

A Foreign Language: Voice for the Forbidden Thought

Harriet I. Basseches, Ph.D.
Washington, D.C.

ABSTRACT

The issue of people being analyzed in a language other than their native language has received less attention in the literature than the frequency of occurrence might merit. This is a report of one case of a young Asian woman, who came to the United States at college age, remaining for some years. She sought treatment conducted in English with an exclusively English-speaking analyst. The discussion focuses on linguistic issues and mode of communication. The patient's facility in English was so perfectly rendered that it was only when she misused a subtle idiom was it detectable that her fluency was not complete. In the foreign language (English), she could be active, outspoken and sexually bold – more like the men in her home culture. Nevertheless, despite her sexual and professional adventurousness in a foreign land and language, her sexual arousal and true inclinations toward intimate connection remained locked in her native language. Vignettes from other multilingual treatments add to the discussion, as well as the report of an illuminating situation of a deaf person whose early language acquisition was achieved in a hearing family, and then was transplanted from her native culture to the United States where she first learned sign language that connected her to the "culture" of the deaf community, while she had to acquire understanding of English culture and language. These examples underscore the extent to which the task of understanding the object relations and conflicts of our patients is made even more challenging when these matters are intertwined with our sometimes limited ability to resonate with the cultural and linguistic nuances of our patients whose native language is not our own.

The issue of people being analyzed in a language other than their native language has been surprisingly neglected. In the year 2006 it is doubly surprising. This report of such a case occurred many years ago but offered a phenomenon of such interest that it has continued to intrigue me. I found myself wanting to explore it further to see if I could understand more about it. I treated a woman from a different culture from my own. The patient used my language, English, as the mode for communication. This appeared as

no hardship for her because she was fluent in English, and I did not speak her Asian language.

What I discovered was that she was able by her own account to say in English the most explicit and anatomically correct statements to do with sexual organs and sex; she was also able to report a dream with overt sexual meaning, and to speak in general with a frankness and directness that she claimed was completely alien to speech and modes of communication in her native language.

I had seen and do see many people from other cultures in treatment even though I, unfortunately, speak only English fluently. On reflection, that may not be as surprising as it might at first appear, since I live in Washington, D.C., a community that is an international center, where many organizations and academic settings draw from a global pool of participants. I soon realized, however, that although language, and even more often, cultural issues, emerged in various of these other therapies, none revealed the same phenomenon in such bold relief. With regard to language facility, that first young woman would be labeled as a polyglot multi linguist in that she learned languages other than her native language later in life. Others, who learned more than one language simultaneously as a young child in contrast to a polyglot, are simply called bilingual or multilingual.

There are many interesting observations to be made about multiple languages and cross cultural psychoanalytic therapies. This paper will cover the following set of questions: First) What understanding may we derive from that early case about meanings and effects of multiple language facility on therapy? Second) What are some of the meanings and effects from therapies with other multilingual persons that may or may not resonate with this first case? Third) In what ways was treatment with multilingual patients distinguishable in terms of such factors as content,

process, transference and countertransference from a therapy in which both partners, analyst and patient, are fluent in the same language or languages? This latter question raises another important consideration, what does this reveal about patient-analyst match?

Literature Review

A literature search revealed a paucity of the phenomenon that I had discovered. A few papers addressed cross cultural issues and psychoanalysis (Basch-Kahre, 1984; Devereux, 1963; Jackson, 1968; also, Stoller & Herdt, 1982). Of those of a cross cultural nature, Basch-Kahre (1984) was the only one to speak directly about language (the others offering interesting material relevant to more general cultural factors not to be addressed here today). Basch-Kahre (1984) reported transference and countertransference difficulties in working with a person from another culture which she described as “a mutual feeling of estrangement” (p. 62) afflicting both analyst and analysand; with somewhat of a leap, she conceptualized this as a regressive experience of “stranger anxiety” reminiscent of the 8- to 9-month old. Basch-Kahre also labeled the spoken language of the psychoanalysis “mother tongue” to the analyst but not to the analysand, for whom it was “alien.” Basch-Kahre felt that the language in which the analysis was conducted cut off the analysand from the naturally occurring emotionally colored sensorimotor experiences encoded in his childhood language. Further, Basch-Kahre suggested that this linguistic alienation, no matter how well the analysand may have learned the adopted language of the analyst, removed the patient not only from memories but symbolization. The resulting linguistic communication was called in the language of the psychoanalysis “operational” i.e., logical, secondary process thinking devoid of sensorimotor meaning and symbols. This problem could only be overcome by the analyst’s attentiveness and mastery over her own alienated feeling through self analysis and interpretation for the analysand. Interestingly, Basch-Kahre’s use of the term, operational, resonates

