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Guiding dilemmas and principles informing psychotherapeutic work with African refugees in South Africa

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A Research Report submitted to the School of Humanities and Community Development, University of the Witwatersrand, Johannesburg, in partial fulfillment of the requirements of the Degree of Master of Arts (Clinical Psychology).

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Abstract

Therapists seeing refugee populations often struggle with the traditional boundaries of psychotherapy and conventional wisdom's about therapeutic goals and practice. The social, political and cultural context of the therapeutic work throws up dilemmas and constraints that need to be better understood in working with these marginalized clients, particularly those in uncontaining environments such as South Africa. Although many refugees experience serious mental health problems and adjustment difficulties, the context in which treatment is offered impacts on the type of psychotherapeutic intervention and therapist stance that is optimal or possible. This study discusses presenting strengths, dilemmas and possible guiding therapeutic principles that arose from in-depth semi-structured interviews with 8 interviewees (4 psychotherapists and 4 refugee clients) concerning their experiences of conducting and being in medium term psychotherapy, looking at similarities and differences in observations. In accordance with the literature, this study found that the main descriptions of psychological distress discussed by the refugee clients included those caused by past trauma and those that were a response to current experiences. The prevalence of these symptoms stresses the importance of psychological intervention. The strengths of psychotherapy noted by refugee clients included: the preparation for psychotherapy through psycho-social workshops, attaining of both emotional and general support, the psych-social approach used by many of the therapists and the importance of foundational elements of psychotherapy, such as the relationship. This research project found that experiencing a containing therapeutic space was possible due to what refugees coined 'the professionalism of the therapists'. Therapists raised such issues such as having to step out of the conventional therapist role, having to deal with the impact of the horror stories described by refugees, struggles to identify appropriate therapeutic approaches, difficulties in assisting refugees to establish sustainable support networks and not meeting refugees' expectations that they will be 'fully healed' through therapy. Possible guiding therapeutic principles, such as working within the supportive framework of a two phased integrative framework, are also discussed. The study found that ideally speaking, therapists and refugee clients are more supported if therapy is offered as part of a multi-dimensional and multidisciplinary approach.

Declaration

I declare that this research report is my own unaided work, and that I have given full acknowledgement to the sources that I have used. It is being submitted for the Degree of Masters of Arts (Clinical psychology) at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at any other University.

_____

Geertje-Kieke Grootenhuis

August 2007

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