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Considerations and Reflections on Being a Brazilian - Latina Expressive Arts Therapist Working in USA

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Abstract

This paper focuses on the experience of being a Latina expressive arts therapist working in the United States of America (USA). Through literature review and a personal art-based research process, the definitions of identities, therapeutic relationship, and microaggression are discussed and explored. This paper is theoretically grounded in the notion of expressive arts therapy and gestalt therapy as a means to understand the author's experiences in the field of counseling. Autoethnography and art-based inquiry are used to conceptualize microaggressions within the therapeutic relationship.

With the intent of increasing awareness about the author's identities, the expressive arts were used to make sense of her experiences in relationships with clients and the world. This paper explores alternative ways to find a voice in the face of microaggressions and to share the experiences of other minority-identified therapists so as to analyze their shared realities and rediscover balance. The considerations for practice that are explored can be adapted by and applicable to minority-identified therapists in the process of building self-awareness. The arts can play an important role in empowering, naming, and expressing identities and realities in a unique way that correlates with social justice and a multicultural therapeutic approach to these are encouraged in this thesis.

Keywords: Expressive arts therapy, gestalt therapist, Brazilian therapist, Latina therapist, racism, microaggressions, art-based research

Considerations and Reflections on Being a Brazilian - Latina Expressive Arts Therapist

Working in USA

Since I moved to the USA to pursue this degree in expressive arts therapy, I was presented with many challenges regarding my identity and how it comes into play in my work. The change in social perception about my body, my skin color, and my behaviors had an impact on the way that I perceived my identities as a Latina. This confrontation between my awareness of myself, my lived experiences with Brazilian culture, and the American culture transcribed and permeated through new social and professional interactions has had an impact on my mental health in ways I quickly became aware of and ways that I am still discovering.

This thesis provides a literature review as well as discussion of my artistic expressions and explorations related to my research. I analyze the relationship between my identities as a Latina expressive arts therapist working within multicultural perspectives in a foreign country, and the racist, misogynistic microaggressions that I face within the USA because of my intersectional identities. I also examine the potential for new creative experiences that come from encounters with people with different identities. Using autoethnographic language and self empowerment, through this process I am reinventing myself in this moment while writing this thesis. Paulo Freire (1972) stressed the importance of naming oneself. He claims that from this action, one can act in the concrete reality and transform. This empowers the person in the present moment of this action, in the here and now.

Using the first person narrative, I investigated my Brazilian, Latin, woman, expressive arts therapist, gestalt therapist, and immigrant identities in therapeutic relationships. Looking at encounters with the other people, attention was paid to countertransference, projections, racial

and cultural differences, in addition to the substrates of these interactions such as microaggressions, racism, misogyny, creativity, acceptance, and empathy. In the final part of this paper, I use expressive arts therapy and the modalities it offers as a field of possibilities for present moment self-reflection, awareness, and emotional processing. In the discussion, I present the impact of my intersectional identities, my art, and the possibilities through my own awareness that arises because of the therapeutic relationship.

Autoethnography

For this thesis, I chose to use an autoethnographic research approach with the intention of conducting the literature review through my particular point of view. Autoethnography is defined by Boylorn and Orbe (2016) as "a method that allows for both personal and cultural critique. Because people's lives and ideologies are influenced by multiple cultural dimensions and relationships" (p.17). Professor of qualitative methodology, Sarah J. Tracy further explains that "autoethnography refers to the systematic study, analysis, and narrative description of one's own experiences, interactions, culture, and identity" (Tracy 2019). Dantas (2016) as well as Ellis and Adams (2014) corroborate with the previous authors on the importance of cultural and personal dimensions for autoethnography and encourage that this practice can be used for expressive research. Boylorn and Orbe (2016) and Ellis and Adams (2014) highlighted the political aspect of using this methodology making this knowledge accessible beyond the academic circuit. Looking at cultural aspects, Delgado-Romero (2017) highlighted the importance of sharing life narratives for Latin culture as a way of connecting with others, transmitting and modifying cultural values. As we can see as an example in Araujo (2020) work. With these considerations, I aim to use my lived experiences and autoethnographic research to make my learning culturally relevant and accessible.

Identity

For this work, it is important to highlight the concept of multiple identities (De Oliveira, 2016; Kang et al., 2015; Kulich, 2017; Saintil and Jean, 2015) in which a subject does not have just one identity but is made up of several identities. Kang and Bodenhausen (2015) suggest the concept of complex social identities, in which the social identity aggregates the multiple fluid identities of a person in interactions with others, focusing on the fluidity between these identities. According to Santil and Jean (2015), identities only exist in relation to other people and thus this comparison is important for the constitution of our identity. They claim this under the notion that identities are also changeable according to these interactions.

Jorgensen and Duncan (2015) use professional identity to demonstrate how one is affected by the interaction between the self, others, and community. Kulich et al. (2017) recalls that these identities differ according to the way they are acquired, with some identities being inherited and others achieved. Acquisition impacts identities according to relative stability or malleability of the identities.

Kang et al. (2015) stressed the understanding of multiple identities in the context of groups. Such authors point out some differences when the multiple identities are converted. For example, a Latina female therapist, in this context would have presented three identities. It can be understood that there are identities that are considered minorities, and as such have less social value compared to others. These identities will be compared within the cultural context of the USA. The same authors also explained that this convergence of multiple identities challenges the perception we have of others' identities at the moment of social interaction.

Multiple identities provide a perceptual challenge to perceivers in terms of categorization fluency (e.g., Stangor et al. 1992) and can lead to the activation of multiple, potentially

conflicting stereotypes and prejudices (e.g., Fiske & Neuberg 1990). This processing

disfluency can also lead to important interpersonal consequences (Kang et al., 2015 p.549)

These consequences may be caused by the flow between prejudice and well-being. According to

Kang et al. (2015) stereotypes are linked to the social categories regulated by the group norms

and standards. That is, in a society in which a categorization suffers harm as a social minority,

and a person identifies with more than one minority, the possibility of psychological impact

increases.