with Joyce McDougall's (1985) moving discussion of patients who do not have words for their feelings and psychic images creating a block in their ability to communicate in analysis. The evocativeness of Basche-Kahre's point of view seems worth noting, yet in identifying the initial problem as an example of stranger anxiety and the resulting consequences conceptualized in cognitive terms, she bypasses explicit reference to unconscious conflict as playing a key role.

The most exhaustive text to explore a broad range of topics connected with multilingual issues and psychoanalysis is the book, *The Babel of the Unconscious* (1993, Amati-Mehler, et al.). Their review of the literature highlights a selection of important writings, including the Ferenczi paper to be discussed shortly, but seems to have bypassed the cross cultural papers mentioned earlier. In contrast to Basche-Kahre's non-conflict orientation, these authors cite examples of polyglot analysands who used the later "foreign" language defensively. They reported that the newer language provided a way for the analysand to stay away from conflictual material encoded or carried in the language of the mother tongue. At the same time as the authors mention examples of the defensive use of the foreign language, they also stress that the new language can in some instances contribute an adaptive pathway for development, sometimes resolving and sometimes by-passing early conflicts.

In recognizing repeated examples of splitting along linguistic lines, the authors discuss different conceptualizations and uses of the term, splitting, most notably those of Freud, Bion, Klein, and Winnicott (Amati-Mehler, et al., pp. 251-264). Their effort was to de-pathologize the inevitable splitting that they found demonstrable in multilingual patients, no matter what the level of personality organization. They wanted to focus rather on the idea of undoing splits and creating integration, often observed in therapies. Acknowledging that some writers consider "the very condition of multilingualism [if not the] cause, albeit potential, of a split," Amati-

Mehler, et al. “believe that the splitting processes lean on and in a certain way exploit the different linguistic registers as a means for organizing and expressing themselves.” (p. 264)

The Babel of the Unconscious book is encyclopedic. Sandor Ferenczi’s paper, however, entitled “On Obscene Words,” (1911) seemed especially relevant to my case. Ferenczi discussed the motoric and hallucinatory quality of words for the young child learning language. Quoting Freud, he explained, “Children treat words as objects” (p. 140). “. . . at a certain stage of development, this concreteness, and with it probably a strong tendency to regression, applies still to all words.” (p. 140) Ferenczi demonstrated that an inhibition occurs during development from infancy through latency years, brought about in connection with “the Oedipus-complex,” that precludes ease of speaking obscene words. While perhaps not forgotten entirely, these thoughts are carried in the child's mind like a “foreign body” (p. 145), undisturbed by ongoing language development toward abstraction. Such words and images, when they reemerge at puberty, have taken on a shamefulness (replacing the earlier pleasurable affects). Along with the shame, however, Ferenczi suggested: “When uttering an obscene word one has the feeling that it is almost equivalent to a sexual aggression”. . . , [and give] “the definite feeling of initiating an act.” (p. 141) He pointed out that “delicate allusions to sexual processes, and scientific or foreign designations for them, do not have this effect, or at least not to the same extent as the words taken from the original, popular, erotic vocabulary of one’s mother tongue” (p. 137), the language of early childhood.

