in Iran, a complex and far from easy country that a western observer, like me, has scant knowledge of. It is surprising that in Iran there is currently a need for psychoanalysis, a "thirst" for it, to use the author's words. This is suggestive of an absolute, fundamental need of a very troubled population afflicted by socio-political disruption. In an interview published in *Psiche* (2008), the author indicated this need emerges in diverse social settings. Psychoanalysis has gained enormous popularity and people have come to have great expectations of it, to such an extent that demand far outstretches supply (take note unemployed Italian psychologists!) It would be excessive to define these expectations as messianic or hopes for redemption, but it does seem, to a certain extent, that psychoanalysis opens the door to heaven. However, psychoanalysis in Iran looks like a therapy fraught with issues that go well beyond the realm of subjectivity western culture has identified and placed in opposition to social reality. Through clinical scenes from her own experience, the author enables us to explore this opposition, helping us to understand it, examine it critically and even put it into perspective to some degree.

Her work is rich in elements of interest for us. For starters, we should note that Dr. Homayounpour was trained as a psychoanalyst in the U.S. and lived abroad for roughly two decades. She only returned to Tehran a few years ago and her work clearly shows it was a far greater cultural shock to go back than it had been to initially come into contact with the west. This is the origin of the difficulties and paradoxes she is faced with when practising in the Islamic Republic of Iran, especially since she is a woman and cannot be recognised as a professional figure schooled in scientific knowledge that, to compound matters, came from the west. It is impossible to compare the uphill battles faced by Gohar Homayounpour as she struggles to work in Iran, with the issues Italian women have to deal with in 2012. One need merely think that, here, 70% of physicians and 80% of psychologists are female, while in the worlds of psychiatry and psychoanalysis, women also occupy the lion's share of positions. In Italy, if a person seeks counselling, he or she probably expects to deal with a woman. While this might have created problems in the past, healthcare is now a seemingly female-dominated industry. As Homayounpour makes clear, in Islamic countries

this still creates problems. In Iran, asking a man to lie on a couch could be construed as a sexual advance or be understood as forcing him into a position of submission, an act that would be hard to accept or even downright rude (p. 92). Thus, it is an aspect needing careful analysis.

It was necessary to make exceptions to certain principles enshrined in how we practise, for both training and actual clinical practice. For example, a couch might be culturally unacceptable in Iran, just like it can be too obvious in our practice. In Islamic countries, analysts who free women of their "interior veil" are seen as "an enemy, a rival that is influenced by western culture to destroy Islamic values" (Gehad Mazarweh, 2008, p.79). However, when a Palestinian psychoanalyst recounts difficulties in treating Muslim women because of the pressure put on them by parents or perhaps a husband threatening divorce, we can find elements in common with practising in Italy, albeit in milder or more hidden ways.

In such cases, it becomes necessary to modify the technique adopted. For instance, face-to-face would mean Muslim women do not have to experience of the humiliation of lying on the couch, thus accepting their subordination to man. Even in Italy, though, the couch is not something that can be forced on patients and it is quite possible to manage without it. Entrenching a position either for face-to-face or the couch is a weakness, even in our culture.

"However, it still remains to be understood whether, as Mazarweh says, psychoanalysis as a whole is fit for Islamic culture, or whether new, different forms of therapy will come to the fore that will potentially only pick those areas of psychoanalysis deemed appropriate" (p. 79), in order to avoid "the intellectual colonialism" of educators from other cultures (Mazarweh, 2008). It would be interesting to hear Gohar Homayounpour's view on this.

### **Orientalism/Westernism**

First, let me say a couple of words on Orientalism. In many ways, the west has produced the Orientalism found across the centuries in different forms in European culture. Such exoticism represented - and still represents - the idealizing form of the negativity generally felt for a foreigner or stranger. Yet, at the same time, Said argues it is a tool to force Eastern cultures into the cage of stereotyped formulas. Likewise, it would also be useful to see the forms of westernism created in the East - a process in which psychoanalysis, with the expectations it raises, might not be an entirely positive factor. Before the Italian or western psychoanalyst became a blurry figure in the babel of psychology-psychological therapy, he or she was, until quite recently, an ambivalent figure. Psychoanalysts were the champions of personal freedom that, they said, could help self-

accomplishment but, at the same time, brought out disruptive inferior forces. The author uses the French *inquiétante étrangeté* to translate the Freudian concept of *unheimlich*, thus maintaining the notion of extraneousness in the German original, an aspect lost in the Italian (*perturbante*) and the English (uncanny) translations.

### **Fear of the stranger**

We know that unacceptable personal traits - rage, hate, destructiveness - can be transferred onto strangers.

