LOSES AT THE CORE OF THE SELF AND THE MERITS OF “PORTABLE FAMILIES” 1

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ABSTRACT. The treatment of a patient who was referred due to hallucinations reveals a world of “magic realism” that is far from infrequent in elderly people with a small and dwindling social network—especially if coming from cultures where the boundaries between the inner and the outer worlds are fuzzy. Respecting these traits allow for the development of treatment approaches that can evolve satisfactorily without disrupting the patient’s inscription in this dual world.

KEY WORDS: self boundaries, family, hallucinations, culture

Introduction

Our beloved talking cat, an agile acrobat and tender social being who would jump onto my desk whenever I was there and managed to create a space to lie down—pushing away whatever paper, pen or stapler was in his way and purr until falling asleep, who would climb into the vane of the window outside my studio and look at me while calling imperiously until I would open the door, who would follow my wife and I to whatever room we would end up in, parking himself there sharing the space in good company, was hit by a car and died a month ago, while crossing the street during one of his petted, just being there for the sheer joy of incursions into the neighborhood. Weeks after his death, reeling with the vacuum of his loss, I still quasi-hallucinate him: I have the sense every now and again that I see his shadow outside my studio window wanting to be allowed into the house after one of his escapades; or I experience him rushing by me in or out when I enter the house. Slowly and steadily, however, at his own pace and mine, he is erasing himself from the world of the present and into the bittersweet world of the memories of the loved ones.

What a fascinating process is that transition, that road frequented by so many of our objects of love no longer there, inaccessible as they are to our seeing, hearing, smelling, touching and being touched by them but lingering just the same for a while. Far from being a cognitive experience, it is a laborious process in which our senses trick us, probably to help us learn the painful experience of letting go.

Many friends who lost loved ones describe a

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similar process: “I sensed that she/he was there, that she/he never left, or had returned”, sometimes as a faint hallucination of their voice, or hearing their characteristic footsteps in the house, smelling a whiff of their preferred perfume, hearing the tingling of their door keys, “almost” seeing them.2

The passage of time may be also a kind and relentless healer for, as the traumatic loss recedes in time, so does the daily imposing presence of the absence. One day we discover that we haven’t been tortured by that feeling of distress throughout several hours, or that we laughed with abandonment at something funny—a discovery that may flood us with guilt, as if that moment of joy or of involvement in our daily living would have affronted or betrayed the object of our sorrow. But that betrayal repeats itself until we realize that we may be able to live a life with at least a modicum of happiness while carrying within us a permanent functional split of the self that may give us the authorization to re-engage into our capacity for joy and creativity3.

The more skin-bound the construction of the self favored by our culture, the more it will force us to distinguish between whomever we long and wish to hear, see, touch and embrace again, and the vacuum of his or her absence; ultimately, between self and the other. The spartan dictum of a culture that informs us that we are in-individuals, that the others are “out there” and not part of our self, instructs us also to let go of whatever we cannot retain… and continue with our life. This injunction will be counter-intuitive to, and clash with, the softer injunction emanating from cultures that define our self as enveloping others within its perimeter, that give us permission to rebel against our letting go of the departed by somehow keeping them with us.

The following clinical case will illustrate this alternative, culture-supported, approach to loss, and some consequences of its cross-cultural clash4.

Clinical presentation

A few years ago, at an outpatient psychiatric clinic for low income/low-paying insurance patients that I directed within a general hospital in California, I was asked to see a 70 year old bilingual Hispanic (a broad category encompassing people of Latin American origin living in the United States) woman, a well-known patient at the clinic. For the past two years she had been without remorse bread from a dying inmate (cf. Langer, 1991)

2 The word that comes to my mind when trying to identify that feeling in its many nuances is the idiosyncratic and perhaps untranslatable Portuguese word saudade, derived from the Latin solitatem, loneliness, and defined as “a feeling of nostalgic remembrance of people or things, absent or forever lost, accompanied by the desire to see or possess them once more” (Correia da Cunha, 1982.)

3 Needless to say, major and prolonged trauma—years in a concentration camp, months of unending terror—may lead to major splits in our identity, creating selves who end up living in parallel, unable to fuse or even to have areas in common: one moment I am here, with you, a father, a husband, a socially constructive fellow, and at the next moment I am back there, in the concentration camp, witnessing myself stealing...

