Migration and Family Conflict

Abstract: The stages of the process of migration are described, with the implications of each for family conflict and appropriate therapeutic intervention.

MILLIONS OF PEOPLE migrate each year. They do it alone or in organized aggregates, by their own decision or forced by decisions of others or by natural cataclysms, carrying with them truckloads of household items or a bundle of essentials. They travel on a luxury ocean liner or cramped in the bodega of a sampan, are received with press conferences or sneak in under barbed wire borders by night. They look forward with hope or backward with fear. They belong to a culture in which high geographic mobility is the rule and count on skills to deal with the process of migration, or they have been raised in a highly sedentary culture in which uprooting means near-catastrophe. They are thoroughly familiar with, or completely ignorant of, their situation on arrival, the language and custom of the new place, the people, the dwelling situation, the work they are going to have. One way or another, countless numbers of people manage to break away from their basic support networks, sever ties with places and people, and transplant their home base, their nest, their life projects, their dreams, their ghosts.

There is a unique drama that characterizes migration in each case. In fact, this drama often becomes a part of the treasured heritage of each family. The concrete anecdote covers the widest spectrum. It may consist of the sheltered move from coast to coast of an executive’s family for reasons of promotion in his work or the precarious move of the family of a political refugee who is given asylum in another country as an option to continued jail and torture. It may be the hopeful move of a family to a medical center where an offspring may receive continuous treatment for a chronic disease or the doomed move of a Puerto Rican from a low-paying job in San Juan to a low-paying job in the Bronx. It

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1 This paper in the product of a collective work. It started in two workshops on “Migration and Family Conflict” led by the author at the Second International Congress of Family Therapy, Jerusalem, August 14-1977. The ideas presented in the workshops, enriched by the active participation of the membership, were later summarized and sent to the participants, many of whom fed back new insights. The author expresses his warm appreciation all of the many participants in that dialogue.

2 Director, Behavioral Sciences, Family Practice Residency Program, University of California at San Francisco and San Francisco General Hospital
may be the move forced by racial and religious persecution in Nazi Germany or present-day Uganda or Southeast Asia, and so on, in an endless variety.

However, despite this array of anecdotes and scripts that derive from the culture and the circumstances of each family, the process of migration—both across cultures and across regions within cultures—presents outstanding regularities. In fact, if we focus our attention on patterns, rather than content (as we shall do in this discussion), we may develop a model of the migratory process that has a reasonable degree of crosscultural validity, a model that is, so to speak, "culture free," regardless of how culture-specific the styles of coping and the prevalent themes may be. It should be noted that societies with a high level of geographic mobility have incorporated into their culture norms and modes that are quite specifically aimed at coping with the stresses entailed by migration. These coping modalities, these adaptive responses, vary considerably according to the specific culture. Sometimes they increase the adaptability of its members to a new environment at the expense of reducing a collective affiliation or a historic perspective. In other societies, the intragroup allegiances practically proscribe the adaptive mimesis but retain in stead a strong group of reference. In some others, the whole meaningful network and frame of reference migrates collectively eliminating, almost by definition, any relevant change. Compare, for instance, the coping style activated by migration in a middle-class American in a ghetto Jew and in an Iranian nomad Bakhtiari. This theme is in itself vast and fascinating, but, alas it exceeds the scope of this paper.

Stages of Migration Process

The continuum of the process of migration can be broken down into the following discrete steps: (I) preparatory stage; (II) act of migration; (III) period of overcompensation; (IV) period of decompensation; and (V) transgenerational phenomena. Each step has distinctive characteristics, triggers different types of family coping mechanisms, and unchains different types of conflicts and symptoms. Each of these basic phases of the migratory process will be described in detail in this paper, with emphasis on specific types of urgencies, and crises. This will be followed by some general guidelines for preventive and therapeutic interventions that are relevant when dealing with families presenting conflicts related to the migratory process.

