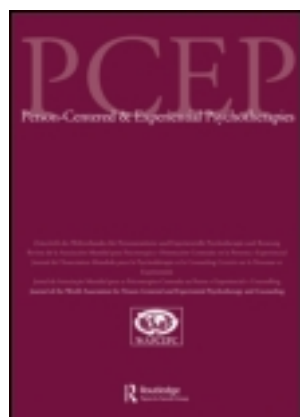


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Publisher: Routledge

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Person-Centered & Experiential Psychotherapies

Publication details, including instructions for authors and subscription information:

<http://www.tandfonline.com/loi/rpcp20>

"If I go back, they'll kill me ..." Person-centered therapy with lesbian and gay clients

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Published online: 16 Nov 2011.

To cite this article: Alan Brice (2011) "If I go back, they'll kill me ..." Person-centered therapy with lesbian and gay clients, *Person-Centered & Experiential Psychotherapies*, 10:4, 248-259, DOI: [10.1080/14779757.2011.626624](https://doi.org/10.1080/14779757.2011.626624)

To link to this article: <http://dx.doi.org/10.1080/14779757.2011.626624>

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“If I go back, they’ll kill me ...”
Person-centered therapy with lesbian and gay clients

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(Received 1 February 2011; final version received 1 June 2011)

The positive changes in the UK legislatively and with regard to discrimination against lesbians and gay men over the last 20 years are noted and are contrasted with the homophobia legislatively enshrined in many countries around the world. The challenge of working person-centredly with traumatized clients who have experienced homophobic hatred directed against them is explored through the medium of a case study of a gay male client who experienced a violent and life-threatening incident. Political action in the therapy room when faced with alienation is explored by personal reflections of the author about working person-centredly and about sexuality and with the aid of theory. Trauma theory and issues of empathy illustrate dilemmas in working intensely with traumatized clients. The political nature of the context of working with asylum seekers concludes the piece.

Keywords: sexuality; lesbian; gay; person-centered theory; trauma; homophobia

“Wenn ich zurückgehe, töten sie mich ...” Personzentrierte Therapie mit lesbischen und schwulen Klienten

Die positive Veränderungen in Grossbritannien aus den vergangenen 20 Jahren in der Gesetzgebung, aber auch was Diskriminierung von Lesben und Schwulen betrifft, wird aufgezeigt und kontrastiert mit der Homophobie, wie sie gesetzlich in vielen Ländern auf der ganzen Welt legitimiert wird. Die Herausforderung, die es bedeutet, mit traumatisierten Klienten zu arbeiten, welche gegen sie gerichteten homophoben Hass erlebt haben, wird anhand eines schwulen Klienten gezeigt, der einen gewalttätigen und lebensbedrohlichen Vorfall erlebte. Der Autor schildert persönliche Überlegungen zu politischem Handeln im Therapieraum, wenn er mit Entfremdung konfrontiert ist, und wie man personzentriert zu Sexualität und mit der Hilfe von Theorie arbeiten kann. Trauma-Theorie und das Thema Empathie illustrieren Dilemmata, wenn man intensiv mit traumatisierten Klienten arbeitet. Die politische Natur des Kontexts, wenn man mit Asyl-Suchenden arbeitet, schliesst den Artikel ab.

“Si vuelvo, me matan ...”: Terapia centrada en la persona con clientes de gays y lesbianas

Se observan los cambios legislativos positivos de los últimos 20 años en el Reino Unido con respecto a la discriminación contra las lesbianas y los gays; y se contraponen con la homofobia consagrada legislativamente en muchos países del

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mundo. Exploro, por medio del estudio del caso de un cliente gay que experimentó un incidente violento que puso en peligro su vida, el reto de trabajar de manera centrada en la persona con clientes traumatizados que han experimentado odio homofóbico dirigido contra ellos. El autor explora la política en el consultorio al enfrentarse con la alienación, mediante reflexiones personales acerca del trabajo centrado en la persona y acerca de la sexualidad, con la apoyo de la teoría. La teoría del trauma y las cuestiones de empatía ilustran dilemas que se presentan al trabajar intensamente con clientes traumatizados. Finalmente se trata la naturaleza política del contexto del trabajo con las personas que solicitan asilo.