Fear of diversity and confrontation can easily turn into fear of the stranger. We might ask ourselves "*what plague do migrants bring us?*" What is it that is so troubling and unacceptable in the meeting between foreigners and us, westerners? Do we seek to avoid contact with the world of poverty, pain, hunger, persecution and torture they are often fleeing from? Perhaps we feel guilty for all the superfluous things we have while others have virtually nothing. Do we feel threatened by the possible envy of a stranger or do we fear we may lose our supremacy? Or is it rather because they show us a different enjoyment of life that we have lost or forgotten about? (Mariotti, 2011) Or is it something, like the author says, that is alluded to by the chador and around which there is lots of conflict among both westerners and Islamic immigrants? Perhaps we are ashamed of our colonial past that still has consequences today, especially as we seek to attain a sort of new virginity, forgetting how we were poor migrants that longed for the wealth we were denied? "We are afraid of what we were a few decades ago" (Aime, 2009). After all, whether you reject or accept it, we end up creating this "other", this "difference". We need the stranger and yet, at the same time, we deny him or her. As Baumann said, all societies produce foreigners and each one has its own concept. After all, the production of the other, the enemy, as Homayounpour states referring to Volkan, is key to feeling good and creating a cohesion inside the society one belongs to, here as well as in African societies. Indeed, the anthropologist M. Aime (2009) argues this is precisely the function of witchcraft. He quotes from a German poster from that 1990s that I personally saw on the streets of Italy: "Your Christ is Jewish, your car is Japanese, your pizza is Italian, your democracy is Greek, your coffee is Brazilian, your holidays are Turkish, your numbers are Arabic, your alphabet is Latin - only your neighbour is a stranger". The strangers are in us, which is why Homayounpour says we feel the need to deny them. The topic of otherness is so complex that we must address it. The fact is, as T. Nathan said, meeting the other is always a traumatic experience, and for Sartre, "hell is other people". Like Severino, we could stress the eternally problematic nature of the "other", which is always a "mystery", whilst we "navigate above hefty layers of presumptions and bias" (p. 36).

## **Internal/External reality**

The relationship between internal and external reality is another important aspect addressed by Homayounpour. This is not about questioning the fundamental rule that we should value the patient's internal world and the "instruction" that we should leave aside judging the reality of what the patient tells us, focusing solely on the imaginative and linguistic components. The concept of psychic reality, which comes from the theory of seduction as a traumatic event of material reality, enables us to focus our attention on the desires and the unconscious fantasies that inner life teems with. In 1915, Freud wrote, "the patient somehow is really always right" because his or her symptoms are based on "psychic reality". The innovative element of psychoanalysis was to give inner reality value in the material world and treat it as reality, although "psychic reality is a special form of existence which must not be confounded with material reality" (Freud, 1919). Thus we shall not consider what the patient carries with him as reality/truth - as material reality, as the truth - because we do not know whether it is or not. By the same token, when looking at the internal reality of our patient and our own, we cannot deny we both have a material/external reality (Kishner, 1993). The debate between narrative and historical truth (Spence, 1982), between what is true and what is the patient's inner creation, has long been a central issue for psychoanalysis. On the other hand, placing emphasis on the ghost should not lead us to rule out material reality, but simply to underline that the patient's reality is strictly connected to his or her needs and desires.

As far as I am aware, Freud himself never dwarfed the value of factual reality derived from the real world the patient inhabits. Freud preferred to stress the importance for the analyst not to lose sight of the awareness that "life's needs" would come to the fore eventually. Analysis is useful to integrate one's own internal reality with the material dimension of the relationship with the analyst and the world away from analysis. The link between psychic and material reality is transference, a phenomenon with internal roots that is tied to current, historical and future reality. The setting enables what happens here and now (*hic et nunc*) and the repetition of the past to coexist and be understood so as to open up the person to a more beneficial relationship.

Therefore, in the relationship between analyst and patient we face "multiple levels of reality" (Modell 1990): material reality (the concrete components of the analytical pair), the reality of the relationship between analyst/patient, the psychic reality of the two members of the couple, transference/counter-transference, the setting created, and the reality of the patient and the analyst outside the office. All this produces different levels of listening, communication and involvement. It must never be forgotten that reality is always filtered by the patient's life experience, an element

that rightly causes any judgement to be delayed. The analyst's task becomes to listen and accept the experience, emotions, fear and desire the patients recount. Of course, while ghosts related to childhood areas can influence an actual event, so to do adult areas seek to express and talk about themselves, testing our capacity to tolerate the "other" and "others" in addition to the analytical pair and transference. Moreover, just as external reality exists for the patient, the same can be said for the analyst, who focuses on maintaining a neutral, anonymous and non-interfering approach, especially for those elements that might involve him or her directly. Therefore, in the same way as we help a patient not to deny his or her internal reality, denial of the external reality is a pathological mechanism that we should avoid at all times. It is up to us, via an open and flexible attitude, to modulate integration and "dose" the use of internal and external information. This is possible if we are guided by a conscious perception of counter-transference in the way we receive and process a patient's interpretations (Berlincioni et al., 1997, p. 226-235). Listening to such polymorphism during analysis by both the analyst and the patient cannot really happen if bombs are going off or bullets are piercing the air. In such cases, sessions become the setting in which the patient and analyst seek to create conditions that make analysis possible - and this is not always easy.

Gohar Homayounpour's clinical discourse reaches a conclusion that is of great interest to us not only to there, but also to here and to us. The unconscious is not only within us, but it is also the exterior; it identifies with a social reality that overwhelms individuality and cannot be controlled. Psychoanalysis shows the need to learn from experience that situations of apparent calm in our society today might lead us to forget.

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