An attempt to represent graphically the continuum of migration renders a shape well known to students in the field of biology and experimental psychology, the curve of performance under stress. It is reproduced in an adapted fashion in Figure 1, illustrating the cycle and the different points of preventive and therapeutic intervention.

1. Preparatory Stage

This prologue to migration begins when the first concrete moves are made by family members toward a commitment to migrate. These moves can be an exchange of letters, a request of an application for visas, or any other act that substantiates the intent to migrate. The time span of this
stage obviously varies with the circumstances but in most cases is also contingent upon the family style (from an "explosive" decision to a lengthy rumination).

In the course of the preparatory stage, a first "up and down" curve will frequently appear, expressed as a short period of euphoria and an also short period of overload, dismay, and poor performance that habitually does not acquire major proportions and tends to be explained away as the natural result of efforts, tensions and emotions. In the course of those ups and downs, however, new family rules about roles and functions in relation to migration begin to be negotiated among members. These rules, explored during the preliminary stage, will be fully incorporated once migration takes place.

Migration is described by migrants as an act loaded either with negative motivations and connotations (such as "to escape political oppression") or with positive connotations (such as "to make a better living"). It is important to realize that the choice of one given connotation over the other is sometimes reasonable, but on other occasions quite arbitrary, although not random. So, "to make a better living" (positive) may imply "to escape from a bad living situation" (negative). The choice of one given emphasis as reason for migration—with the value judgment attached to it—may provide us with valuable clues about the family's coping styles, including rules about which roles are to be played by each member.

In spite of the fact that it is usually the result of a collective decision, some people tend to be labeled as "responsible" or motivator of the migration. Did they move because it was beneficial for the job situation or the career of one member of the family—more frequently the husband while the other one—more frequently the wife—was dragged behind? Did they move because one of the kids was chronically ill, and they needed to locate near an adequate medical facility? If so, who insisted on the move, and was it useful in terms of the care of the illness? Was somebody rescued by the move? Who experienced the greatest loss in the move? The anecdotes that consolidate roles of heroes and villains, victims and oppressors, remain frequently as family myths and appear repeatedly as themes of family feuds or as the unmentioned "skeletons in the closet."

Another important issue in this regard stems from the frequent assumption that, if the move had it positive motivation or even far exceeded the family's expectations in terms of advantages, there is no reason to mourn what hit, been left behind: ally sadness or mourning is immediately labeled as pathological or an act of ill will. In fact, those family members "in charge" of mourning have the greatest chance of being scapegoated by the rest (thus isolating those members in charge of the painful task of coming to terms with the past).

The opposite situation can also be found. Families who have escaped from extreme situations such as total annihilation may remain anchored to their past, in a state of permanent collective remembrance, mourning, and involvement with those dreaded circumstances from which they and not others-escaped. In these cases, the member of the family who breaks away first from the collective family mourning is frequently scapegoated as a traitor (to the family, to those who stayed behind, etc.). The confrontation notwithstanding, this role accomplishes a collective need: that of testing the new reality (done by the "traitor") while appeasing the guilt (done by the "accusers").
**II. The Act of Migration**

Migration is a transition with little or no prescribed rituals. In most cultures and circumstances, migrants are left to deal with the painful act of migration with only their private rituals.³ The most noticeable exception takes place in Israel, where the Ulpan-an initial residential program and intensive teaching of Hebrew to new immigrants—entails a whole complex ritual of initiation. There are also minor exceptions in other cultures, such as the "welcome wagon" ritual performed by neighbors to newly moved families in middle-class America.

It must be kept in mind that, although the very act of migration may constitute a brief transition (a three-hour leap by plane), in many other cases the act proper may take a considerable time. Such is frequently the case with people displaced by war and with people who migrated with intermediary stays in countries of transition or in internment camps. This protracted process may lead to the establishment of strong allegiances among people exposed to the same vicissitudes, to the point of becoming a primary net as strong as the one left in the country of origin. Such has been the case, for instance, with European Jews escaping the Holocaust who shared long pilgrimages on board ships before reaching a country that would accept them (leading to surrogate-family names such as Schiffbrudern and Schiffischivestern, that is, ship-brothers and ship-sisters). The same occurs at present with the "boat people" from Viet Nam.

