INTERACTIONS AND MEDIATION BETWEEN MULTILINGUAL CLIENTS AND THEIR PSYCHO THERAPIST

Le présent article se penche sur les défis auxquels peuvent faire face les psychothérapeutes et leurs clients multilingues qui utilisent une langue étrangère (LX). Les psychothérapeutes doivent se rendre compte des obstacles visibles et invisibles dans leurs interactions avec leurs clients. Les obstacles à la communication des émotions peuvent être linguistiques, socioculturels et principalement avoir des conséquences sur le sens de soi et l’identité des clients. Un processus de médiation est donc nécessaire. Nous concluons que les professeurs de langue peuvent se trouver dans une situation similaire avec leurs étudiants et que la communication de l’émotion en LE fait non seulement une partie intégrale de la compétence communicative (Compagnon du CEFR, 2018) mais peut contribuer au futur bien-être mental des étudiants.

Introduction

The editors pointed out that all interactions require some degree of mediation. In other words, a common ground needs to be established on which communication can be based, and when difficulties emerge mediation will be required. In this paper, we will argue that there are contexts where the assumption of common ground is stronger or weaker depending on the training, experience and disciplinary background of those involved in the interaction. The need for mediation may thus be greater in contexts where the assumption of common ground is over-optimistic, and where the consequences of not spotting the potential misunderstanding, and hence skipping mediation, may be serious. Language professionals are very much aware of the variation in language proficiency and are less likely to assume complete common ground with fluent Foreign Language (LX) users than professionals from other backgrounds for whom language is merely a technical tool that does not merit special attention. Thus, considering an interlocutor who can talk easily about the weather in an LX, a Foreign Language teacher is less likely to assume complete linguistic common ground than a psychotherapist whose main concern is to locate the source of a client’s issues. The language teacher has been taught that students may have linguistic and cultural gaps that are not immediately apparent and that meaning may need to be negotiated in the classroom. The psychotherapist has been trained to try to understand the client’s worldview, but frequently that training ignores their clients’ linguistic profiles and experiences. Negotiating about meanings and across differences and power differentials, which goes to the heart of psychotherapeutic communication, often ignores the linguistic gap. In particular, psychotherapists (especially monolingual ones) may be less aware that multilinguals can have different levels of proficiency in different discourse domains (Grosjean, 2016). In other words, the ability to converse fluently in the LX about certain everyday topics does not necessarily imply an ability to convey subtle, complex emotions in that language. Clients themselves may be unaware of this.

The aim of the present paper is therefore to highlight the need for extra awareness among psychotherapists about both visible and invisible linguistic and cultural obstacles to emotion communication that will require mediation with their LX clients, using appropriate strategies.

Research on multilingualism and emotion

One striking finding that has emerged from studies on multilingualism and emotion is that multilinguals have clear preferences for specific languages to communicate emotions and that these correspond to the perception of emotional resonance of these languages. Languages that are acquired early in life (and which are usually the dominant languages) are typically felt to be more emotional, more authentic and more powerful, while languages acquired later in life tend to feel less emotional, less authentic, more detached and more distant (Dewaele, 2010; Pavlenko 2005). In reviewing this literature, Pavlenko (2012) argued that the difference in emotionality between early languages (L1s) and LXs comes from the fact that they are differentially embodied. L1(s) feel more embodied because early childhood is a period of intense affective socialization. Children go through a process of “integration of phonological forms of words and phrases with information from visual, auditory, olfactory, tactile, kinaesthetic, and visceral modalities, autobiographical memories, and affect.” (Pavlenko 2012: 421). They are told off by parents, carers or teachers for using swearwords or taboo words and they may even be “frowned” on in using them with peers, out of earshot of the adults. This integration of language and emotion is less likely to occur in a language classroom, where opportunities to use the language in interaction are limited and where certain topics are off limits. A consequence of this relatively artificial and decontextualized language learning is that the LX words feel disembodied. Swearwords in the LX may seem to lack the punch of their LI equivalents (Dewaele, 2010). Because LX emotion words and emotion-laden words may not be accurately calibrated, LX users risk pragmatic failure. Another challenge that LX users face is that semantic and conceptual representation of emotion words may differ in their different languages (Pavlenko, 2005), rendering certain words and expressions untranslatable. Apparent translation equivalents may also have subtle differences in meaning and in emotional power.