However, Kulich et al. (2017) demonstrated that there is also the possibility that these

multitudes of identity promote social gain through support and positively influence individuals'

well-being, "Depending on cultural self-construal (individualistic or collectivistic), individuals

make use of different resources (related to either intrinsic or extrinsic motivation) to fight the

negative effect of incompatibility on the social identity" (Kulich et al., 2017, p. 6). This idea that

a person's multiple identities have a positive correlation with well being is also corroborated by

Kang et al. (2015). Such authors emphasized that this positive effect is also related to "[…] being

able to switch among different social identities according to one's current context, needs, or

goals" (p. 561). In subsequent sessions I will go into more detail about some possible

consequences of the multitudes of identities in relations with other aspects of a person's life,

paying particular attention to the relationship with the therapeutic relationship.

Eu

I am Brazilian and was born and raised on an island in the south of Brazil. Brazil has five

regions: north, northeast, midwest, southeast and south. Being raised in the south of Brazil has

had a profound impact on my life and on my identities because of its community and culture.

The south of Brazil is recognized for its whiteness compared to the rest of the country.

Immigrants came to this region from European countries such as Germany, Italy, Portugal, Spain

and Switzerland with the understanding that the country would provide guaranteed rights and hope for a better life (Bezerra, 2017). The ruling political party at the time was open to this immigration because they thought that it would change the colour of the country. This prioritization of whiteness is commonly supported by Brazilian elites. Such an effect can be observed in the social structure as a whole and in the narratives that promote the continuation of the status quo (Batista, 2020). This is unlike the northern and northeastern regions of Brazil, where most of their immigration came from slavery (Sant'Anna, n.d).

According to Silva et al. (2017), the differences in racial discrimination correlated with Brazilian regions. This demonstrates that racial discrimination remains a problem to be looked at and that regions differ in relation to its impact. The rank for this correlation was as follows: southeast, south, midwest, northeast and north. Out of the five regions, the southeast had the highest percentage of discrimination. Taking into account the geographic location and the way slavery and immigration took place in Brazil, it makes sense to think about this correlation. With that said, I had the privilege of being born in Southern Brazil into a family with a lighter complexion. As such, the color of my skin did not bring any harm or barriers related to the racial discrimination that black and brown Brazilians face.

Sexism (machismo) is another striking feature of Brazilian culture. De Oliveira and Maio (2016) highlight how this characteristic affects everyone and concluded that gender-related violence originates from this overvaluation of one gender at the expense of the other. The same authors show that Brazil is in fifth place globally with the most violence against women. Souza et al. (2017) analyzed the impact of hominids on women by Brazilian region. The results found demonstrate that the southern region, together with the southeast, has the lowest indications of

feminicide in the country. However, we must not forget that there is much to do to combat violence against women in Brazil.

Another aspect of inequality mentioned by De Oliveira and Maio (2016), are wage issues. Studies carried out comparing wage differentials by gender (male / female) in the United States and Brazil show that there is such a wage gap when the subject is defined as a woman and that over the years this gap has become smaller. However, this is still in favor of men, even though women have a higher average level of education than white and black men.

I had the privilege of being born a woman in the south of Brazil, which sets up a difference compared to other locations. In addition to my mother being a feminist, even though she does not know and does not use this nomenclature to define herself, she fought for me to have the same possibilities as male counterparts. She fought for my freedom to express myself, despite hearing a lot of criticism for it. I was stigmatized by my close family and that made me look beyond where I lived. To discover other possibilities and open myself to the world.

Saintil and Jean (2015) show us the difficulty of talking about a national identity regarding different identities. It is interesting to mention that the authors bring official documents as part of this identity. The official documents refer to national identities, SSN and passports. According to the same authors, "the national identity of a subject is something that we associate with a set of meanings in order to represent it as being integrated to a certain nation" (p.250). Filho (2015), corroborates the understanding of meanings associated with a culture and draws attention to these created meanings, such as, for example, the Brazilian being a happy people,

> It is a constitutive element of the country's identity, image and reputation - that is, the perception we have about the fundamental distinctive qualities of our people, with regard to values, aspirations, dominant passions, psychological and moral disposition; the

impressions that we are encouraged to transmit socially; the images and narratives we

project abroad; of the concept we enjoy around the world, our much-talked about tourist

or utopian charm (Filho, 2015, p. 407).

This identification of Brazilian nationality can be seen worldwide, as shown by Filho (2015).

One of the reactions to being a Brazilian that I received was directed to this Brazilian joy, to our

carnival and to soccer, for which we are known around the world.

According to Juslin et al. (2016), Brazilian culture is considered collectivist and is

therefore geared towards the group, "characterized as valuing social embeddedness, which

means that individuals tend to pursue group goals over individual goals and the self is seen as

interdependent and inseparable from the collective (eg , the family) (p.296) ", diverging from the

American culture that is considered individualist. For the Brazilian, the family is one of the

structures considered important, when talking about family, for example, we are considering the

nuclear family and more uncles / aunts, cousins, grandparents, some close neighbors, and close

friends.

According to Huppert et al. (2019), people from collectivist culture see themselves as

part of a whole, while in individualistic culture people value autonomy, personal goals and

reputation more. For example, My family collectively organized financially to help me come

here. My goal started to be shared with my family.