4 While retaining her persona, traits of the patient’s description have been distorted in order to preserve her anonymity, in spite of her having authorized me to write about her.
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seen by a colleague, who asked me to take over her treatment arguing that, due to my being bilingual and multicultural, I would be better able to connect with her and figure out ways to treat her without falling into the frequent confrontations that he himself experienced with that patient.

He informed me that this lady —whose improbable first name was Samotracia— carried a diagnosis of “atypical chronic schizophrenia”, while her symptoms were quite impervious to the neuroleptic medication she had been taking already for the past several months.

I accepted the referral. At the appointed time, in came this rather voluminous Mexican-born woman, with marked Aztec facial features, her long white hair combed into a bun, a strong and coarse voice, dragging herself into my office with some huffing and puffing and greeting me respectfully while maintaining a rather symmetrical stance, shifting to Spanish as soon as I indicated my fluency in that language.

For me —and perhaps for both of us— it was, so to speak, empathy at first sight. In fact, she reminded me of the rotund and tender aboriginal woman that is central in a mother-and-child engraving by Clement Moreau titled “Madonna Guarani” that I had at home since childhood.

In order to reduce the chances of contamination —that is, to allow my own biases to develop rather than incorporating some colleague’s skews—, I had chosen not to read her rather thick clinical file prior to the consultation. So, after some introductory social graces, I started from scratch: “I haven’t read the previous notes on your chart. I will do it later, but, to begin from a fresh place, in what way, if any, can I be of help?”

Samotracia began by listing in detail the litany of her physical problems and symptoms, from a heart condition to her high blood pressure to a lingering fatigue (the latter probably a combined effect of heart insufficiency, heart medications, and the frequent extra-pyramidal effects of the neuroleptics she had been prescribed.) Her daily life followed a rather tight routine —the highlights being her daily walks in her neighborhood, some social life with neighbors, her frequent contact with her daughters, and her visits to her various health care practitioners. Her diet was balanced, she didn’t drink alcohol, and she

5 How come such an utterly Greek and rather unusual insular name was bestowed at birth on this Mexican-born woman was a mystery not only for me but also for her: she didn’t have any satisfactory explanation for why or how her parents, both semi-analphabetic peasants, had chosen that name for her.

6 The Guarani were the natives of Paraguay and northeast Argentina before the Spanish conquest, and are still a substantial part of that region’s population. To further reveal for the reader some added roots about my empathic connections with this woman through the association she triggered with that engraving, I should add that my nanny—the lady who care for me as a mother-extender since birth on— was a sweet woman of Guarani origin. A reproduction of the engraving I mention in the text can be found in Moreau/Meffert 1978, p.242.
took reasonably good care of her health—leaving aside her lack of interest in reducing her excessive weight. She was followed medically due to her heart insufficiency, which was reasonably well controlled with medication, and psychiatrically for what she called “nerves,” a rather blanket diagnostic category frequently used by Latinos to encompass a variety of pains and aches of the soul. She would smoke one cigarette after each meal, and was not ready to let that habit go, “one of the few pleasures I still can indulge in.”

After she exhausted her letany of symptoms and this sketchy description of her context, Samotracia’s story began to unfold, not as a coherent stream but as a series of anecdotes delivered in the course of many subsequent appointments—I saw her for half an hour once every two weeks during the first three months and then once a month during a total of a year, a total of 15 half hours.

She was born and raised in a very small, tight knit countryside village in Mexico. Her parents were poor farmers, severe—she described being belted frequently during childhood—but reasonably caring. She portrayed herself as a rather wild adolescent, who married early and shortly afterwards entered illegally into the United States, following her young husband. Both worked as *braceros*, itinerant hired laborers in different harvests, wandering from job to job until they settled in an agricultural region of California, where they were able to legalize their status as a permanent resident. They had four children, and she worked hard both to raise her offspring and to make ends meet, especially after she separated from her husband, a man whom she described as alcoholic and physically violent during his frequent weekend binges. She continued with a life of sacrifice, raising her kids while working steadily cleaning houses until, when her bones informed her that her workload was becoming too heavy and her heart began to decompensate clinically, she retired. With her carefully managed meager social security income, some minimal savings, and the occasional economic help from her two daughters, she had lived for the past eight years in a small but pleasant two room rented apartment, open to a forest and located in a safe neighborhood. She had had four offspring, two males and two females. Both sons had died years ago: one was killed in a gang-related shootout during late adolescence; the other, a homosexual musician, had died of AIDS at age 33. The two daughters were alive. The older one, an accountant with a mid-management job in a local firm, lived with her boyfriend in the same city as her mother. The younger one, a police officer, married, doing well in her career, lived with her family several hours drive from her mother. Both daughters maintained frequent phone contact with their mother. The one living nearby had dinner with Samotracia once a week, would exchange phone calls frequently and was available for emergencies, while carefully avoiding interfering with her mother’s
treasured autonomy. The only other family member with whom Samotracia had any contact was a sister, who lived in another region but with whom she maintained phone contact once a week. She had a meager informal social network, consisting of several acquaintances and neighbors, but no intimate friends.