The mode or style of the migratory act varies considerably. Some families "burn bridges," and the act of migration has the character of something final and unchangeable. Contrariwise, others affirm that they migrate "only for a while," regardless of the unlikelihood of a return. Some families decide a priori that the country they have chosen will be it, whereas other families explicitly include trial periods in their plans in order to decide among countries. Some families migrate in block and blindly, without any previous exploration of the field. Others organize the move cautiously, sending some members as "scouts" to prepare the terrain, secure jobs and dwelling, etc. Some families migrate legally and can have access to institutions of the country of adoption, whereas others migrate illegally, thus enhancing their (adaptive) mistrust and alienation from main-stream institutions. Finally, some families choose to migrate and some are forced to do so.

**III. Period of Overcompensation**

Migratory stress does not take its heaviest toll in the weeks or even months immediately following migration. On the contrary, the participants are frequently unaware of the stressful nature of the experience and of its cumulative impact. In fact, it is a period in which a heightened task-oriented efficiency can be noted, aided by a strong increase in the split between "instrumental" and "affective"

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³ The blatant absence and strong need for surrogate-extended families ("host families") or otherwise ritualized modalities of reception following migration has been stressed elsewhere (3, 7)
roles within the family, in the service of the basic need for survival and adaptation in an environment
and a culture that is, to a greater or lesser extent, alien.

Ethnicity can be defined in terms of the orientation it provides to individuals by delineating
norms, values, interactional modalities, rituals, meanings, and collective goals. That orientation-that
weltanschauung- do not operate in a vacuum but is dialectically supported by regularities of the
environment that generate the experience of consonance. A person walking in the street with a
baguette under his arm is consonant-for a perceptual set tuned up for Paris, not Boston.\(^4\) To be
surrounded mainly by blond people is consonant-for Stockholm, not San Juan. For men to go arm in
arm is consonant-for Rome, not Omaha. A 1:00 to 4:00 siesta break is consonant-for New Orleans in
the summer or for Jamaica, not Brooklyn. In fact, each individual subscribes to a certain organization
of reality and, hence, makes constant predictions about how things are going to be and how people
are going to act and react. Each unpredicted variation on any of those features shatters that person's
premises about reality and calls for a complex calibration of either the perceptions ("are my senses
reliable?") or the prediction ("are my values, or is my common sense, reliable?"). These calibrating,
adaptive mechanisms are mobilized by the dissonance resulting from any mismatch between
expectations and environment.\(^5\)

In the period immediately following migration, the first priority of the family is sheer survival,
that is, the satisfaction of its basic needs. Given those priorities, the process of cancellation of
dissonance or the denial of it-, subjective impact is maximal precisely at the period in which the
bombardment by dissonant experiences is also maximal. As a result of this mechanism, it is not
infrequent to observe that recent immigrants show a clear focus of attention-of consciousness-while
the overall field of consciousness is blurred or clouded (similar to certain patient-, with concussion who
appear overall stunned and confused but maintain a narrow focus of clear consciousness).

A concurrence of extreme circumstances and lack of coping skills can trigger massive crises
in this period, with family disorganization or multiple symptoms. But that is not the rule. In fact, the
majority of migrating families manage to establish and maintain for months a relative Moratorium
on the process of acculturation and accommodation. During this period immediately following migration,
therefore, conflicts and symptoms tend to remain dormant. The only observable feature is that
previous family rules and styles tend to appear slightly exaggerated. For instance, if the members
were mutually close, physically or emotionally, they will seem even closer; if they were mutually
distant, they will in crease their autonomy further, in spite of the fact that the lack of an extended social
network may force them to spend more time together.