International Student

Studies like Saintil and Jean (2015) and Petzold et. al (2015, 2018) demonstrated that the

interest in studying abroad increases over the years. The authors point out that this experience is

linked to globalization and the search for new opportunities. However, some aspects of this

experience are challenging, such as language, academia and socio-cultural order. My student

identity resonates with the aforementioned authors. I can identify the challenges facing the language with academic writing and the intrinsic cultural reference details in the language, in addition to the cultural differences. For example, as mentioned earlier, the differences between collectivist and individualist culture. Before my attitude was understood as empathic and strong, here it came to be seen as weak and dependent.

I can also identify positive aspects of this cultural immersion. As explained by the previous authors, study abroad brings to the individual intercultural possibilities, language acquisition, marked prospect, and open-mindedness. As Petzold et al. (2018) wrote "Studying abroad associated with increasing openness and agreeableness and decreasing neuroticism" (p.38). I manage to relate the importance of studying abroad to the field of therapy, such as gestalt therapy and expressive arts therapy, through its influence on multicultural experience and cultural competences.

I would like to point out that my experience as an international student is marked by the political process in the United States in recent years (2018-2021) and by the Covid-19 pandemic. According to Israel and Batalova (2021) the Trump administration period was guided by reducing all types of immigration. They "made it harder for the foreign born, including international students, to enter or remain in the United States on either temporary or permanent visas" (Transition into U.S. Labor Market section, para. 3). During the outbreak of Covid-19, this was exacerbated. Trump's administration increased the stresses on international students through an announcement that student visas would be refuted. This happened because classes were moved virtually and international students were not required to be on campus. Fortunately, this act did not pass and international students remained with their rights to stay in the USA during this period of insecurities related to the pandemic.

The same authors emphasized positive notes with the Biden administration related to immigration and international students, "in contrast, the incoming Biden administration has promised to expand the number of highly skilled visas, reduce visa backlogs, and speed up visa and citizenship application processing" (Israel & Batalova, 2021,Transition into U.S. Labor Market section, para. 3) and with direct relation to international students, "post-graduation opportunities for international students, depending on the long-term impacts of the COVID-19 pandemic" (Israel & Batalova, 2021, Transition into U.S. Labor Market section, para. 3). I understand that these political and global changes affect my identity as an international student and in other aspects of my identities, so I chose to bring them to this thesis.

Therapist

For Corey et al. (2019), all therapeutic interactions can be considered multicultural, meaning that each individual is a mixture of cultures and identities (p.106). With a similar consideration Murphy and Dillon et al. (2016) emphasize that the concept of multiculturalism "include attention to more than ethnicity, race, and color" (p.38) and that attention could be focused on the difference between dominant culture and minorities. For the same authors, "Minority status denotes 'a numerically smaller or politically powerless group in relation to a larger, controlling and dominant majority" (Lum, 2004, as cited in Murphy & Dillon, 2016, p.39).

The multicultural therapist recognizes the particularities and different needs of his clients (Corey et al., 2019, p. 113). To recognize the needs in the other, the therapist needs to be aware of their needs, culture, bias, and privileges. Corey et al. (2019) and others demonstrate the importance of the therapist seeking his own therapy, in order to be more consistent in his work, "Without a high level of self-awareness, mental health professionals can obstruct the progress of

their clients as the focus of therapy shifts from meeting the client's needs to dealing with the inadequacies of the therapist" (Corey, 2019, p.40). Additionally the code of ethics stated, "Counselors are aware of—and avoid imposing—their own values, attitudes, beliefs, and behaviors […]" (ACA, 2014, A.4.b).

The majority of research (Blume et al., 2012; Nadal et al., 2014, Pieterse et al., 2012; Schoulte, et al, 2011; Wang, Leu, & Shoda, 2011) in the multicultural lens to mental health shows the importance of multicultural approaches and the impact of microaggressions or the impact of the lack of multicultural ability by the therapist on the client of color in the therapeutic process. Although this theme is extremely important for this present study I will be looking at the therapist minority in the therapeutic relationship. In subsequent sessions, the multicultural perspective will be analyzed, with the minority / cultural / ethnical / racial therapist and the implications of it. To do this, it will be necessary to first introduce some more of my identities.

Latina Therapist

Brazil is a country located in Latin America which should imply that people born in Brazil are Latin Americans. However, unlike other countries in Latin America that were colonized by Spain and whose official language is Spanish. Brazil was colonized by Portugal, so its official language is Portuguese. This linguistic and colonization difference marks one of the main differences and one of the reasons why so many Brazilians do not identify with the Latin American nomenclature (Puntigliano & Briceño-Ruiz, 2017). Although, with a political understanding, of integration, and of a contemporary Brazil, thinking of Brazil as part of South America. This is, therefore, a possible way to think about Brazil as being part of Latin America. I started to consider myself as Latina with my entry into the United States. Mainly due to the approach of latin cultures (collectivist) and the distance I had from the USA mainstream,

(individualist culture). So, at present moment I particularly consider myself as Latina. Although Spanish is not my primary language, I also speak this language and it facilitates my integration with the latin population.

In the previous years, the United States was the chosen destination for millions of immigrants, reaching in 2017 over 40 million people (Radford, 2019). With a predominance of immigrants from Latin America and Asia. According to Anhalt et al. (2020) these numbers are impressive and "The Latinx population currently accounts for 17,6% of the total U.S. population and is expected to grow to 24% by 2026" (p. 42). Looking at these numbers and other studies (Delgado-Roreno et al, 2018;. Kim, 2006;. Teran et al, 2017) which also point to the importance of the Latino community, may wonder about the prejudice against Latin American immigrants. On the effects of this discrimination and the increased vulnerability of this population, the authors, Anhalt et al. (2020) underscore the positive relationship between discrimination and enculturation in descending Latin American youths.