I explored whether she had any religious practices, and she explained to me that she had been raised Catholic, did not attend religious services, but prayed occasionally on her own, as she believed in the afterlife in a rather undefined way. She would joke that some of her beliefs—such as “brujerías”—were more in tune with creeds permeating her Mexican peasant origins than with any organized religion.7

I couldn’t agree more about that assertion, especially when Samotracia confided to me, after I gained some of her trust, that her two (dead) sons visited her rather frequently. In fact, beginning several years ago, she told me, her sons would appear three or four times a week, in the evening, after dinner, while she was reading or watching television. The first time one of them appeared, she confided, she was startled and terrified, but slowly she got used to these apparitions and, in fact, currently she enjoyed them immensely. The most frequent visitor was the musician, whom, she confessed almost in secret, had been her favorite. During those visits they would converse and joke with her while reassuring her that they were all right. Sometimes they would engage in minor mischief just to make her laugh, occasionally “monkey around” and even be a bit annoying and distracting, especially while she wanted to watch undistracted some television program that caught her interest, so she would end up scolding them to stop bothering her. But overall they would be loving and respectful of her, “as they should”, and even tactful so as move to another room to allow her privacy if she wanted to disrobe in order to take a shower or to put on her nightgown. I explored whether she would see them or just hear them, and she answered “Doctor, most of the times I can see and hear them as clearly as I can see you.” They would only visit her during the evening and at home. She would not need to do anything in particular to evoke them in. They just would appear “on their own will”, generally after her dinner, sometimes catching her by surprise. She added that, while she would occasionally mention the visitations to her daughters, she habitually kept these events to herself, as her daughters would tease her about it.

I asked her whether, in her view, they were a product of her imagination, ghosts stemming from another dimension, or any other explanation. She said that she wasn’t sure: they were probably produced by her imagination... but perhaps not and, she added quickly, she didn’t want to dwell on that question because she feared that

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7 Samotracia had been raised near El Real del Catorce, San Luis Potosi, a Mexican region impregnated with Toltec wisdom and shamanism.
excessive probing into it may disturb these visits, which she enjoyed and welcomed, even though they were occasionally tainted with the background sadness of knowing that her sons were, of course, dead. And, she added, she had so many struggles and so much suffering in her life that she felt that her current life, including her two loyal daughters and her access to her sons, was like a long-lasting reward... until she would join her boys in the afterlife.

I praised her repeatedly for such a creative way of keeping loved people near her, and didn’t probe further on the issue of the materiality of her sons. I should add that, at the end of the first interview, I discontinued all neuroleptics – both the diagnosis and that type of treatment she came with were, in my view, erroneous⁹ --, while maintaining, at her request, a prescription of a low dosage of anxiolytics, which she would take only as needed –as she did, on a rather conservative regime that entailed no risk. As predicted, the discontinuation of the neuroleptics resulted in the reduction of her physical discomfort and her somnolence, without any negative consequence otherwise.

The follow-up therapeutic encounters – that were spaced to once-a-month after the first three bi-monthly consultations -- continued without major incidents during several months. She would attend punctually and in good mood. Our main themes were her relationship with each of her four children, ways of expanding her social network, the support of her health-oriented regime, and a revisitation of episodes of her life. The most challenging situation took place when, to her understandable distress, her landlord told her that she was selling the house and that she would have to vacate her dwelling within the following three-to-six months – as her rooms were an integral part of the house, rather than an independent apartment. Her older daughter accompanied her to this consultation (she had joined the consultations a couple of times before, and had a standing invitation to join us as needed), quite concerned about this disturbance in the otherwise calm routines and steady environment of her mother. and wishing to participate in the discussion about cognitively, emotionally and socially appropriate at all times, even in the discussion about her unusual encounters with her dead sons. Cf. also Geltman and Chang, 2004.