“Si j’y retourne ils vont me tuer ...”: La thérapie centrée-sur-la-personne avec des clients gais et lesbiennes

Les changements positifs au Royaume Uni sur le plan de la législation et par rapport à la discrimination contre les lesbiennes et les hommes gais au cours des vingt dernières années sont notés et contrastent avec l’homophobie consacrée dans la législation de nombreux pays dans le monde. Le défi de travailler de manière centrée-sur-la-personne avec des clients traumatisés ayant fait l’expérience de la haine homophobe dirigée contre leurs personnes est exploré à travers une étude de cas d’un client gai qui avait vécu un incident violent et potentiellement mortel. Confronté à l’aliénation, l’auteur explore l’action politique dans la salle de thérapie à travers des réflexions personnelles concernant la manière de travailler dans l’ACP et concernant la sexualité, aidé par la théorie. La théorie du traumatisme et des questions concernant l’empathie illustrent des dilemmes dans le travail intensif avec des clients traumatisés. L’auteur conclut l’article avec la nature politique du contexte du travail avec des demandeurs d’asile.

“Se volto lá, eles matam-me ...”: A terapia centrada na pessoa e os clientes homossexuais

São apontadas as mudanças positivas que ocorreram na legislação do Reino Unido nos últimos vinte anos, contra a discriminação de homens e mulheres homossexuais e as mesmas são comparadas com a legislação promotora de homofobia, que vigora em muitos países por todo o mundo. Explora-se, através de um estudo de caso, o desafio de se trabalhar de forma centrada na pessoa com clientes traumatizados por anteriores vivências homofóbicas e de ódio dirigidas à sua pessoa. Trata-se de um cliente homossexual, de sexo masculino, que se viu envolvido num incidente violento e de atentado contra a sua vida. Explora-se a ação política no consultório, quando se é confrontado com a alienação, recorrendo a reflexões pessoais do autor acerca do trabalho centrado na pessoa e acerca da sexualidade, com apoio teórico. As teorias referentes ao trauma e assuntos relacionados com a empatia ilustram os dilemas inerentes ao trabalho intenso com clientes traumatizados. O artigo termina com referência ao contexto de natureza política envolvido no trabalho com clientes que procuram um refúgio.

「もし自分が戻ったら、殺される…」レズビアンとゲイのクライアントとのパーソンセンタード・セラピー

過去20年のイギリスにおけるレズビアンとゲイ男性に対する立法と差別の積極的な改善は世界の多くの国々に未だに立法上保護されるホモフォビアが存在することと対照的である。本研究では暴力的で生命を脅かされる事件を体験したゲイ男性のケースを通して、ホモフォビックな憎悪を直接向けられた体験を通して心的外傷を被

ったクライアントとのパーソン・センタードセラピーの挑戦を探索した。パーソン・センタードなセラピーを行うこととセクシュアリティについて、そして理論的理解を通しての著者の個人的内省によって、疎外感に直面した人間の面接室における政治的行為について探索した。外傷理論と共感に関する諸問題は心的外傷を被ったクライアントとの集中的なセラピーにまつわるジレンマを浮き彫りにしている。最後に、亡命希望者とのセラピー状況の政治的特徴について考察を行った。

I have just been to watch a premiership football match in England. In the program it states that the football club “will not tolerate any form of racial or homophobic abuse” (Newcastle United Football Club, 2010, p. 73). Twenty years ago I was member of the then fledgling Gay Football Supporters’ Network (see GSFN, n.d.) and was horrified at the vicious homophobic abuse the crowd screamed at the sportsmen they were watching. Often this was to players in the team they were supporting. It feels good to have lived in the UK long enough for it to have become a more tolerant place, where as long ago as January 2001 the age of consent was equalized at the age of 16 for lesbians and gay men with heterosexuals, and gay “marriage” or civil partnership became legal, the first taking place in December, 2005 (with a dedicated government webpage giving information about it (see UK Government, n.d.). Recently a law prohibiting incitement to hatred on the grounds of sexual orientation came into force.

I am not foolish enough to believe that the UK is not without homophobia and I know that discrimination and violence against lesbians and gay men continues. Just recently a pub chain has been forced to apologize after a gay group said staff refused to serve them in a row over their sexuality. According to the press reports, the Labour Party’s Lesbian Gay Bisexual and Transsexual Society were in a pub in Westminster, central London, when the duty manager is alleged to have refused them service and said that had he known they were a gay group he would not have accepted their booking (Gabbatt, 2010).