Delgado-Romero et al. (2018), brought attention to this anti-immigrant political current that adds another layer of stress to this population and reduces the possibility of this group seeking mental treatment. With this, stress is also added in bilingual therapists who work with this population, or who belong to that population, because according to them, "Outside of the client relationship, language brokers may find that working with Spanish-speaking clients translates into additional responsibilities and an increased caseload" (Delgado-Romero et al., 2018, p.346). Kim (2006, p.77) corroborated with the previous authors regarding this responsibility and adds that these counselors coming from ethnic minorities also have the responsibility to act as a cultural broker, between the dominant culture and its own culture.

Delgado-Romero et al. (2017) stressed that Latinx psychologists in the self-awareness process found themselves engaging in social activism and advocacy for marginalized groups.

Delgado-Romero et al. (2017), adds the importance of these professionals sharing their experiences, sharing the latin narratives in order to present models of possibilities for other Latinxs, to have representativeness. The same authors report that the field of psychology is one of the most popular among Latinxs in undergraduate.

However, according to Data USA (2017) the mental health field (psychologist, therapists, doctors, counselors) in the USA is 61.9% White (non-Hispanic), 19.4% are Black (non-Hispanic), 5.98 % Asian, and 4.79% are Latinx. This statistics show us a white predominant field and corroborating these statistics Spalding et al. (2019) reinforced as the professional field of counseling and psychotherapy is described as a white and middle-class majority. Race being a social construct that reinforces the privilege of power in relationships and in the North American context, white people are privileged. The authors investigated how Black, Asian and Minority Ethnic (BAME) counselor experiences working with White clients and found the need for further research in the area, in addition to BAME counselors,

> […]despite extensive experience as counsellors, and a personal sense of professional competence, some participants felt a need to prove themselves when faced with White clients. Historically, these clients' race is seen as dominant, carrying with it privilege and power (Naughton & Tudor, 2006) which might influence the counsellors' responses. Our research extends the experience of Tuckwell's (2001) participant, who expressed self-doubt, to an active attempt to justify experience and proficiency (Spalding et al., 2019, p. 80)

As a Latina expressive arts therapist working with white male veterans. I am noticing due to my identity how our different interactions are affected through our multiple layers of identities. This is how the therapeutic relationship can build off the cultural backgrounds and racial distinctions between the two parties. Due to being Latina I am more acutely aware about the bias projected onto me by the clients.

Kim and Kang (2018) drew attention to racial matching between client and counselor, in this research the authors found a significant difference between counseling sessions and racial / ethnic matching demonstrating that, when there is a match between clients and counselors in racial / ethnic level, there was an increase in number of sessions. The authors were also attentive in describing that the match among other characteristics such as language, education and background improve positive aspects to the relationship. Thus, enabling the interaction between different identities of the therapist in the relationship with the client.

Analyzing the issues of power in therapeutic relationships, Okun et al. (2017) observed that these representations are a reflection of the social conflicts that exist in the united states, "Interracial therapy relationships are likely to reflect the broader societal conflicts and racial anxieties that can be traced to the long U.S. history of systematic oppression of racial minorities" (p.443); and that according to society, the client expects to find in places of power people who correspond to what society expects in relation to race / ethnicity for that specific place, that is, the client expects to find a white person in the place where the therapist can.

According to results found in Spalding et al., (2019), Okun et al. (2017) came across similar results that therapists of color feel isolated, overcompensate and the client over asked about therapist expertise in comparison with white therapists. Using these pieces of research as

an anchor I will look in the following sections at my experience in the clinic with American clients.

Expressive Arts Therapist and Gestalt Therapy

Expressive arts therapy and gestalt therapy are theories and approaches to understanding human beings that have at their core many similar constructs. Gestalt therapy arises from an ideological breakup of the founder Friz Perls with Freudian psychoanalysis. According to Alvim (2014), gestalt therapy emerges from the place of transgression and change; From the break with some perceptions and the search for integration of the human being with holism, phenomenology, psychodrama techniques and others. Expressive arts therapy emerges in modal integration. As Kossak (2015) said, "Expressive arts therapy is defined as the integration or use of all of the arts in therapeutic practice" (p.03). Estrella (2011) corroborated with this understanding of integration, and states "Expressive therapy as a treatment modality is founded on the interrelatedness of the arts and takes an integrated approach to the use of the arts as a tool for psychotherapy" (p.183) .

To Rogers (1993, p.2) "Expressive arts refers to using the emotional, intuitive aspects of ourselves in various media. To use the arts expressively means going into our inner realms to discover feelings and to express them through visual art, movement, sound, writing, or drama". With a multimodal perspective of connection to deepen and search for greater understanding and awareness, Hinz (2009) uses Expressive Arts Therapy Continuum (ETC) as complex framework involving four levels, being hierarchical: Kinesthetic/Sensory; Perceptual/Affective; Cognitive/Symbolic; and Creative.

One of the fundamental elements of expressive arts and gestalt therapy is creativity. For this creativity to succeed, the practitioner must have the ability to work as a revolutionary, to not

be afraid to take risks, and to enter unexplored places with clients. As well as, being a therapist that is comfortable with not knowing the answers and able to be present with clients in their needs. Zinker (1977) names this element of the creativity process as revolutionary molding. Estrella (2011) explores creativity and stressed the importance of it for expressive arts therapy, "It is essential that integrative arts therapists understand theories of creativity, stages of creativity, and the unique 'transformational urge' (Johnson, 1985) that creativity embodies" (Estrella, 2011, p. 189). I can see and understand that my identities are integrated through creativity and that creativity also permeates myself as a therapist. Through my understanding of the creative process I am able to become a therapist who is able to take risks with their clients. By doing this I will be able to allow the therapeutic growth and healing to take place .