Emotional communication in therapeutic relationships

Psychotherapists who are unaware of the multilingual and multicultural nature of their clients might not realize that when using the client’s LX, they may in fact be skating on very thin linguistic ice, potentially misjudging the strength of the client’s emotion, which could in turn lead to misunderstandings requiring ample mediation. Thus, insufficient awareness of the client’s use of an LX may lead to inaccurate or incomplete assessments. An investigation into the beliefs, attitudes and practices of 101 monolingual and multilingual therapists in their interactions with their multilingual patients revealed significant differences between both groups in Costa and Dewaele (2012). Multilingual therapists were found to have increased attunement with their clients, helping them to reduce their sense of isolation. In a follow-up study on 182 multilingual clients, Dewaele and Costa (2013) found that they valued being able to express themselves in their different language(s) with their therapist, including by code-switching, which typically happened when the emotional tone was raised, confirming previous research on multilinguals (Dewaele, 2010). Clients reported strategic use of code-switching when discussing traumatic episodes, creating the necessary proximity or dis-
They agreed in the introduction that medi-}

ation. They argued in the introduction that me-

ning with an interpreter may be necessary to exchange information about working

with clients. In that sense they appreciated, and where code-switching

was appreciated, and where code-switching

was

not enough – if I can talk in [my L1] then I can

say that- the word sad is not enough for me- I have got more to say and

because if I say I am so sad today- that’s not

enough – if I can talk in [my L1] then I can say

explain about incorporating a third person into

the intimacy of the dyadic therapeutic relationship but others welcome work-

ing with an interpreter (Boyle & Talbot, 2017). Costa (2017, 2020) pointed out

that the presence of an interpreter adds an extra layer of complexity and requires careful preparation. It is possible to raise groups-

ness among psychotherapists about LX use by clients as an intervention study

by Bager-Charlson et al. (2017) showed. Quantitative and qualitative data collect-

ed from with 88 therapy trainees and qualified therapists who attended a train-

ing course on the importance of multilin-

gualism, showed a significantly increased

awareness about the danger of making assumptions, emotional expression and identity. Code-switching emerged as a co-

struction between a client and a therapist if the

interpreter acts like a bridge between the

client and therapist. In that sense they

asked to express a traumatic incident in the

session. This contributed to a feeling of

power over their own memories. Clients who seem fluent in an LX tend
to assume that the common linguistic

ground is sufficient for communication. Yet research on emotion communica-

tion in various settings, including psy-

chotherapy, has shown that emotions, memories and relationships may be dif-

ferentially embodied and experienced in different languages, so that interactions

with multilinguals benefit from being viewed through a multilingual lens. We suggest that a key mediation strategy

is for therapists to have metalinguistic

discussions with their clients in order to identify the therapeutic implications of language choices. In particular, with the

right encouragement, clients may adopt strategies such as code-switching – fol-

lowed by a translation or summary where necessary – in order to convey affective

and semantic meanings accurately. Al-

ternatively, a thoughtful collaboration with an interpreter may be necessary to bridge the linguistic gap. Raising awareness about how to work ther-

apeutically across languages can teach therapists to look beyond superficially successful interactions and provide tools

Conclusion

A lack of awareness about the nature of multilingualism, coupled with a mono-

lingual bias, persists among therapists. An overwhelming majority of the multi-

lingual clients surveyed by Rolland (2019) had never discussed which languages (or dialects) were allowed in their therapy

sessions. This contributed to a feeling of inhibition with regard to code-switching for some, however other participants re-

ported a more inclusive linguistic envi-

ronment where they were encouraged by the therapist’s interest in their language,

invitation to code-switch and explora-

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for mediation where necessary. This is important since, where misunderstandings in the language classroom have few repercussions in the “real world” outside, misunderstandings between therapists and clients that remain unnoticed and unmediated may have adverse effects on the mental wellbeing of the client. In fact, ignoring the multilingual experience of clients may deprive them of the opportunity of using their linguistic repertoire as an asset in psychotherapy.

The creation of “shared spaces that facilitate creativity openness and mutual understanding” (Piccardo et al., 2019: 23-4) in order to mediate communication is just as relevant in the therapeutic setting as it is in the language classroom. It is thus the responsibility of the therapist to reflect on the talk about the talking and to avoid thinking that language is only a minor technical issue. Finally, this review also suggests that future LX users would benefit from language teaching which foregrounds the communication of emotions, allowing students to explore cross-linguistic differences, since affect is integral to human interactions. Such teaching should include not just a focus on emotions words and expressions but should incorporate both the paraverbal (tone, pitch, volume, speech rate) and the non-verbal aspects (facial expression, body language and gestures) of communicating emotions in the LX.

It would also have to be complemented with sociopragmatic and sociocultural information about the appropriateness of expressing certain emotions with certain interlocutors in certain contexts (Comanpies to the CEFR, 2018; Dewaele, 2010). A great way to teach emotional communication is analysing short film extracts of emotional interactions in the LX, followed by role play by students mimicking the actors.

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