However sometimes as a therapist I work with clients from other countries and am taken into a very different reality.

As of May 2010, five countries maintain the death penalty for same-sex consensual acts (as well as some parts of Nigeria and Somalia) (Ottosson, 2010). Seventy-six countries maintain laws that make same-sex consensual relations between adults a criminal offence (Ottosson, 2010).

In more than 90 countries the age of consent for homosexual acts and heterosexual acts is not equal (there are 192 member states of the United Nations) (Ottosson, 2010).

Sometimes events take place around the world that bring those statistics into a harsher focus.

In Uganda there is currently a proposal to punish certain homosexual acts (for example if a minor is involved, or the offender is HIV+, or is a “serial” offender) with the death penalty. This legislation includes the introduction of a seven-year prison sentence for “helping, counselling, or encouraging another person to engage in a homosexual act” (Mmali, 2009).

I think of the many lesbian, gay, bisexual and transgender clients I have worked with in my therapeutic career and am struggling to know how to process the idea

that I could be imprisoned for that. As a “serial” counseling offender, could I be even more severely punished?

Oscar Wilde’s words “Disobedience in the eyes of anyone who has read history is our original virtue, it is through disobedience that progress has been made, through disobedience and through rebellion” (Wilde, 2007, p. 4) come to me, but would I, could I, be brave enough if I was in that country?

In July 2009, it was reported that the body of a gay man was exhumed from a cemetery in Senegal and dropped in the courtyard of his family home by an angry mob who vowed that they will not have a gay man buried in their graveyard (International Lesbian, Gay, Bisexual, Trans and Intersex Association, 2009).

In the past two years, [the bodies of] at least four men suspected of being gay have been exhumed by angry mobs in cemeteries in Senegal. (Callimachi, 2007)

How do I offer person-centered therapy to someone threatened with homophobic hatred on that scale? In this piece, I wish to progress through a short period of recent therapy with a client, a gay man, who had experienced such hatred.

I realize that I often turn and return to what I consider are the essential basics of the person-centered approach. I recall the three questions that Carl Rogers set himself before seeing Gloria in the Everett Shostrom “Gloria” films of 1965.

- (1) Can I be real in the relationship?
 - (2) Will I find myself prizing this person?
 - (3) Will I be able to understand the inner world of this person?
- (Shostrom, 1965)

I have taught person-centered counseling for many years and I recognize that for me it all comes back to these questions. Indeed I strive now to meet those three questions as you read this; as reader and writer we are in a kind of mutual relationship too. I know that there is delightful, and infuriating, complexity in those three questions.

I have been delighted in the growth of theory in the approach over the last 30 years. Of course I would say that my clients influence me profoundly and I learn enormously from them – and it really is true. I have also been influenced by most of those who have written about person-centered theory recently. It has been a delight to attend lectures, workshops and conferences and also after-session discussions with many therapists and thinkers.

I am also influenced by my studies in Indian philosophy when I was an undergraduate at university. I consider myself an “engaged” therapist, using “engaged” in a similar way to those people who are “engaged Buddhists” (e.g. Zen Peacemakers, n.d.).

I like to write about my clients. They inspire me, and it feels honorable to recognize their story. I will amend the story slightly with their permission to prevent unwanted breach of anonymity and confidentiality.

His story

My client was referred to me because of my work with people who have been tortured. It was a big decision to choose that kind of work, yet I couldn’t have said “No” to the possibility. Politically I am drawn to work therapeutically with people

who are the most abandoned and most in need in our society. To work with people unable to stay in safety in their own society seemed a natural step. All I knew of this client was that he was from a particular African country and that he was a Christian and that he had told the worker who referred him to me that he had been tortured.

My story, Alan, is this: I was in my yard with my boyfriend . . .

He paused for fraction of a second and I could see that he glanced momentarily at me to see how I would react to him saying “my boyfriend.”

I long ago realized that my face’s resting position when I’m concentrating can be misinterpreted as being judgmental, superior, even patronizing. Disappointingly my expression of interest can seem quizzical, as if I’m thinking, “Why would you do that?” Rather I want to look interested, engaged. I want to show I’m following the words and the meanings, and that I’m noticing the emotions experienced by the person I’m listening to. I offer a slight smile of welcome and encouragement.