\(^4\) For a Parisian, the lack of baguettes under the arm builds up into dissonance in the same way as the reiteration of the presence of
the baguette experience (plus hundreds of others, most of them intrinsically as minor as this one) generates dissonance in the
migrated Omahan in Paris.

\(^5\) The reader may consult a particularly attractive discussion on the concept of dissonance in Colin Cherry's classic, "On Human
Communication" (1). The specific subheading is titled "A Priori Knowledge Psychological Expectancy, and is part of a section
appropriately named "Reality and Nightmare."
A moratorium technique developed occasionally is the collective myth that "they will return to the country of origin after some time." Families cling to the old country's norms and refuse to engage with the flex\% environment. Needless to say, that coping strategy can last for only so long, and eventually, the fantasy will collapse under the pressure of the new reality, triggering a major crisis.

One way or another, the period of apparent calm and overcompensation gives way, some six months after it started, to an era of major crisis, one in which the long-range responses to migration take place.

**IV. Period of Decompensation or Crisis**

This is a stormy period, plagued with conflicts, symptoms, and difficulties. In fact, the majority of the migrated families that are brought to the attention of family therapists can be placed at one point or another of this phase of decompensation. In it, the main task of the recently migrated family takes place: that of reshaping its new reality, maximizing both the family's continuity in terms of identity and its compatibility with the environment. These two facets of the task sometimes compete and require a reasonable compromise for their accomplishment. It is indeed a frequent and necessary adaptation to retain certain family habits, even though they differ from those of the new context, while getting rid of other traits because they go too much against the grain of the culture of adoption or because they would require an extended family no longer available. The balance is delicate and difficult to reach. The whole collective task is complex, painful, and unavoidable. Frequently, the crisis creeps into the family through the offspring: children tend to catch up with the new culture and the new language (verbal and nonverbal) much more rapidly than their parents, do, unleashing a clash of values and styles that strikes at the core of the family.

Many family rules and values that were effective in the country of origin may prove to be less adaptive in the culture and circumstances of the country of adoption. But for a family to change its, styles and rules (some of which may have been pivotal ones) requires that the group activate delicate and complex rules about changes of rules. In many cases, families have not previously established these rules about rules and embark on the still more difficult task of developing them de novo. For instance, how may parents reach an agreement on ways of discussing contraception with their adolescent daughters raised in the United States when the norms of their culture and therefore their present rules-preclude the explicit discussion of issues about sexuality in general even within the parental couple?

The effect of the strengths and weaknesses of the family coping mechanisms in the context of the new culture is cumulative and will express itself in the course of the months, sometimes years, after the migration. Many family functioning rules will prove to be adaptive in both cultures and will not show any change. Many others will have undergone changes affecting the distribution of roles and
norms that may involve every member of the family. Finally, many other patterns will be retained at the expense of a certain degree of alienation from the extrafamilial world. Some of these patterns are maintained because they become central to the family identity, as a sort of cohesive ritual. Others are kept simply because the family has not been able to develop ways to cope with the changes in role entailed by the change of rules.

As mentioned above, in order to cope with the immediacy of migration, families frequently develop a split between instrumental and affective roles: one member usually the male-deals with (present and future-oriented) instrumental activities that entail a connection with the current environment, and the other-usually the female-centers on present and past-oriented affective activities that entail a sustained connection with the previous environment (including maintenance tasks such as letters, phone calls, etc., and mourning of what has been left behind). This rule about distribution of roles, that may be adaptive during the first few months, has the potential of a catastrophic runaway in the system if rigidly maintained. The outward-oriented member will develop autonomous adaptive traits and establish a new satisfactory network of his (her) own, and the inward-oriented one will maintain a relative isolation that becomes more marked by comparison. The autonomous member will experience the other one, relatively ignorant of the norms and customs of the new environment and with fewer new acquaintances and friends, as interfering with the instrumental need and reacts to that experience with still more autonomy. This further fences off and enhances the experience of solitude of the already isolated, past-oriented member, who will respond either by clinging more to the past or by clinging more to the other member, who, in turn, will feel dragged down by that situation and increase his (her) disengagement. The whole process escalates progressively into a major crisis of the relationship.