Therapeutic Relationship

Broderick and Blewitt (2010) emphasized the importance of the relationship for the well-being of the human being, "Regardless of personality characteristics, social relationships appear to be essential ingredients of well-being" (p.530), this direct correlation between relationships and well-being was also found in cross cultural studies, thus reaffirming this strong link. This thought is also anchored in the Relational-Cultural Theory (Jordan, 2009) in which it has the understanding that the human seeks and needs connection for its own development. Yano and Lima (2020) brought the perspective that the encounter with another human being is potentially therapeutic. With that said, it is important for this thesis to look at the relationship between client and therapist, as therapeutic relationship, or therapeutic alliance.

According to APA Dictionary of Psychology (2015b), therapist-patient relationship is a specific form of relationship that happens in therapy. With ethical implications this interaction varies with time and changes in the therapeutic process. This relationship is seen as essential and essential for the success of therapeutic treatment. This feature is related to bonds, and they are

"[…] constituted by the core conditions of therapy, the client's attitude toward the therapist, and the therapist's style of relation to the client" (APA, 2015b, p. 1082).

Kottler and Shepard (2015) agreed with the understanding that this relationship is malleable, and they focus attention on fluidity and adaptation according to the needs of each client, at the end of the day. Such highlighted authors that "Regardless of the theoretical orientation that is preferred, or the techniques that are employed, it is the connection between client and counselor that is the basis for all further work" (Kottler & Shepard, 2015, p.86). For these authors, it is also important to understand that this relationship exists in a cultural context and that it is the place of possibility where changes happen, "It is essential that counselor elicit accurate and honest feedback from their clients so as to make adjustment when things are not proceeding as well as they could" (Kottler & Shepard, 2015,p.88)

According to Macaluso (2020) the therapeutic relationship through the lens of gestalt therapy has a central perspective in the contact between therapist and client, this relationship is understood by the author as co-created. In agreement with the authors cited above, Macaluso (2020) also understands that the therapeutic relationship is fluid and adaptable, "requires flexibility and the capacity to move across the deliberateness/spontaneity spectrum according to the needs of the moment" (p. 31) and that the healing process takes place in the real, spontaneous and co-created encounter.

Roubal et al. (2017) drew attention to the information complexity of this therapeutic relationship,

> It comes from various sources: through the therapist's senses; from their own emotional and bodily experiences; from immediate thoughts and intuitive insights and previous personal and professional experiences that come to mind during the meeting; and, from

the theoretical concepts and assumptions that a therapist has assimilated during their

education. To process all of this information a therapist needs filters and concepts that

help them organize it in a meaningful way (Roubal et al., 2017, p.3)

With spontaneity, creativity, knowledge, and authenticity, playing a role in the therapeutic

relationship. It becomes very important for the therapist to be aware of themselves; about their

own questions, identities, culture, body, feelings, and senses. So, being aware, one can enter the

therapeutic relationship, take the risk of doing so, fluid, and open to contact with the client in the

here and now of this co-created relationship.

For Kossak (2015) it is necessary for the therapist to be committed to the client with an

approach that incorporates the principles of attunement through listening deeply to the client. To

allow improvisation to happen and the playful part be invited to participate. It is with play, that

growth and change can happen. Spontaneity and creativity are aspects found in the perspectives

of gestalt therapy and expressive arts therapy when talking about healing and therapeutic

relationships.

Projections

In the therapeutic relationship, phenomena called countertransference or projections

occur. The name used for this phenomenon varies depending on the approach used to analyze

such phenomenon, as well as the humanist perspectives previously expressed, for this thesis, it

was chosen to use the nomenclature projections.

This phenomenon, according to the APA dictionary (2015a), concerns the "process by

which each one attributes one's own individual positive or negative characteristics, affects, or

impulses to another person or group" (p.843). These projections are for one's experiences and

worlds of view. Jacobs (2017) expressed that "Gestalt therapists acknowledge that 'every

projection has a hook'; there is something that the therapist is doing, or saying, or a way they appear that might resemble someone in the client's world" (p.8) or vice-versa, in someone in the therapist's world. The same author proposes that this phenomenon could be analyzed from a perspective that aims at growth, for his perspective it is the ERT, enduring relational themes. In the words of Jacobs (2017), "I have built my understanding of repetitive modes of engagement that occur between therapist and client on an aspect of personality function that I refer to as 'enduring relational themes'" (p. 9).

When Jacobs (2017) reflected on the relational part, he reminds us that the creative potential of being a therapist,

> when we respond differently from what the client expects, when we disconfirm their most terrifying beliefs and expectations by not acting as they expect, it is these new relational events repeated over time that make a difference in the client's life (Jacobs, 2017, p.10).

Demonstrating that projections are part of the therapist relationship and as such as should be worked on. Extrapolating what the author brings to us, we can see the link between the projections and the bias, and the importance of the therapist being aware of his own projections so that they can work with the client's bias in the therapeutic process.

Awareness

Corey (2019) and others demonstrated the importance of the therapist seeking his own therapy, in order to be more consistent in their work. The code of ethics for counseling (ACA) , mental health professionals (AMHCA) and expressive arts therapists (IEATA), expressed the importance of therapist self-awareness for the therapeutic relationship. ACA (2014) referred the ethic of "Counselors are aware of—and avoid imposing—their own values, attitudes, beliefs, and behaviors […]" (ACA, 2014, A.4.b).

In a similar sense, AMHCA (2020, A.4.ds), said that mental health professional "[…] is aware of their own values, attitudes, beliefs and behaviors, as well as how these apply in a society with clients from diverse ethnic, social, cultural, religious, and economic backgrounds". The code of ethics for expressive arts therapists also stressed the importance of self-knowledge for our profession when stressed"[...] shall be aware that personal values affect their conduct in therapeutic work, supervision and teaching" (IEATA, n.d., p.2).

