

Other related themes that I have been re-thinking are the role that language, and bilingualism in particular, play in our identity formation and how through language we may assimilate a culture; the role that language plays when talking about and working with trauma and why we often choose one language over the other, and how the two languages serve us differently. However, this post is not an in-depth analysis of any of these topics and themes and is more of a brief account of my thread of experience concerning the use of the two languages and how they have served me differently, informed by books, articles, research findings, old notes and papers.

It is more or less known that bilingualism is mostly advantageous. Technological advances have allowed researchers to investigate how bilingualism interacts with and can change the cognitive and neurological systems, as well as, better memory, visual-spatial skills and creativity. Bilingual people can also have improved meta-linguistic awareness, show increased activation in the brain region associated with cognitive skills like attention and inhibition. One intriguing fact is that for example, bilinguals are proven to be better than monolinguals in encoding the fundamental frequency of sounds in the presence of background noise. So, in a noisy bar or restaurant, it will be easier for a bilingual person than for a monolingual person to encode what other people are saying.

However, I am more interested in work related to trauma and bilingual experience. There is now research that has investigated traumatic bilingual memories. I am going to refer to a study that resonates with my own personal experience. It involved the exploration of differences in the reporting of posttraumatic stress symptoms and specific characteristics of traumatic memory in the first versus second languages of bilingual (Spanish-English) individuals who sustained traumatic experiences in childhood. What they found was that bilingual participants would rate the intensity of specific symptoms and characteristics of traumatic memory higher in their first language. This makes sense because the earlier traumatic material is most closely connected to early experience between the self and the caregiver and the first language. And what they also found is that the relation between emotions and first language is different from the relation between emotions and the second language. It is also suggested that emotion words in our first language are stored at a deeper level of representation than those of our second language, and also, emotion words in the first language are usually experienced in many more contexts and used in more ways; so, encountering an emotion word in the second language is not likely to activate as many associations.

So, it has been suggested that the healing process can be facilitated by allowing access to older or deeper traumatic memories through the first language. For example, the process of switching from one language to another can both benefit and hinder an individual during therapy since one language can be used to defend against deeper emotions and pain, The second language can serve as an emotional barrier, a kind of linguistic detachment mechanism. It is interesting that even as far back as Freud it had become obvious that our experiences are organized by language and so it may be useful for bilingual individuals to switch between languages in order to access those different experiences and feelings. Freud had, for instance, observed that a bilingual native German woman client of his spoke only in English while describing her war experiences. Eventually, they discovered that when she was finally able to speak

German, she was able to come in touch with the depth of the trauma of experiencing the war.

Through my observations of my own experience I have noticed that the two languages have not only functioned differently when writing or speaking about trauma and emotions, but they serve different purposes, depending on the context and the subject. For instance, all that has to do with psychology is more easily expressed in English, which is probably due to the fact that I have studied in English. Also, for bilingual individuals the two languages may be connected to different ages, contexts and uses and our cultural identities play out in psychotherapy (and elsewhere) through the use of the language used. Learning a (second) language is a process of not only acquiring the knowledge of new words, but also developing the ability to think and feel using these new words and concepts. This then can lead to a change in one's worldview and identity. The languages we use hold the various shifts in our identity or sense of self and determine our organization of the world. Literature suggests that in immigrants the assimilation and integration of the new identity also occurs through the acquisition of the new language, which facilitates adaptation and can lead to the emergence of a new reconsolidated identity. So, it could be reasonable to suggest that through increased awareness and healing across our lifespan, and through negotiating and overcoming challenges like migration and change, integration at the level of languages and cultural experiences may also take place.

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