In this connection, *The Babel of the Unconscious* cited an article by E. Krapf written in 1935. Krapf described “a patient who used English in order to keep the relationship on a purely intellectual level, while he had a great fear of talking to . . . [the analyst] . . . about sex in his own mother tongue.” (Amati-Mehler, et al., p. 50)

Buxbaum (1949) reported work with polyglot patients who expressed their conflicts by controlling which language they used in their analytic work. Buxbaum spoke both languages. For two of the patients, the second language was used as a mechanism of repression that also “saved them from having to resort to long periods of complete silence and was therefore valuable in their treatment.” (p. 286) Buxbaum noted that “verbalizing experiences in the language in which they occurred makes them become real; speaking of them in any other language renders them unreal” [which emphasizes the magic quality speech can have]. (p. 286)

The highlighted ideas stress the extent to which individuals in general, and those with multiple language possibilities in particular, may inhibit or even silence their speech. Giving an example of nonverbal communication as a solution to that which may not be said, Malawista (2000) describes a case in which nonverbal body movement in the form of a conversion symptom, became an important vehicle toward understanding of work between a polyglot patient and a monolingual analyst.

When I presented an earlier version of this paper, an attendee from the audience who was deaf and from another culture volunteered ideas that expanded consideration of the role played by multiple languages in a person's psychic economy. She explained with the help of a remarkable interpreter that she “spoke” through sign language with great feeling about the disjointedness and complications of her experience. She contrasted her early language learning in a family of hearing parents in that other culture with her more recent learning of sign language since living in the United States. The sign language newly connected her with the “culture” of the deaf world. She seemed to feel that the two “worlds” were not easily integrated, reminding us again to be in tune to inevitable linguistic splits and cultural adjustments.

The Case of Ms. A.

A petite, Asian woman, exquisitely dressed, and very feminine but with a firm handshake as strong as a burly man, greeted me in my office. Her English showed no trace of accent. She sought treatment because of an upsetting end to a relationship. I soon learned of a highly accomplished young professional whose private life was a mercurial mosaic of brief, passionate liaisons with American men. There was a sense of high drama, the pain she experienced quickly masked and, as it turned out, soon bundled up into a flight into health in the form of work. Less than a month into the treatment, apparently more comfortable emotionally, she suddenly informed me that she was called away for three weeks for work. We met only twice more after that interruption, when she explained that she was doing well and had to leave the area in connection with her professional responsibilities. I did not see her for another year and a half when, with some surprise, I heard from her of her interest in returning to therapy. She came back for two years of twice-weekly psychotherapy, with the idea that she would allow herself to stay awhile and learn more about herself. During that second therapy effort, Ms. A., as I will call her, shared genetic material that she had clearly found too disturbing to speak about in our earlier brief encounter. Her's was an educated family. Her capable mother, however, was described as not only submissive but downtrodden and passive, unable to protect her daughter from the men of the family.

I want to focus on the linguistic issues and mode of communication. Ms. A. began a session explaining that a message her mother had left for her had made her very angry at her mother. "I called her back to tell her of my irritation -- but in our culture even telling her I was angry is not the same [implying, 'as it would be here in the United States']. Feminine speech is more delicate. There is a gender difference in speech."

My thoughts: I understood her to be telling me not only the obvious -- that her mother was a target of her anger -- but also that being female in her culture was a handicap to her freedom to express aggressive and critical feeling; further, I imagined that she was forecasting that she would have similar feelings towards me, in the transference, and maybe, a similar delicacy of expression.

She went on to recall an event that had occurred when she was 13 or 14. Her brother, then 22, was on leave from graduate school in the United States. She had been talking on the telephone to a girl friend and not helping to prepare the dinner. Her brother said to her, “You think food drops from heaven.” She apologized but apparently not sufficiently to satisfy her indignant brother. He brandished a knife at her, which evoked no protest from her mother. She recalled being so frightened that she ran out of the house, toward the railway station. Her (younger) sister ran after her to reassure her that it would be safe to come home now. As she recalled it, she did return home, and that later there was no further discussion.

