

# GRACE NOTES X

**DR SALMA SIDDIQUE** considers  
carers and empathy

**R**ELECTING ON THE relational space between therapist and therapised – what makes for a caring situation? Carers, constantly in the media, and through their narratives, have their work expressed as rights, wrongs, responsibilities, income and outcome, paid and unpaid work. In our culture carers exist as ghosts – 6.5 million unpaid carers, at a conservative estimate, save the government financial support. Carers are ghosts carrying out emotional labour. This type of work is usually engendered with feminine qualities of intuition, nurturing and compassion, work that is poorly paid, invisible, and dirty work involving intimacies of the naked and decaying body.

Are the stories clients tell us changing to ghost stories? Through stories we can see, imagine, contemplate and experience a possible introjection of the created other. In the position and existence of the other we can identify with a character in a play or novel as a frame of reference (Schiff et al, 1975). The reader and observer can make contact with the characters' desires, actions, thoughts, emotions and feelings which create a capacity to experience the spectrums of sympathy and/or empathy and altruism.

We notice that an increase in the range of clients and the way they experience and recognise the outside world has shaped the degree of alienation from reading the feelings of others. Culture offers a moral frame of reference in which there is a collective arrangement of the appropriate communications of feelings and emotions. Individuals who find themselves experiencing aspects of autism or narcissism often do not perceive or relate to the world through their being in the world and can find themselves with a disembodied narrative. Berne's (1975) concept of Martian thinking stands for the literal understanding of what is being said and done by others which can create a sense of strangeness. Littlewood and Lipsedge (1982) explore empathy as being social and culturally determined and the psychological adapted into dualistic thinking of normality and abnormality through diagnosis. The biomedicine of pathologising and medicalising of caring for others is an activity and a process of making things 'strange'.

Some would argue that caring for others is an activity and process which is a subjective feeling and is also a physiological function which floods the brain with chemicals such as oxytocin (Lee et al, 2009) and makes us feel better. Baron-Cohen (2011) encourages families to be more involved in reciprocity and altruism through the created act of emotional attachment.

The relationship between structure hungers (Berne, 1963) and social phenomena significantly informs our ability to regulate as a community group and can lead to 'a zero amount of affective empathy' (Baron-Cohen, 2011).

Stories, myths and fairy tales for the transactional analyst express the archaic material of transgenerational characters – ghosts, giants, monsters, fairies and historical figures – communicated through relationship and sharing of stories. If we don't tell stories then we can't make meaning of the human condition, and individuals in our communities are rendered unreachable/unknowable and 'separate in their strangeness'. In his narrative Berne (1975) offers twenty one different archetypal tales of escape or transformation. Carers are like the ghosts in the story which act as a metaphorical representation for communication and an intersubjective experience of empathy. Carers haunt relationships by being both familiar and alien, domestic and foreign.

Transactional Analysis as a system of intersubjective communication holds in mind the theory of personality, social action and the autonomous present and is conceptualised as something that passes between two or more individuals through veils of language, gender etiquette economics, identity performances and cultural recognition through the transactions between roles. In a recent interview with Louise Casey (Aitkenhead, 2013) about her work with 'troubled families' she claims to be achieving small victories by distancing herself from the crossed transactions of the present political narrative of showing a 'little less understanding' (stated by Eric Pickles, current Secretary of State for Communities and Local Government) for the cycles of abuse, violence, damage and brutality experienced through interpersonal relationships and the retraumatising through the care-giving state.

Casey reflects: 'People have this desire to 'codify', professionalise, put frameworks around things, talk about process, to make themselves feel more secure. It's much easier to say how many meetings you'll have to talk about a problem, than to actually deliver a solution to a problem. And that is endemic. So finding a new language is a big part of this.' (Aitkenhead, 2013).

Perhaps Casey has something to say to ourselves as professionals who may have lost the understanding of what empathy can give to carers and also how much it can cost them emotionally?

## References

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