It is interesting to notice the power of this rule about polarization of roles. In those families in which this split of roles escalates into a divorce, it can be seen that the past-oriented member frees herself (himself) from the fixed role only after the separation; forced at first by the need to cope, she (he) soon "discovers" her (his) previously untapped abilities to deal with the present environment and to envision plan for the future, with some members representing the values of the country of origin.

One of the many reasons for the difficulty inherent in developing meta-rules about change of rules is that those processes generally take place only by connotation, or implicitly rather than explicitly, a modality that increases the chance of misunderstandings.

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6 This description, as is true for others throughout the paper, may be as valid for a Guatemalan family of low socio-educational background that has just migrated to the United States and has to bridge a major gap between cultures and languages as for a middleclass American family that migrated within the United States in response to one partner's job requirement.

7 This escalation has been called, after Maruyama (5), a deviation-amplifying process, one in which the behavior of each member in the system increases the behavior of the other, which in turn increases the behavior of the former, generating a cybernetic runaway. A scholarly discussion of the pertinence of this notion in family process can be found in Hoffman (4).
An inverse case, not infrequent in migrant families of rural origin, is that the woman will find an unskilled job in the city more easily than the man, thus challenging drastically their previous family structure and roles. In these circumstances, even though on occasion a switch of roles may take place uneventfully, much more frequently, the man will become symptomatic (depressive, alcoholic, or with somatic complaints), or a major crisis of family disorganization will ensue.

Some families manage to mourn what has been left behind and integrate it constructively into a blend of old and new rules, models, and habits that constitute their new reality. For them, the positive side of the experience outweighs the disruptive nature of the stress, and they emerge from the process—some three years after migration—with new individual and collective strengths. In other families, whatever has been left behind in the country of origin, may become increasingly idealized (making adaptation more difficult) or denigrated (making mourning and working through the loss more difficult) (see Figure 2). High levels of intrafamilial confrontations may cause the family to consult a therapist, with some members representing the values of the country of origin, and some, those of the new society. The factionalization will appear as tension and overt conflict between spouses, with the additional tug of war of offspring factions—or across generations, with the tightening of intragenerational coalitions. These tendencies build into a major interpersonal crisis or crystalize into a medical or psychiatric complaint. In fact, in order to deal with or express, accumulated stress, tension, pain, and conflict, family members will frequently activate the socially acceptable and interactionally powerful pattern of the “somatic complaint” or the psychiatric problem” and occasionally the socially less acceptable pattern of “social deviant” (e.g., as a juvenile delinquent).

V. Transgenerational Impact

Families, in their function as main socializing agents, convey not only the norms and mores of their culture at large, but also the specific styles, modes, values, and myths that constitute an ad hoc, family specific view of the world and of their own history. It comes as no surprise then to discover that any long-term delay in the family’s adaptive process will tend to become apparent when a second generation is raised in the country of adoption. Whatever has been avoided by a first generation will appear in the second one, generally expressed as a clash between generations.

This clash is maximally apparent in families belonging to cultural groups that have been ghettoized by choice or by force in their country of adoption. A neighborhood that mimics the country of origin constitutes an environment that buffers the crosscultural exposure and slows any adaptive change. If the second generation becomes socialized in that same secluded environment, the process will repeat itself with no apparent consequences. However, if the process of socialization takes place in a milieu that reflects the norms and values of the new country, what has been delayed by the first generation will take the form of an intergenerational conflict of values.
Such is the case, for instance, with families of Chinese origin living in American Chinatown. Offspring of immigrant parents who are raised in the United States and who interacted actively with the larger society through schools, mass media, and informal and formal contacts of various sources, tend to clash dramatically with their parents in terms of values, norms, and mores. In a more or less subtle way, this intergenerational clash takes place in almost any immigrant family with an intensity that shows an inverse correlation with its previous capacity to thoroughly work through the complex process of migration.