My thoughts: So much seemed to be condensed in this sequence! She seemed to be explaining (in part) why she was angry with her mother for not taking her side, protecting her. That perhaps she felt like the Princess who did not have to do scullery drudgery like Mother – making the dinner. But her “comeuppance” administered by the so-much-older brother was violent and frightening, and carried a moral authority. The evoking of a knife, suggested the violence of a man; the metaphor of a knife as the weapon that frightened her, suggested not only her fear of the power of the phallus, but also possibly castration anxiety. And again, metaphorically, she would be “cut off” from her mother, “cut off” from her grandiose ideas of being of a higher status than her mother, and punished with bodily harm. Further, she was also telling about her choice of defense, flight (with a hint of escape through travel, i.e., the railroad station); with a

little stretch, knowing that she had later come to the United States where the brother had gone, I also thought, this could be a hostile identification with her brother, an early hint of a future course, turning passive into active.

In a later session, Ms. A. told of a dream that she had had that she said she found amusing. She was sitting cross legged in a circle with a group of women. Each one had her own penis in full erection between her legs. Further associations beyond her amusement were not forthcoming, and she never mentioned the dream again – just as the event in her adolescence with her brother was never discussed again.

My thoughts: Her apparent pleasure in the dream seemed to underscore her wish for phallic power; my counter transference association was of her being a member of a guild of Amazonian-like women. Her inability or unwillingness to consider her associations made me think about the inhibitions that lay behind the apparent directness of her communication of the dream itself.

In another session, she said that a person from her country, when speaking, tends not to specify the person being referred to, other than as male or female.

I wondered whether she was telling me that in her mind, her native language supported her wish that there be no gender differentiation.

In an hour during which she shared shocking information that she had been sexually abused by her father, she said of her feelings “I could cry at the drop of a pen.”

My thoughts: Again, so much seemed condensed in that sentence. Linguistically, there was something unsettling about the slightly altered idiom. Her use of English ordinarily was so seamless that I would have expected her to have said the more usual expression: “at the drop of a hat”. Yet, the particular word selected, “pen,” could clearly be considered phallic imagery,

especially in conjunction with the topic of her father's sexual abuse. For a penis to drop, what might that mean? And then, there was her understandable grief, but nevertheless unclear specifically over what.

She remarked further that she could be more direct in English than in her native language. Ms. A. described an incident at work where the task as she understood it was to brainstorm together with a more senior male colleague of her nationality. He was someone with whom she felt very collegial, as an ally, even a comrade, but with a definite hint of flirtation. On this occasion he remarked, following something she had just said: “Where did that come from? Are your hormones acting up or something?” She felt hurt and annoyed by what she felt to be sexual harassment. But then was aware that of a loss of sexual feeling (which she apparently felt toward this person), and she had mixed feelings about doing that. “If you stand up for yourself,” I commented to the patient, “would you feel something sexual is lost”? She returned to the idea of her father's sexual abuse, how he would sit and watch her, as a teenager, in the bath.

I thought, she seemed to be getting close to the idea of her conflict over her sexual excitement with her father and with a current displacement figure in the man at work, as well perhaps to her identification with her mother.

In that hour, I wondered more about why it was easier to speak in English about these concerns, why she felt she could be more direct? She tried to illustrate what she meant. In a language other than her native tongue, such as English, she feels free to say dirty jokes and speak of penises without a blush. She continued by recalling a recent occasion when she was with a Spanish-speaking group (incidentally, letting me know as she had so many other times of her erudition). She had told the members of the group that the word in her native language for “testicles” means “golden balls” in

Spanish. The group began to chant to her “golden balls,” repeating it in her own language. She became so embarrassed that she blushed.

I thought, here was the explicit example of the release from inhibition that she permitted herself, when speaking in a foreign language. She could speak obscene words, as directly as men important to her from her own culture were perceived as acting; she could say without a consequence of shame the aggressively infused sexual ideas concerning men's bodies, the way she felt men from her own culture could speak and act toward women's bodies and their sexuality. But in her own language, she again felt the inhibition and the shame.

A few months later, she was speaking as usual in English and switched to her native language to say (later translated at my request): “The most important thing is for us to get together and get to know each other more.”

I thought, to be direct about feelings of tenderness and perhaps sexual feeling toward the analyst was not so safe, as if issues to do with her feelings of intimacy toward a woman were to be avoided in the shared language and this time permissible in the delicate, feminine form of her own native language. The timing of this admission coincided with the occasion when I made the recommendation that she consider deepening the work and undertaking psychoanalysis. Unfortunately, it was not too long after her admission of a wish for greater closeness to the analyst that a “flight” that ended the therapy occurred. Suddenly and irresistibly she was in love with a solitary romantic-sounding man from the United States. She decided quite quickly to quit her prestigious job and go with the man to a distant country. They were planning to bike, backpack, and ostensibly to do research together in preparation for a book -- adventurous and dangerous activity.

