

Dear Colleagues:

On December 23, 2015, The Board of Directors of my institute, the Institute for Psychoanalytic Training and Research (IPTAR) in New York City issued the following Position Statement on Xenophobia and Islamophobia. This followed a somewhat similar Position Statement on Syrian Refugee Resettlement issued by the American Psychoanalytic Association on December 2, 2015. Our statement is framed clinically. Our board thought it was important in these perilous times that psychoanalysts in the United States be at the forefront of opposing circumstances that lead to xenophobia, Islamophobia, racism, and prejudice. Psychoanalysts in other parts of the world, given the media stories that come from the United States, may not be familiar with the extent to which psychoanalysts in this country are expressing their views. Our institute believed that it was important to do so because the current xenophobia — the unreasonable fear of the Other — threatens the emotional well being of our patients, our children, our citizens, and our country. We very much appreciate the IPA Web making available to the international psychoanalytic community, the following IPTAR Board of Directors' Position Statement on Xenophobia and Islamophobia.

Sincerely yours, Richard Reichbart, J.D., Ph.D. President, IPTAR.

A Statement on Xenophobia and Islamophobia

(December 23, 2015)

The Institute for Psychoanalytic Training and Research welcomes and trains psychoanalytic candidates from diverse cultures and from throughout the world, and in the process we offer clinical psychoanalytic services to children and adults in the New York City community, regardless of their religion or ethnicity, whether through our fee for service clinic, our asylum program, our schools program or our parent-infant program. We proudly follow in the tradition established by Freud, who believed in bringing psychoanalysis to free clinics and to schools, and most importantly to all segments of society.

As psychoanalysts, we at IPTAR know only too well about the clinical affects of racism and xenophobia on individuals, and on the larger society: how the anxiety and fear that create these

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psychological phenomena, can too easily lead to actions that inflict severe trauma on completely innocent victims and families of a targeted group and, in worst case scenarios, fatal consequences. This projection onto the stranger — the Other — (the “xeno” in xenophobia is from the Greek root “stranger”) whose culture, race or religion are different, involves a splitting in which the worst traits that one fears in oneself are deposited into the Other; to such an extent that empathy and curiosity and a sense of our common humanity with the Other are denied, and suspicion and paranoia hold sway. In addition, sometimes unfortunately this type of phenomena leads to another type of splitting: the elevating of an authoritarian figure who is believed to be “all good”, a person who will supposedly protect one from the now malignant Other. In these matters, emotions can become so frenzied and so great that facts and reality are completely denied.

We know that at times of stress and anxiety, these societal phenomena are more likely to appear. They can lead to internment (of the Japanese on American soil in World War II), to failure to take in refugees who seek safety from oppression (as in the case of the 900 Jewish refugees who were turned back from the Florida coast over 70 years ago), to the terrible aspects of slavery or Jim Crowism, and to genocide. Not only is xenophobia a clinical manifestation, it is a social phenomena that is completely antithetical to the principles of our democratic society. The Board of Directors of IPTAR deplors the current rise of xenophobia and Islamophobia that is taking place in our country. We recognize the stress brought about by the terrorists who have appeared in our midst and in the Middle East and Europe, but we deeply believe that we must not give up our democratic or psychoanalytic principles in facing and dealing with these cruel actions. These are the times — the times when we are tested — that we must speak out: for what is right and just and what is in the interest of mental health. (For similar expressions about xenophobia and Islamaphobia, see the recent statements of the American Psychoana-

lytic Association¹ and the American Psychological Association².) We believe we must welcome those Syrian refugees who are fleeing their oppressors in the Middle East, we must oppose the “othering” of Muslims, permitting them to live without fear in our communities, and we must speak out against the demagoguery that threatens the rational discourse that binds us together. Our patients, the children we treat, we ourselves, and our society, deserve safety in expressing our beliefs, our religions and our cultural interactions. Our Freudian tradition and heritage actively oppose any effort to make the world psychologically unhealthy — whether through cruelty, xenophobia, or racism — and actively support those forces of life and health, central to psychoanalytic understanding, that can make this world a better place.

The IPTAR Board of Directors.

References

1. American Psychoanalytic Association Position Statement on Refugee Settlements:
<http://www.apsa.org/position-statements>
2. American Psychological Association Statement “Living in a World of Diverse Religions”:
<http://www.apa.org/news/press/op-eds/diverse-religions.aspx>

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