Many psychological approaches emphasize the importance of the therapist using the self as an instrument for their work with clients, as well being aware of their own needs and multiple identities. Kim (2006) when talking about the therapist coming from racial / ethnical minority recalls the responsibility that one has to use the self as an instrument "by (1) endorsing the utilization of counseling services, (2) modeling health, and (3) developing other bicultural counselors" (p.77). Rogers (1993) understood that to make coherent choices you need to be aware,

> You can make appropriate choices only if you are aware: aware of your feelings about your relationships, aware of feeling about events in the world, and aware of the deep pain and suffering happening globally. It is also important to be aware of each individual's ability to be courageous and loving (Rogers, 1993, p. 226).

For the therapist to be present in the relationship and co-create with the client, awareness is also, in my view, a central theme for a creative, ethical, empathic and safe therapeutic relationship. In the research carried out by Delgado-Romero et al. (2017), the results show that many therapists who have benefited from their own internal work, through increased self-awareness and the development of their professional identity, were able to perceive the impacts of cultural

processes on their identities, internalized oppressed identities, and empowerment through social justice.

Berger et al. (2014) identified some characteristics for the therapist to be considered culturally competent. The first characteristic that the authors list is "awareness of one's biases, assumptions, and values" (p.54). Accordingly, Spalding et al. (2019) recommended that therapists know their own identities and learn how their way of interacting with those who are different. Starting from the understanding of the importance of the therapist being aware about themself. In the following sessions, I will present possibilities of processes to deal with clients' projections and be more aware of your part in the therapeutic relationship.

Within the expressive arts there are different ways to seek self-awareness, self-reflections and self-supervision. Among them I invite you to experience a signature movement. According to Ruzany (2020) "Signature Movement is one path to make the body a safe place and an asset for self knowledge in service of an embodied relational encounter" (p.169). The therapist recognizing their own movement base, would be able to identify what happens to their movement in each encounter with the other

> This technique can be used as a tool, after a psychotherapy session, to quickly process what is happening within the self, the other and the field, bringing the body to the foreground and to inform about the embodied process of the therapeutic encounter (Ruzany, 2020, p.170).

For this work, as a way of increasing self-awareness and self-supervision, free visual arts were used, such as collage, painting, drawing, movement and free writing with the intent to deeply understanding myself.

Notes about Microaggression

Through the awareness processes, I realized that a lot of what I was feeling such as feelings of self-doubt and feeling less than my colleagues, had to do with microaggressions. Thus, in order to better understand my process, it is necessary to present the concept of microaggressions. I must note these subjects are extensive and important. However, it is not the objective of this thesis to exhaust these topics.

According to Sue et al. (2007) any and each racial or cultural encounters are subject to microaggressions taking place. For these authors "Racial microaggressions are brief and commonplace daily verbal, behavioral, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults towards people of color" (p. 271), and as Jangha et al. (2018) "Microaggressions represent negative differentials of power and are reported by many minorities" (p. 76). This particular type of aggression is likely to occur with invisibility to the perpetrator and the recipient (Spalding et al., 2019). Regarding this characteristic, Sue et al. (2007, p. 275) highlighted that the majority of White Americans pursue themselves as good, moral and believing in equality and democracy. Therefore, they do not recognize when a person who suffers microaggression argues that the attitudes they carried out are racist or microaggressive.

For Dellapp and Williams (2015) and Schultz (2018), microaggressions can be detected by verbal or nonverbal expressions. For example, an illustration of nonverbal microaggression is glazing from the top down a person of color or holding one's bag stronger in the presence of someone from different culture (ie. black men). Dellapp and Williams (2015) added that such attitudes can be intentional or unintentional and vague or specific. Previous authors corroborate Sue et al. (2007) when such behaviors are evaluated by the context and the experience of the sufferer indicating whether such attitudes are racially motivated. However, those who suffer

from microaggression sometimes cannot name what is happening, "Many people of color describe a vague feeling that they have been attacked, that they have been disrespected, or that something is not right" (Sue et al, 2007, p. 275-277). These feelings are understood because of the experiences of the person of color in relation to the aggressions. That is, the person finds the color of their skin or their cultural differences as a common reason for their experiences.

These three categories of microaggression are microassault, microinsult and microinvalidation. The first one refers to the explicit action of racial derogation. According to Sue et al. (2007) and Sue and Sue (2015) the microassault is more likely to be deliberately and consciously expressed when the person feels a loss of control or feels safe to assault another person. As an example is the 'old fashioned' racism (p. 274). The next form is microinsult, which is related to the subtlety of prejudice, when there are insults hidden in the message. For example, pathologizing forms of communication that are different from normative culture (Owen et al., 2018).

The last form is microinvalidation, "are characterized by communications that exclude, negate, or nullify the psychological thoughts, feelings, or experimental reality of a person of color" (Sue et al., 2007, p. 274). An example of this form is when a person says that they do not see the color of skin, thus denying the person of color experiences. About microaggressions, Williams (2020) emphasized that it can occur whether the target perceives it or not as microaggression. Sometimes, the target population are not aware that what they are feeling is correlated with forms of microaggression. And the effects of it is devastating for the mental health of the minority population (Sue et. Al, 2007).

Kivlighan et al. (2020) found a result similar to previous authors, identifying a variety of negative experiences as "self-doubt, frustration, exhaustion, aloneness, internalization of

negative racial stereotypes, tokenization, invalidation, embarrassment, cognitive energy waste, decreased self-esteem, and feelings of worthlessness" (p.1). Emphasized that the consequence of these aggressions can result in "negative health impacts for minorities such as depression, substance abuse, and overall negative impacts on psychological distress and well-being" (p.2).