My thoughts: It seemed that the intensity of the transference and the suggestion of the emergence of a negative oedipal configuration became frightening to her. I was unable to interpret her anxiety over her wishes for closeness, sexual and aggressive feelings towards me sufficiently to discourage her flight. As direct as she was in English, the transference seemed to require her to hold back from clearly voicing her feelings toward me, as if we had been speaking together in her native language, her mother tongue. In a way, she was able to continue her avoidance of facing her conflicts by silencing the language of the therapy altogether.

In the foreign language (so perfectly rendered that it was only when it came to a subtle idiom was it detectable that her fluency was not complete), in that language she could be active, outspoken and sexually bold – more like the men of her home culture. Nevertheless, despite her sexual and professional adventurousness in a foreign land and language, her sexual arousal, and true inclinations toward intimate connection remained in a sense locked in her native language.

Some years later, I learned about her when another patient reported taking over a high level international job stationed in the United States from a person of Ms. A's full name and description. I surmised that at some point the relationship with the man had ended (as so many had in the past) and that she had been able to reenter her former workplace, but only to again leave precipitously to go to another job, this time in Europe. If that was in fact Ms. A., it seemed that she had returned to the area (and not to the therapy). She was continuing to keep on the move both professionally and personally without fully engaging. It seems she was still running away from the threat of the knife through her enactments but also through her use of foreign languages to keep her conflicts at bay.

Hearing about a person whom I thought might be her, renewed my feeling of sadness that this was so. My hope was that perhaps the therapy had been “good enough” for her to risk renewing a

therapy with someone else, who could have helped her further to understand her conflicts and make it safe for her to integrate her linguistic divide.

Contrasting Vignette

The Case of Ms. B.

A contrasting group of people would be called multilingual rather than polyglot. Four of these patients, who are women, had mothers from another culture and learned the mother's language in close succession with learning English. Each was raised in America and had a sense of herself as American; the mothers, in contrast, clearly maintained a sense of self tied (although presumably ambivalently) to their original countries and not to America.

Obviously, there are many factors to be understood in these therapies, one at twice per week, one at three times per week, one at four times per week, and one at five times per week, but I believe they shared in common a difficulty in establishing a relatively comfortable identification with their mothers, leading to a variety of difficulties, including separating from mother, consolidating their own sexual and female/womanly sense of self, and establishing a relatively successful love object choice. You perhaps are noting that I proffered a somewhat similar suggestion about the polyglot young woman described in some detail above in terms of her unresolved feelings toward her mother which I saw as central to her difficulties.

In psychoanalytic work, we rely on language as the main vehicle of transmission carrying an enormous variety of meanings both conscious and unconscious. Yet it may be more than a fortuity that early language acquisition and one's native language are referred to as "the mother tongue." If such an idea has validity, language will be particularly vulnerable to expression of early disruptions in the mother-child dyads that then create the conflictual

underpinnings coloring later inevitable developmental identifications, conflicts and accomplishments.

The following is an example of hearing echoes of these conflicts in terms of language, in material from the work with one of the multilingual patients.

Pt.: “My sense of confidence ‘vaporated’. Oh what am I trying to say? It makes me think of a word that is not in English.” [says the word in the non-English language, which sounds quite close to vaporated, with a different sounding ending]. She goes on, “Its a machine that is not found in this country that – my mother used it the last time we were in – [Let's call it, X]. She used it to get the stains out of a dress. It was amazing. Oh the word I meant just now was E-vaporated! That happens to me. Often I can't think of the word I want in English [something the analyst had not particularly noted as happening] and when I am in X, I often struggle to find the right word and say it wrong and fear I will seem foolish.