He is taking a risk – he doesn’t yet know if it is really safe to say that he’s gay to me. Just very recently in the national newspapers there has been discussion of how a senior politician believes that homosexuals can be helped to return to heterosexuality through prayer. How can I explain my politics to him? Should I? Politically I stand for human rights, for justice, equality, for fairness. I’m a white, middle-class man, well educated, tall, in my 50s, hell – I even play cricket. I recall visiting my mother on her deathbed in hospital and being spoken to as if I was a “consultant” by the nurses, which my mother liked rather more than my chosen profession of therapy. Unlike some of my cousins I’m obviously not a plumber, mechanic, shipbuilder, window cleaner or farm worker. I know clients from disadvantaged backgrounds may fear being, and feel, very distant from me, seeing me as representing the establishment, and upholding traditional Anglo-Saxon attitudes of patriarchal power, heterosexuality, and racism. I am amused that in the debates that I consider to be racist and xenophobic about immigration in the UK, the immigrant history of the Angles and Saxons, originally from a little to the east in Europe from what is now predominantly Germany, is ignored.

How do I show in that moment that I’m not homophobic? At what point, if at all, will I need to indicate my sexuality to him? I don’t consider myself to be heterosexual. I find both men and women delightful, inspiring, loveable, and attractive. I’ve been in intimate relationships with men and women. I am married to a woman and have a lovely child. I prefer to identify myself as gay, since I’m not simply straight. I’m a little tired of being told I’m just confused about my sexuality. I know who I’m attracted to.

In my teens I read feminist, often lesbian, writers such as Germaine Greer and Adrienne Rich and also many gay men writers like E. M. Forster, John Ashberry, Lee Harwood, Oscar Wilde, Marcel Proust, and Thom Gunn. To be called “gay” was to be identified with artistic talent and genius. I had no interest in the dominant heterosexual patriarchal culture.

I want to be apparent and explicit to my clients. I don’t want them to have to guess me, to go from implicit clues to a view of me that isn’t me. We know as person-centered therapists just how complex that is.

I recall one client who after a few sessions walked out saying with some bitterness in his voice “I don’t believe you are like that. It’s just an act that you put on when you are in this room.” He really believed I was being a fraud, insincere, and therefore

never to be trusted. By odd coincidence, that client was in the audience a few weeks later when I did a talk about counseling to housing workers who wanted to know when to refer someone for specialist help. I was disconcerted when I saw him there. Would he judge me even more negatively? Might he say something that was difficult to deal with in public? Actually he said nothing at all and avoided eye contact with me even during the questions and answers time at the end of my talk. About a week later, I was in my office with the door open to let some fresh summer air into the room and he walked straight in and sat down even though we had no appointment booked. He said "I know you can't see me now, but I want to say I'm sorry – I misjudged you. I'm sick of people who are fakes. I don't think you are. Will you take me back on for counseling?" I am moved to tears remembering that moment. It was a big step for him to come back and to seek my help.

I want to keep getting better at this. I want to express myself as truly as I can. But it is his story. Mine is important too. But I must judge exactly when and if I should become more apparent to him.

He continued,

... and a neighbor saw us kiss and hold each other.

Simultaneously my heart opened and closed. There is a moment of deep warmth at their relationship, and also at his openness to tell me about their intimacy. And I know that within me was a shudder of fear. How many times have I been told of threats and violence against my clients, and especially gay clients? I have been threatened too. Walking home from long evenings dancing and drinking with gay friends in clubs and noticing groups of men making abusive gestures, calling us "fucking queers" and threatening crude and vicious punishment for us being gay. Friends have been attacked, hospitalized. I haven't. I feel lucky and I feel I'm a coward. I'm not one of the more "in your face" type of people so I might not be seen as gay – although I have friends who would be bursting out laughing at reading that. I like nice clothes, art, culture, music, film; I cry at films and sometimes on seeing sculptures; I'm gentle, considerate; I like chocolate – maybe for some people I'm obviously not totally straight ...

I had hoped his neighbor would wave and laugh and send a nice greeting but I could tell from the tone in which it was said that this was about fear and threat, and not acceptance and greeting.