Experiences and Process

At first it was difficult to identify what was happening to me. My process related to my new identities started when I entered the United States. The change that was happening to me was happening little by little, a little tighter. It felt like I was in an ocean and the waves are crashing. I had to adjust, become aware of changing perspectives. My experiences so far are a mix of opportunities and shredding. I am choosing to share with you my process of my new identities.

I arrived in the USA with vibrant colors and energy, for example, a dark red dress with colorful flowers, flowered skirts, and with movements that contained a certain lightness. I could say that I was a little naive with regards to the reality of violence towards immigrants, the perceptions of Latinx identity, and the racism and aggression from Americans that could happen as a result of my identities as a Latina immigrant. Walking around Boston, with my limited English, I approached my new home with an air of playfulness and hope, no anticipation of the oppression and challenges that I would soon face. I remember wearing my red flowered dress, with loose black hair and light movements and coming up suddenly. Remember, I was naive, a water bath in the middle of the street and words and in English about immigration. I felt naked in the middle of the street, my reality changed and I remember well that I started to question what kind of clothes I was wearing, how I was behaving, I felt out of place.

As I mentioned earlier, as a Brazilian, I came to be seen as Latinx,; but not just any Latinx, a Latin woman. With implications of sexualization of my body and my actions that I previously did not know. I discovered that being Brazilian involved dealing with others' projections on me related to their stereotypes about my identity. Issues of sexualization, projections about my emotional state, the "Brazilian is a happy people", among others. The Latina layer allowed me to find others, to laugh and to be able to be lighter and not give so much impact to those outside. It made me know subcultures and hospitality, listen to the stories of so many like me, who came here to transform, in addition to adding a layer of bitter sweetness, of not being welcome. Aggravated, for the moment because Trump was as president and according to Israel and Batalova (2021) this period proved to be unfavorable for any and all immigrants. I started to pay attention to my affect and journaling about it. I realized that my body when in contact with white North Americans, becomes more restrained, my facial expressions a little more rigid and I'm not so open.

I felt treated differently in my internship. I felt I had to do more than the other interns to receive the same recognition. I was feeling devalued, sad and unmotivated. In groups, the clients showed difficulty in understanding my English and at first not very committed to understand. Knowing that I am coming from Brazil, my superior, a African American man, started calling me *mamacita* and it played a role in making me feel uncomfortable and questioning the professionalism of the relationship.

This interaction, for example, falls in what we can understand as microaggression in the form of microinsult and consequently microinvalidation. I felt that I was not being heard and I felt unseen with this frequent interaction of the *mamacita*, my reaction was to feel attacked but without understanding very well what levels and what was happening. I would speak and the

clients would not understand and in the same second the other intern speaks and the same client understands. I started to question my English a lot and close myself off. I realized that English was not the problem, as the others were using the same words as mine, and when I took this for supervision one of the answers was that the client probably had a hearing problem. At that moment I thought, well, who knows, this is it. With this possibility, I went to the client's contact talking closer and got the same answer. I wanted to increase my awareness about these situations and my feelings so I turned to expressive arts.

Accessing my awareness process I could name a sense of strangeness, I could realize that understanding the client's background was not enough, something else was happening in that moment and in that relationship which I was not managing to fully comprehend. I began to review my experiences to understand more what was happening to make me feel so doubtful. There was so much I needed to understand about myself. I was more quiet and it had started to affect me as a whole. Overall, I was not myself anymore.

I was engaging in gestalt therapy, expressive arts therapy supervision, and classes. I was aware that something was going on. When I read the article by Sue et al. (2007), finally I was able to name what I was feeling. By naming what was happening in the therapeutic relationship, I was able to perceive and choose how to work with it. As I explained earlier, I had a lot of privileges and oppression and I was aware of the climate about immigrants. However, I felt that I was not properly warned about this, how this climate could so greatly affect me, and the fact it was not discussed in the academic environment about what happens when the client has bias against their therapist.

As suggested by Jordan (2009) this is because what I previously experienced has adapted to the new culture of this American cultural macrosystem and affects how I relate to people

around me. My sense of detachment also has a cultural relational aspect in which "Racism, homophobia, class prejudice, and sexism all lead to chronic disconnections that create pain and drain energy in individuals and societies" (Jordan, 2009, p.8).

Figure 1- Sola is representative of that moment when I was feeling isolated. The exploration started with collage materials and acrylic paint.

Figure 1- Sola

In figure 2 - Dramatica, I can identify the part of self-depreciation, in which I was feeling dramatic about what was happening with me, and feeling that something was wrong but I was not getting it. I felt without place. Freire (1972) said about "Self-depreciation is another characteristic of the oppressed, which derives from their internalization of the opinion the oppressors hold of them […] that in the end they become convinced of their own unfitness" (p.27).
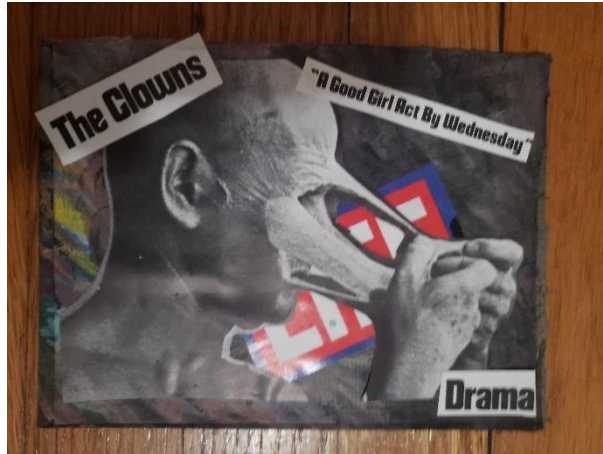
Figure 2 - Dramática

Regarding my need to overprove myself, I managed to identify that I was not alone. Spalding et a. (2019) explained, "Moreover, despite extensive experience as counselors, and a personal sense of professional competence, some participants felt a need to prove themselves when faced with White clients" (p.80). I chose to share my narrative with you to demonstrate that we are not alone. By naming what I was feeling as microaggression, I was able to strengthen myself and work in the clinic with clients. I do not believe that bias and racism is the same as other projections of clients, because it weighs the weight of an entire society. Talking to colleagues, therapists and students who are non-white to share our narratives and the identification of microaggression is important. Only by identifying, naming, and sharing creatively can we transform the clinic and society.