That reminds me, my Mom learned English on her own from listening to TV and radio back in X when she was a teenager. Although she speaks English quite well – of course with an accent that everyone thinks is cute – she often says things that sound almost right but aren't. For example, the other day she said, ‘The proof is in the puddle.’ So close but yet so wrong, losing the essential meaning of the idea! In her its cute, but I worry often when I speak that I'm saying the wrong thing, that I've learned from her to do that too and don't know. But if I do that, it just sounds stupid.”

In contrast to this vignette, Ms. B’s ambivalent transference toward the analyst seemed to be expressed in a more global way, in terms of her ambivalence toward the psychoanalysis. She would alternate endlessly between devaluing the analysis along with doubts about her need for treatment, coupled with her expressed idealization of the analyst in a variety of ways.

Language was addressed only with respect to her own running assessment of her performance in analysis; how superficial or not she was being in her expression of topics that mattered, how prolific she was being in her quantity of production, i.e., how much she talked – which she rightly noted was in a pretty steady stream most of the time.

With regard to the topics Ms. B. addressed, she oscillated from glowing reports to disappointments and criticisms, which she in turn would regret and undo. Childhood and immediate family, however, were consistently painted in the rosiest of hues. To the analyst, it seemed as if the patient said, metaphorically, that Mother was amazing in making stains disappear; that the daughter was trying to do the same in the psychoanalysis – make the stains disappear – but she wasn't sure that psychoanalysis was the right machine; that when she tried to or felt compelled to follow her mother, she felt foolish and doubted everything, which made her feel badly about herself and guilty for her negative feelings toward her mother. The repeated questioning of the analysis while putting the analyst on a pedestal aptly captures her dilemma, which I felt was confirmed by my countertransference. So often, I felt a strong pull toward being nurturing and encouraging like a non-critical Mom at the same time as I felt the sting of the persistent jabs of her devaluation for what I was “putting her through” in the analysis.

While I would wish to say more about this patient and the many others who displayed aspects of their conflicts through their uses (and misuses) of English as the language of the therapy, time for this presentation is running out. Instead, I will try to collect some observations for consideration.

Discussion

I have raised several questions in this paper. The first focused on that early case and the discovery that led me to entitle this paper: “A Foreign Language: Voice for the Forbidden Thought”. Certainly, Ms. A. demonstrated the split that many writers

(Amati-Mehler, et al., 1993; Basch-Kahre, 1984; Buxbaum, 1949; and Reppen, 2000) have identified in polyglot and multilingual patients. This split for defensive purposes served her in much the ways that Buxbaum reported in her patients and Krapf did in his. In my patient's case it seemed that a more comprehensive way to think about her linguistic conflict solution was as a compromise formation which allowed her to bypass strictures – possibly derived from internal directives unconsciously associated with her mother – against her forbidden thoughts and impulses. At the same time, she could keep her painful affect in check, and go, unfrightened and unashamed, on her verbal adventures and triumphs, as long as she was frolicking in foreign territory. Unfortunately, it seemed that her solutions could not hold sufficiently to last, so that she was repeatedly compelled to enact her having to run away from love and work (and as it turned out, from therapy).

Ferenczi's explanation of the way obscene words adhere to the language of childhood, unchanged in structure, meaning, and action right into adulthood with only the affective valence changing from positive to negative, goes a long way toward our understanding of Ms. A's behaviors. It is not difficult to speculate on the advantages of alternative avenues of expression that a multiple linguistic range could provide.

A second question focused on whether it made a difference in the therapy, if secondary languages were acquired later in life (polyglot) or at the same time as one's first language acquisition. There were, of course, many differences between the two cases described above. But the striking difference between the two vignettes in terms of language factors was in the quality of the split. In the case of Ms. A., the polyglot patient, the barrier to integration was fenced by the

two languages, whereas, in the case of the second, multilingual patient, her conflicts bridged the languages in such a way that she suffered the symptom in both languages.