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⁹ A clinical disquisition. Once excluded fever, confusion, use of hallucinogens, severe sensory impairment such as macular degeneration, and dementia, what Samotracia experienced could be classified, in the world of Occidental medicine, as hypnagogic hallucinations, that is, hallucinations that not infrequently occur in people in the twilight process of falling asleep (Manford and Andermann, 1998; Ohayon et al, 1996). However, unlike what is the frequent case with hypnagogic hallucinations, these experiences were pleasant, expected and enjoyed rather than frightening. This trait may places Samotracia more in the category of LaBerge’s “oneironauts”, that is, people capable of self-inducing a state of lucid dreaming (LaBerge and Rheingold, 1997). In turn, she did not meet diagnostic criteria for schizophrenia: beyond hallucinations, she did not display any other major requisite symptoms, either positive or negative, and her hallucinations were strongly visual rather than predominantly auditory, as is the case of most hallucinations in schizophrenia; and she did not present social/occupational dysfunctions or a story of pervasive developmental disorder. In sum, she was
alternatives. The daughter offered Samotracia to rent a larger apartment with the daughter and her boyfriend so that she could live together. Samotracia, always careful not to become a burden and staking her own independent space, expressed her appreciation but stated her preference to explore some nearby Spanish-speaking retirement community that she had heard of through a friend. In fact, during the following month Samotracia and her daughter visited several places until they visited a semi-independent senior community that both Samotracia and her daughter found satisfactory and a viable option. However, during one of the sessions preceding her move, Samotracia confessed to me that one of her main worries was whether the new place was going to be conducive to her sons’ visits – as she put it, “whether the boys would want to keep on coming to visit her there”. I suggested that it would be a good idea to discuss this issue with her sons during their next and perhaps last visit to her old place (I should highlight that for her it was clear that I assumed that her visitors were the product of her imagination, and there was always some level of complicity when the theme was touched.) In fact, the following evening, she told me later, they appeared and tried to calm her down, but she remained distressed about the issue.

For better of worse, and considering her lack of alternatives, she finally moved to her new dwelling. Fortunately, a few days after her move she received in her new apartment the blessed visits of her sons, who teased her gently about characteristics of the new place as well as her lack of faith in them, until, following what was a relational routine, she told them to move away from the television set because she wanted to watch her favorite program. She felt at home again.

Discussions

Samotracia had been raised in an extended family and a small-town culture where the whole surrounding community was in turn a family extender. A good part of that network was severed when she migrated into the U.S. for economic reasons. She then moved from place to place for many years, which in turn made impossible to develop a stable social network (Sluzki, 1998). Hence, Samotracia was living a reasonably solitary life in spite of her social nature. The loss of her two sons reduced her meaningful family environment by 50%. Nonetheless, somehow she managed to retain a thick family connection, both with her daughters, loyally attached to her, and with her sons –a core bond in Latino families (Falicov, 1998, p.170-72)--, who visited her almost daily.

Half of her surrounding family was composed of, so to speak, apparitions. She knew that. However, while at one level she was aware that her visiting sons were of her own creation, at another she did not experience them as her puppets, but as a presence with autonomy, agency and initiative.\(^\text{10}\)

\(^\text{10}\) That important part of her daily life seemed to emerge from a chapter written in the best style of magic realism, a scene worthy of “One Hundred Years of Solitude” (Garcia Marquez, 1991),
It should be highlighted that, far from being a characteristic to which Latinos can claim exclusivity, this dual inscription in the “out there” and “in here” world of perceptions and constructions seems to happen quite frequently among people stemming from a variety of non-European countries/cultures, especially those with a sedentary tradition and a low level of literacy, currently defined as “developing” rather than “developed” nations.\footnote{Cf. al-issa’s (1993) lucid discussion on the cross-cultural basis of the development and threshold of hallucinations, as well as the clinical situation described in Sluzki 2004.} This dual process can be aptly explored through the lens of Bakhtyn’s (1981) “dialogic theory,” a worldview where the world is not logically divided into reciprocally exclusive categories, but exist simultaneously in a centrifugal-centripetal (change-sameness, loss-retention) dynamics. This lens is particularly apt to analyze ways in which people out of their original socio-cultural environment negotiate their insertion in the new land, and go through life’s gains and losses meshing apparently incompatible worlds and principles in their daily life (DeSantis, 2001.)