In many cases, however, the clash is intercultural rather than intergenerational. The conflict between the child’s dominant style of coping—congruent with the family culture—and the differently defined rules and boundaries within large sectors of the extrafamilial world results in a label of "delinquency" for the child's behavior and its consequences (see Minuchin et al [6, pp. 351-52]).

Preventive and Therapeutic Implications of the Model

As may have been observed throughout this description of the migratory process, each step presents its own phenomenology, its own specific types of conflicts, and its own available coping modalities. Each step implies a normal level of conflict for the family, and each has the potential of triggering family crisis. The nature of the crisis depends on the family's own style and resources, or lack of them, and the presence of environmental support, or added strain.

Several preventive implications can be derived, centered either in the preparatory stages or in those that immediately follow migration. It would be important to convey to families who contemplate migration the convenience of (a) foreseeing and anticipating periods of loneliness and rootlessness (in order to legitimize that experience and avoid any negative labeling); (b) ensuring the maintenance of contact with people from the "old place," resisting the temptation to deal "surgically" with those ties; (c) learning the language of the new country before the move (if applicable); (d) acquiring prior information about practicalities of the new reality (e.g., how does one get a doctor?) as well as the more subtle area of social rules (e.g., do people shake hands or not when greeting?); (e) ensuring some level of continuity in their own physical environment by carrying with them those meaningful objects--framed pictures, decorative objects--that were markers of their private space and placing them in the new dwelling immediately in order to generate a sense of familiarity and continuity.

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8 That clash has taken place frequently between second and third generations or Chinese-American Second generation children who were raised in the United States before the sixties usually went to Chinese-speaking, private schools and remained rather secluded in their own community. That tendency has been reversed in recent decades, and their offspring have been socialized in public schools, etc., carrying with them into the family drastically different values and bringing too the surface the long delayed conflicts for acculturation.

9 Positive injunctions, such as "make use of whatever advantage and excitement you may get out of the new circumstance," "being unknown in an unknown place will allow you to explore more freely vocational, artistic, or interpersonal areas," wise as they may be, should he used sparsely, as they convey an implicit, negative label to the lack of will too do so, corresponding to the frequent, temporary sense of meaninglessness.
With the possible exception of the first one, the middle-class bias of the points just mentioned is obvious. Most of them require the luxury of time and money, as well as a strong future orientation. Solutions that cut across social classes and deal especially with the less protected families of lower socioeconomic levels should be built into standard health protection procedures. For instance, the impact of migration could be buffered substantially by ad hoc community organizations or equivalent collective projects aimed at providing interim networks of reference in the countries of destination for families in the process of immigrating. These surrogate extended families could help immensely in terms of providing both practical expertise and emotional support during the tough first period of insertion. It should be noted, however, that the middle-class, individualistic orientation of public health policies in most countries of the Western hemisphere define these problems and policy issues as the responsibility of those who are affected by them rather than the responsibility of the society at large.

In regard to the therapeutic implications, families may explicitly relate their conflicts or crisis to their migration process, or the relationship between symptoms or conflicts and the migration will become apparent only upon the exploration by the therapist. Overall, families who are in the preliminary phase -considering migration in the beginning of the phase of compensation will frequently relate their emerging conflicts or symptoms to the migratory process. If they consult in the period immediately following the move, however, they may mention the migration in terms of context but will frequently fail to perceive a correlation between the move and their conflicts. In the period of decompensation, with the exception mentioned above, the interrelationship between their conflict and the migration will usually be established, but only in terms of a historic, triggering, causal link, as if the conflict had freed itself from its context, rather than the context still impinging upon the family's adaptive capabilities. One way or the other, the therapist should convey the view that the migratory proem is intrinsically stressful and acknowledge the fact that the presenting complaint is an understandable and not unusual by-product of it. This statement may dramatically contextualize and "depathologize" the complaint (especially the acute ones that may appear in the first or second phase) and prepares the ground for specific interventions aimed at dealing with the interpersonal function of the symptoms in that family system.