The third point centered on the uniqueness of process, transference and countertransference problems that might emerge in a monolingual therapist working with multilingual and polyglot patients as compared with a therapist who matched the language facility of the patient. This latter topic deserves not one separate paper, but two! So briefly, I would say the following: Empathy and understanding is always a challenge and never can be taken for granted. One of the hallmarks of our work is not to “presume” that we “know” what the patient intends, be it movie, book or feeling state. So too is it axiomatic that anything can be used defensively (Brenner, 1982) or adaptively for that matter. At the same time, several of the multilingual and polyglot analysts who have addressed these issues (Krapf [1935] in Amati-Mehler, 1993; Flegenheimer, 1989) have demonstrated the great benefits of linguistic competence in the languages of their patients to their understanding of unconscious symbolic meanings. Flegenheimer gave an example of a slip in the second language that had a significant meaning in the first but not in the second language. On the other hand, he suggests that he might have been able to understand the general meaning – if not the specific symbols anyway – through an understanding of the transference.

With regard to patient-analyst match, Kernberg (2000) addressed issues pertaining to gender of patient and analyst. He concluded that

“gender makes not only one but many differences, but . . . not [in] accord with the conventional common sense view of the influence of the actual gender of both participants on the treatment Transferences override . . . the actual gender.... Full deployment . . . depends on the analyst’s skill, experience,

and relative freedom from conventional assumptions”
(p. 881)

Along with Kernberg, Vaughan & Roose (2000) concur that “. . . patient-therapist match . . . must be treated first and foremost as evidence of an important transference-countertransference signal.” (p. 897)

Concluding Remarks

For both the multilingual and the polyglot patients, multiple languages share an expression of conflicts in ways that at times seem similar and at times different from other patients who do not have the same broader possibilities for expression. The basic concerns for the analyst are unchanged: to experience primarily, although not exclusively, in the transference and countertransference dialogue an understanding of the important conflicts and accompanying fantasies that are unique for each patient, and then to work with the patient step by step for emotional understanding of what is transpiring.

Perhaps this understanding might better be achieved for the polyglot or multilingual patient by matching such a person with a comparably endowed analyst. I have a regret that I am not in a position to offer such a possibility and be able, like Buxbaum and others were able, to engage with my patients in their mother tongue as well as in their adopted language. Yet, as Vaughan and Roose (2000) have told us, the literature does not support the concept of the “good match”; what remains is the careful work to understand the transference and countertransference. Perhaps, the concept of the “good enough analyst” is an acceptable idea for now.

REFERENCES

AMATI-MEHLER, J., ARGENTIERI, S., & CANESTRI, J. (1993). *The Babel of the Unconscious*. Conn.:IUP.

BASCH-KAHRE, E. (1984). On difficulties arising in transference and countertransference when analyst and analysand have different socio-cultural backgrounds. *I.R.P.*, 11:61-67.

BRENNER, C. (1982). *The Mind in Conflict*. NY:IUP.

BUXBAUM, E. (1949). The role of a second language in the formation of ego and superego. *P.Q.*,18:279-289.

DEVEREUX, G. (1953). Cultural factors in psychoanalytic therapy. *J.A.P.A.*, 1:629-655.

FERENCZI, S. (1911). On obscene words. Chapt. 4 in *First Contributions to Psychoanalysis*. NY:Brunner/Mazel, 1952, Reprinted 1980, pp. 132-153.

FLEGENHEIMER, F.A. (1989). Languages and psychoanalysis. The polyglot patient and the polyglot analyst. *I.R.P.*, 16:377-383.

JACKSON, S.W.(Reporter) (1968). Panel: Aspects of culture in psychoanalytic theory and practice. *J.A.P.A.*, 16:651-670.

KERNBERG, O.F. (2000). The influence of the gender of patient and analyst in the psychoanalytic relationship. *J.A.P.A.*, 48:859-883.

MALAWISTA, K. (2000). Unpublished case.

McDOUGALL, J. (1985). *Theaters of the Mind*. NY:Basic Books.

REPPEN, J.(Reporter) (2000). Panel: Development of affect in bilingual patients. *I.J.P.*, 81:153-155.

VAUGHN, S.C. & ROOSE, S.P. (2000). Patient-therapist match. *J.A.P.A.*, 48:885-899.

STOLLER, R.J., & HERDT, G. (1982). The development of masculinity: cross-cultural contribution. *J.A.P.A.*, 30:29.