I commented that although that sounded like a lovely moment, I could feel fear in the way it was said. I hoped he heard my comment about it being a lovely moment. I wasn't just sensing his feelings. I wanted to signal that his being gay was fine by me. The person-centered approach (PCA) Thought Police will notice the positive judgment right there. It feels mealy-mouthed to say it was about normalizing, and anyway, who am I to normalize the client's behavior? Or I could say I was setting out my values congruently. Was I reaching out to meet him? Human rights counseling (a term with more usage in legal contexts where "counseling" means "legal advice") would talk of recognizing that the abuses the client has suffered are indeed human rights' abuses. Gillian Proctor wrote that "to be 'apolitical' means supporting the status quo" (Proctor, 2006, p. 1). I do not wish to be seen to support homophobic hate crimes. In the same book Pete Sanders (2006) wrote "... the key to engaging with alienation in theory and practice is to *act*, not *spectate*" (p. 112).

He nodded, which I took to be his recognition of my stance, and continued,

He shouted, "Are you kissing a man?" And said he'd kill me using really crude language and threats. I just thought it was the sort of abuse that you can get being gay.

At the moment in the UK there is an advertising campaign by Stonewall, the UK's campaigning charity for lesbians, gays and bisexuals, that I really enjoy. It says, "Some people are gay. Get over it!" However all round the world gay people are under literal attack. The way he said "I just thought . . ." suggested to me that this was going to get seriously dangerous. I said that I sensed danger to him.

My boyfriend said he was really scared to visit my place, he didn't feel safe in the poor area I lived in. We argued and fell out. I've lost contact with him.

He sounded disappointed and weary. Maybe this was a familiar problem for him. Maybe there was a difference in their classes, their backgrounds, that was problematic. I sensed something about my client being sad about the background he came from, the poor neighborhood he could afford to live in and his disappointment with himself for being poor. I also caught something of his annoyance with his ex that this mattered. Why couldn't the ex accept him as who he is? It made it more important to me to do just that. I wondered if the direction of the session was going to be with the relationship, or maybe with the impact of being a poor working-class man on my client's inner world. I reflected his weariness and that he'd lost contact with his ex.

He continued,

A few days after that I was leaving my church (my Christian faith is very important to me)
...

I studied Indian philosophy at university and elements of Buddhism appeal to me but I don't consider myself to be attached to a particular religion or faith. At my father's funeral, when I was a young man, I recall the Vicar saying that he didn't know my father as he wasn't a churchgoer, "but he lived a Christian life." My father was a policeman who certainly believed that justice should be done and be seen to be done. I didn't know him well, as after my parents' separation I lived with my mother, and dad died when I was in my early 20s. After his death, a friend of his said to me that he was a "man's man." Momentarily I had wondered if the friend meant my "dad" was gay too, but then I realized with much humor that he meant perhaps the opposite, an alpha male: strong, masculine, dominant. My father had been a soldier. He had boxed for the army and was a physical training instructor. He became a policeman after leaving the army, a common career path at that time. It would not be true to say that I believe he understood me. I reflect now and wonder if my father's friend was indicating that he knew I was quite different from dad and almost trying to explain for me the distance between my father and me.

I do have a difficulty when gay people speak of their powerful religious faith when there are many in those faiths who reject homosexuals and seek to punish or convert them to heterosexuality. The problems that the Christian church has with homosexuality are very evident. The view that being a homosexual is not a sin but that homosexual acts are sins is a frequently expressed one. Many American and

African Christian church leaders are strongly against homosexuality. I have worked with many lesbian and gay Muslims who are rejected by others of their faith.

... after a service where I'd sung with the choir and a gang attacked me.

It is nearly two years since I heard this and I still have the memory of the shock of hearing those words. At the same time I realize I had a sense of this being inevitable.

Of course, and not in any sense of disbelief on my part, as he said "attacked" I heard his voice momentarily lose its emotionality. The word became oddly neutral, almost thrown away, which was disconcerting to hear. The sense I make of it is that for him to say that he had been attacked was too terrible. He'd been in a church singing and now he was being attacked – from peace to hate, from singing his passion to fighting perhaps for his life.

They must have been waiting for me. They were shouting that they would kill me, called me terrible things. They surrounded me so I couldn't escape. They were adults and children – men, woman and even young children.