In the course of the therapist's exploration, it becomes mandatory that he or she be aware of discrepancies between him or her and the family in terms of world views and priorities for-adaptation. Let us examine several examples. Occidental cultures favor egalitarianism; that value, however, must be calibrated carefully when dealing with families from autocratically oriented cultures, such as Latino or Chinese. Middleclass values tend to heighten future orientation and mid-range or long-term projects; these values may club with the short term project orientation that is more adaptive and prevalent in families belonging to low socioeconomic strata. Occidental, middleclass values orient therapists positively toward differentiation and independence of family members; in families of other cultures, however-Southern Italians, Arabs, Chinese, among others-mutual dependence may be equated with loyalty, and any attempt at increasing the independence of members will be considered an attack on basic family values.
If the therapist is not familiar with the culture of origin of the family, he or she should explore norms of child rearing, role definitions, and habits, before attempting an intervention that may relate to those traits (see Figure 3). The two types of errors that therapists may fall into correspond closely to what in research is called "Type A errors," or "false positives," and "Type B errors," or "false negatives." In the case of the former, the therapist will incorrectly attribute to the culture traits that are really idiosyncracies of the family. In the latter case, the therapist will treat cultural traits as family idiosyncracies. To complicate things further, the therapist's own ethnocentric stereotypes may trigger a self-fulfilling prophecy: the therapist will attempt to join the family by treating the members in a certain way, assuming that that is their way, and they will respond by following that given manner, assuming that that is the therapist's way, thus "confirming the hypothesis." For instance, if the therapist acts with exceeding formality with an American family of Japanese ancestry, assuming that that is their habitual style, the group will respond hyperformally (as a family of any ancestry would react to a very formal therapist). That behavior would in turn "confirm" the therapist's assumption that they are very formal.

Part of the therapist's endeavor will consist of eliminating value judgments that are frequently attached to cultural dissonance. When comparing circumstances, customs' styles, daily habits, etc., between the two countries, areas, or cultures, it is crucial to convey at all times the attitude that things may be different but are neither good nor bad intrinsically (needless to say, this reference excludes value-loaded issues such as oppression, repression, etc.).

In the course of the first interview with the family, the therapist should establish which phase of the process of migration the family is currently in and how they have dealt with the vicissitudes of previous phases. This may constitute an invaluable guideline, providing structure for the inquiry and for the treatment process.

Within that general framework, a therapeutic program for these families will evolve. The specifics of each phase and of each case will dictate the appropriate therapeutic strategy. It may be pertinent to add that the specific culture notwithstanding, the introduction of certain amounts of future orientation and planning may be particularly useful in families stunned and confused by the experience of migration. Also, an effort toward differentiation may prove very beneficial in enmeshed families, and, contrariwise, a certain amount of dedifferentiation and intimacy may be favored in extremely dissociated families. In disorganized families, in turn, the acknowledgment and reinforcement of generational patterns may prove most valuable. Family members should also be urged and aided to establish some "private space" (sometimes a private drawer may do), dramatically absent in the habitat of immigrants, and also some "private time," especially for women totally locked into maternal/housewife role. It is valuable in all cases to explore the interface between family and

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10 Celia J Falicov and Betty M. Karrer should be credited for having raised these issues to this author (2)
community, and, if necessary, the therapist should become a guide or intermediary between the family and the extrafamilial system. In that way, "anchoring" to the new environment will be favored while the family restructures its inner reality-rules, norms, styles—to cope more efficiently with the unavoidable stress of migration.

To close this paper, it should be acknowledged that the general model underlying this presentation, rather than specific to the migratory process, can be applied to many other systemic and environmental changes to which families are exposed in the course of their life cycles. In its descriptive and pragmatic versatility lies, precisely, the power of this paradigm.

REFERENCES


FIG. 2. Idealisation/denigration splits

FIG. 3. Three cultures coexist in the therapeutic situation