From that perspective, it merits asking, where is the location of the boundary of Samotracia’s (experience of) self? Given that it is a construct essentially born within an intra-personal epistemology, good part of the early literature on the self emerged in the psychoanalytic tradition. Taking as point of departure Kohut’s (1977) description of the self as the cohesive experience of being that regulates the entire person, five clinically significant variables have been described in terms of this experience (Person, Cooper and Gabbard, 2005): I. Sense of boundaries between self and others; II. Self-esteem or self-worth; III. Sense of wholeness and continuity; IV. Genuineness (degree of meshing between the private and the public); and V. Sense of agency. To this could be added what Alan Roland (cited in Falicov, 1998, p.163), named as the “familial self,” a construct that includes close relations as part of who one is.

It would be interesting to analyze Samotracia from this perspective. The value of her sons’ presence in her life is clear: they allow her to retain a sense of wholeness and continuity—and provide her with the peace that that sense brings with it. While she maintains a certain level of awareness that these visitors are the product of her imagination—and therefore they “belong” to her, are part of her self—she retains a sense of the skin-bound boundaries of her self through her interaction with her visitors as external beings. In fact, Samotracia’s trepidation to move to a new dwelling derived in part from that experience of the autonomy to her apparitions (it is “up to them” to make themselves present), a fear that was congruent with her need not to make too obvious (to herself? to others?) that she controlled their materialization. And her relief at their “visit” after her move provided her with the necessary de-coupling between the apparitions and her skin-bound self that would allow her to perceive them as bona fide visitors… while
knowing at the same time that she was the agent, that is, that they were her visitors.

Gergen (1991, especially chapter 7), postulates that, in contemporary, postmodern society, our self constructs and reconstructs itself in its interaction with the myriads of relations in which we are embedded (he called that self a “strategic manipulator of the environment.”) But perhaps this process is not necessarily only a result of the “saturation of our contemporary life” but a universal trait in the construction and retention of our identity, that becomes more challenging when we become immersed in a society where the retention of a stable, reliable, close social milieu becomes difficult, if not impossible. Further, different cultures prepare us differently to deal with those circumstances, either through retrenching the boundaries of the self… or through conjuring and molding the social environment as needed.

The therapeutic endeavor with Samotracia became for me a careful mixture of (a) admiring her creation of a “portable family” that completed her family cocoon and allowed her to receive the modicum of love, connection and devotion she needed to remain nourished in an otherwise socially impoverished world; (b) treating her respectfully, through not legitimizing the physicality of her visitors –she would have felt infantilized by that-- nor disqualifying it –she would have felt alienated from me; (c) involving her four offspring in discussions about family issues, including very pragmatic discussions on how to avoid alienating Samotracia’s older daughter while not yielding to the daughter’s tendency to overprotect her, as well as how to regulate the “visits of her sons” so as to retain periods of solitude and privacy that Samotracia enjoyed. I would occasionally treat those scenarios as “real” with comments along the lines of “These boys seem overindulged by you. If they would be my kinds, when they do some mischief or bother me I would scold them and send them to sit in the corner until they apologize. Otherwise your spoiling them will end up playing against your autonomy!” while being aware that she did not believe that I believed that those embodiments were other than the product of her fantasy. However, in other occasions I would treat her visions as such, asking her, for instance, “Do they appear as having the age they had when you last saw them in life, or do they appear as growing older as times passes?”; (d) revisiting her life and re-historing it in a way that would reconcile her with difficult periods of her past, including suggesting “conversations” with her sons about periods of their life in which she thought she had been a less-than-perfect mother; and (e) facilitating and stimulating the development of new social connections beyond her meager current one –in which the health and mental health services played an important role, with the inconvenience that it may require the presence of symptoms to access it. In fact, her new dwelling ended up becoming an interesting new resource for her, as it was mainly populated by Latino women, including a couple of acquaintances with whom she progressively developed a closer friendship.
As therapy evolved, I also became without a doubt an important member of her personal social network. Visiting me as she did twice and then once a month was one of the highlights of her social life, and understanding each other within the frame of her history made the conversation easy and, well, familiar. The happy coincidence of her moving to a new dwelling in which sociality was facilitated made my own having to leave that city soon after that --transferring her care to another Spanish-speaking therapist who agreed to follow the same general line in therapy, and discontinuing the treatment-- more tolerable.

Having moved geographically many miles from the region where Samotracia lives, I hope that I am somehow visiting her occasionally, and that those visit evoke in her some tender feelings, as she has done in me through visiting me in this article.

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