Now there was complete panic in his voice as he relived those moments. He suddenly started sweating as he relived that experience. His speech became awkward, faltering. His responses showed that he was to some significant extent re-experiencing the event and was engaging his fight/flight response just as he had done then. We know that clients can be re-traumatized in therapy and I am keen to help a client work through their experience without doing that.

Roz Carroll, a body psychotherapist, when describing her own trauma therapy wrote,

"The acceleration of process – thinking quickly, being flooded with images – is symptomatic of sympathetic nervous system activity. From a biodynamic point of view, it makes sense to slow down the headlong pace so that the story itself can be 'digested'. This breaking cuts through the self-enclosure which re-enacts the sense of profound isolation that is a mark of traumatisation" (in Ryan, 2010, p. 1).

Margaret Warner wrote of a similar process in her article, "Does Empathy Cure" (Warner, 1997) when she spoke of "the capacity to hold experience in attention" which is encouraged with the use of empathy. I express it sometimes as the need to hold the client and their experience empathically. Warner's article merits careful consideration, as does the learning from neuroscience that is revealing more about the way we experience the world.

My client was also expressing clear amazement that this could happen, and that women and children would join in.

I want to be fully present to my clients, all senses alert to them. Suddenly this had evolved into a very shocking story. I didn't want to take anything away from his experience and realized that I had not spoken a lot since the start of the session. I consider myself to be one of the more interactive of person-centered therapists. I have a slight fear of being seen as a therapist who goes "Hmm ..." many times in a session and hardly speaks. I believe my silence is a powerful intervention and is not always the intervention I want to make to show my engagement with the client. Years ago I had the privilege to be in a workshop where Barbara Temaner Brodley gave a demonstration of her work. She literally didn't add a word to those the client

spoke. Her verbal comments were verbatim reflections of the client's words. I found this a tremendous challenge to the way I interpreted person-centered therapy. Yet here I was nodding and attending fully to my client, not saying as much as I could have. I suspect Barbara would have appreciated this therapy. I was worried that if I intervened he would be disrupted but I also wanted him to know that I was present. Following on the concept of holding experience in attention, I wanted to interact helpfully. I couldn't say what seemed mundane like "You feared they would kill you" or "You couldn't escape" and to express my felt sense could take away from him more than it could connect to him.

They hit me with stones and one shouted that he'd "cut my cock off."

His voice failed as he said that. I hardly heard the last bit about cutting his cock off. He seemed not to be angry at all. I couldn't see even a trace of anger in him. I heard resignation. It was like he was losing consciousness. He couldn't protect himself. The way he was speaking perhaps revealed how he had been at the time of the attack.

I knew I was going to die.

I don't quite know how he had the energy to say that loud enough for me to hear. It was said very quietly with a little sigh. The panic that had been there a few moments ago had gone. He was still.

I know that many people who have been tortured believe they will die and don't quite believe they have survived. In some ways the torture has been so effective that they can't live anything like the life they would have and in their lives they are often close to suicide as a reasonable possible choice. I knew that later I would have to consider the risk of him ending his life and suspected that we would soon come to discuss that.

I tried but couldn't stop them hitting me.

His voice had changed entirely. He no longer had any energy or emotion in it. It was now a low monotone.

What was I sensing from him?

It seemed to be the unspeakable awful end of his life.

This is the way this man was going to die.

How could I be with this terrible moment of his life? I work mostly now with people who have been tortured. How can I be fluent and able to interact with my clients in such unthinkable experiences?

I said simply, quietly, "You couldn't stop them." I didn't want to put any emphasis in the wrong place. If it sounded like I was emphasizing the "you" it could mean that someone else could have stopped them – I didn't want to convey that meaning.

He looked up at me, and our eyes met. I held his gaze and his eyes started to water. So did mine. I often cry when clients are moved to such extremes. This is a human encounter. To reject my humanity at this point would be to abandon my client. I had wanted to hold his experience safely, so that he could experience it differently and begin to integrate it.

He nodded and after a long pause continued.

They ripped my clothes off and the man who shouted he'd cut my penis off, he had a knife.

Suddenly this was inevitable too. I tried to picture the incident – a crowd was attacking a man outside a church and trying to kill him, ripping his clothes off so he was naked to be as vulnerable as he could be.

I repeated, “He had a knife,” and added, “and you could do nothing.” He was powerless and his penis would be cut off and then he'd be killed.