Similar to Delgado-Romero's findings, today I can understand the importance of knowing our own culture. Delgado-Romero names, "This understanding of self was often associated with self- and other empowerment through a commitment to advocacy and social justice in their narratives (Delgado-Romero et al., 2017, p. 132)". I am feeling a call to social justice and to share my experiences with microaggressions. Kim (2006) stressed the power in dividing her own narratives, "there is power in shared experiences, and using one's own personal

culture-centered experience as an instrument allows one to advocate, empower, and foster

change" (p.69).

Figure 3, 4 and 5 represent the process when I named microaggressions and worked

artistically through it. I first used free writing then I flowed into exploring with oil pastels and

finished in a self-portrait series with polaroid. When I worked with self-portraits (see fig.6) I was

experiencing the colour of my skin, the difference of the light in contrast with it, and how the

perspectives changed depending on the background. I related to my experiences in USA and

integrated them with my therapist identity.

After working creatively with this process my identities became more fluid and enabled

a new way of being in the clinic. Creativity (Roger, 1994; Zinker, 1977) I can flow seeking

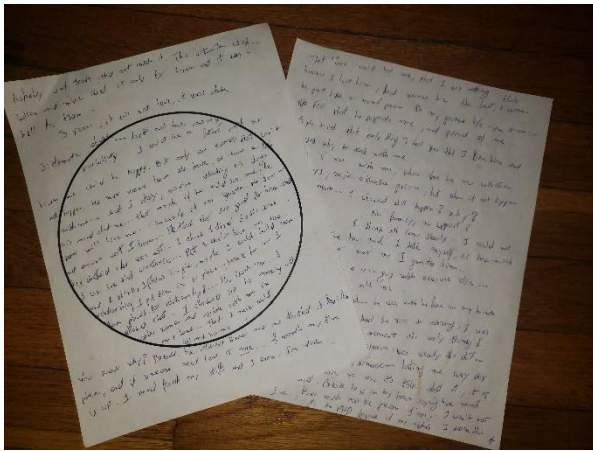integration and attunement (Kossak, 2015) improvisation can happen again.

Figure 3 - Free writing mandala   Figure 4 - Mandala of colours

Figure 5 - Self-portrait exploration

According to Kang and Bodenhausen (2015) "A broad challenge facing members of subordinated groups concerns how to situate a stigmatized self-aspect within a broader constellation of personal aspects and identities. The success of coping processes has been linked to the way other available identities are emphasized or integrated" (p. 558).

My part in this co-created relationship with clients was rigid in the process to try and understand what was happening to me, with this new identity. I was more cautious and not so open to invite my play parts to the relationship. In the moment that awareness happened I could deal with it and produce almost immediate results in the clinic. Spalding et al. (2019) recalled that this is a two-way process. As therapists we need to be aware of our part in this relationship so that we can work with the client bias. Abrams (2018) calling of the therapist attentions brought "It's important for psychologists to be aware of what a client's biases and prejudices are bringing up for them internally, so as not to project that onto the client — it's important to really understand what's happening" (p. 47).

Owen et al. (2018) highlighted "For therapists to be able to repair the rupture to the therapeutic relationship in the aftermath of a microaggression they need to (a)recognize a microaggression occurred and (b) then adequately respond" (p.9). The first step in recognizing

micro-aggression is being aware of yourself, your identities and the cultures in which you are working. The next steps involve the process to foster an open dialogue about diversity and identity issues, in alignment with Abrams (2018), "[…] even though it can be scary or uncomfortable to bring it up in the room, is that it prevents it from festering or interfering with your ability to provide high-quality care to the client" (p.45).

Conclusion

In this thesis, I have reviewed literature related to identities, microaggressions and therapy. I have shown how my exploratory process using narrative, arts, and movement have contributed to my own self-awareness as it related to my identity as a minority expressive arts therapist in the therapeutic relationship.

I noticed that the expressive arts were important in my awareness process and to give meaning to the discomfort generated by microaggressions. To support therapists becoming aware of their own identity the expressive arts can be helpful in self-awareness and expression. However, I also recommend that therapists seek their own therapy, supervision, and peer support. "In other words, seeking social support can become a source of objective feedback and validation to combat experiences within an unsupportive environment" (Delapp et al., 2015, p.). I felt that my own experiences with therapy, supervision, and peer support helped me to be able to write this thesis about my process in overcoming the traumas associated with being a Latina immigrant in the United States.

Due to the limitation of this thesis, and the uniqueness of my personal narrative, I recommend that there be further research conducted into the therapeutic relationship with minority-identified therapists and white clients within expressive arts therapy. It is also relevant to review how the 'signature movement' (Ruzany, 2020) can bring more awareness to the

process of self-reflection. It is hoped that this work contributes to an increase in the academy, the study of minority therapists, and microaggressions. As well as having the intention, for being a narrative, of increasing the representativeness of the latina woman therapist in the expressive arts therapy field. I am hoping to continue my work in the USA as well pushing deep dialogue around minority therapists and self-awareness.

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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