What would I do? Would I give in and let pain and my death flow over me? Would I try to find the last tiny bit of resistance in my body and fight for my life? Would I offer them my house, my money? Would I beg? How much would I beg to be left alone? Would I lie? Would I try to talk my way out of it? Wouldn't I just freeze in horror, hoping that maybe a heart attack would release me from this life before they hurt me?

I began to think of lynchings in the USA of black men, women and children and indeed some white people too. So this is a lynching. Events like this happen all round the world. They have happened in Europe and North America until relatively recently.

I tried to take it in – lynched for being gay, but not for being black. My client is black. So were his attackers.

When I was in West Africa last year, people there told me that being gay was a Western disease, and that black people weren't gay, unless they had been corrupted by Westerners, that some Africans thought it was cool to be Western and so they copied being gay like some of the musicians or film stars they idolized. As I tried to explain that that wasn't at all how I saw it, faces glazed over and I could see their confirmation of it being a Westerner's disease.

He waved his right arm weakly in the air and said,

He waved it in front of my face.

Often clients will make slight gestures indicating the actual larger movements that they made, or were made to them.

I tried to protect myself but he slashed at me with the knife and cut my left hand badly and then cut me just above my penis.

Somehow the unstoppable process was unfolding. He showed me a scar about two inches long on the back of his left hand between his thumb and first finger. Clients with scars from such events often are triggered back to the incidents by noticing the scars yet again. I could tell that he was feeling the cut as he held his hand out for me to see.

Suddenly his voice changed, energy surged back:

Just then the police arrived. I found out later that friends from my church had called them.

I heard this and my heart leaped. Safety. The “US Cavalry” has come. I thought of my dad and his colleagues upholding justice, racing to the scene, terrifying the troublemakers and saving his life. My eyes overflowed with the strength of the

emotion I could feel. But something was terribly wrong. His voice changed again, to a dull monotone.

The man with the knife disappeared into the crowd. The attack stopped and the crowd started to move away. I was so relieved.

I tried to understand his way of saying “I was so relieved.” There was no relief audible. He continued to look down to the floor, tears slowly dropping off his face onto his clothes. I said, “You say you were relieved and I don’t see any relief.”

One of the police officers came rushing up to me, said “You fucking poof” and punched me in the face.

Can you see this big scar on my lip?

I saw the scar; indeed I’d noticed it when we met. It is that big. I had wondered how he’d got it.

The punch knocked me out and I woke up in hospital.

I hurt so much when he said that. I do now writing this. I felt like I’d been beaten up. Four years ago, I had a head injury, which affected me in many ways. I lost some memory and I was less able cognitively than before; for example, I couldn’t add or multiply simple sums, words became unfamiliar and I couldn’t recognize many people I knew well. I am pleased to say that mostly, but not entirely, I have recovered. I had sensations similar to when I had banged my head when he had stopped talking. My head was bruised, battered. I couldn’t quite think.

It was clear that he had stopped talking.

I used the embodied empathy (see Cooper, 2001).¹ I was sensing and said, “You feel completely battered.”

He nodded.

I waited a while and then said that I wanted to wait until he felt able to talk before continuing. He nodded and gradually he began to reconnect with being with me in the counseling room we use.

“If I go back, they’ll kill me. They will.

I immediately understood him saying that. He is from an African country that has made homosexuality illegal. He fled his country for his safety and is seeking asylum here.

Just recently the Supreme Court has made a judgment that sexuality is a protected refugee identity, like political opinion and religious faith are (UK Supreme Court, 2009). The UK should no more return a gay man to a country where homosexuality is a crime punishable by prison as to return a socialist to a fascist dictatorship.

As a result my client has a good chance of getting the right to live in this country and not being forced to return to his home country.

As a gay man and an asylum seeker he has faced double discrimination in this country. I hope my client will know that I have acted, person-centredly, and not spectated.

Note

1. Mick Cooper (2001, p. 223) wrote about *embodied empathy*, “In this mode of embodied attunement, the therapist is not resonating with specific thoughts, emotions or bodily sensations, but with the complex, gestalt-like mosaic of her client’s embodied being, that initial primal thrust of the client’s experiencing as it emerges into the world. At this level, the whole of the therapist’s body is alive in the interaction, moving and vibrating in tandem with the client’s experiencing. She experiences an all-over unity and a most basic sense of being there in the world with another.”

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