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Chapter 17 Families migrating together

In

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Introduction

At the outset, when considering the impact of migration on families, it is important to differentiate between, at least, two broad categories of migration: that which is undertaken voluntarily and that which is undertaken involuntarily. Although it is impossible to claim that there is an absolute clear-cut distinction between these two categories, nevertheless, I would argue that this differentiation is important as it distinguishes two, essentially, distinctive (but interrelated) groups of phenomena. Nobody would disagree that the impact of migration on a family that decides to move to another country due to a job promotion of one of the parents, for example, will be radically different from when a family's home is destroyed by war and, as refugees, the surviving members of the family are desperately seeking a place of safety outside their own country.

Preliminary considerations

The terminology we use affects the way we perceive and respond to events. Each term is associated with a host of themes, attitudes and feelings that are unique to that specific term and different from those of other terms. Invariably, our choice of terms is not undertaken either at random or fully consciously; instead, it is a product of our epistemological assumptions, which are strongly influenced by wider societal discourses that we are

exposed to. This suggests that whenever we consider sensitive phenomena, such as those associated with migration, it is essential that we sharpen our epistemological agility in order to avoid oversimplifications or allow ourselves to be driven by unthoughtful epistemologies that lead us to inappropriate conceptualisations and conclusions. (1-4).

Migration is a term that is not referring exclusively to humans. In ecology, migration is used to designate the movement of animal groups from one geographical location to another, often, seasonally. When used for humans, migration describes the external phenomenon itself, without considering at all the impact it has on people, without referring to the persons' experience. The adjective 'forced' suggests more a direct rather than an indirect form of violence involved in deciding to migrate. Yet, as we know, there are many and varied reasons that make people to abandon their homes in search of safer and more appropriate locations, and, therefore, using the qualification 'forced' or 'not forced' is not always appropriate. Moreover, 'forced' refers, again, to the external phenomenon itself, without any allusion or indication of the human experience.

Accordingly, the term that I consider more appropriate is 'involuntary dislocation' (3-5), precisely because it is centred on the human agency. The adjective 'involuntary' qualifies the decision of a person and does not characterise the presence or absence of an external force. 'Dislocation' is an evocative term, closely associated with the human experience of uprootedness, deracination, and it cannot be confused with any general form of a seasonal migratory movement.

This chapter focuses on the involuntary dislocation of families, and it is important to clarify that there are many forms of this type of dislocation. Families feel that their continuing presence in their own country becomes untenable, whenever certain upheavals emerge that make it impossible for them to continue inhabiting the spaces they consider home. Elsewhere (4), I identified six types of upheavals that lead people to involuntarily dislocate; these are: political (including armed conflict and war), criminality, climatic, environmental, socio-economic, and what I termed 'psycho-social marginalisation'. The latter refers to various forms of social ostracization due to religious or ethnic identity, as well as due to other types of othering processes, due to deemed differences. Although each specific form of involuntary dislocation has its own unique features, nevertheless, it can be argued that all of them share some common characteristics, and it is these that this chapter addresses. However, in order to avoid vague generalisations, this chapter concentrates on one form of involuntary dislocation, i.e. when families become refugees. At the same time, much of what is discussed here is also of great relevance to the experiences of the other categories of upheavals that lead people to abandon their homes involuntarily.

Before focusing specifically on refugee families, it is important to identify some of the main effects of involuntary dislocation, in general, so that the specificities of the refugee situation become more apparent.

Onto-ecological settledness

Whenever considering the effects of becoming refugees, usually we concentrate on a cluster of consequences in relation to material losses, psychological or psychiatric

symptoms, legal implications, changes in social status and roles, etc. (6-8). These considerations are not incorrect. However, something more fundamental takes place, which is often ignored, although it is hinted at, whenever we deliberate on issues of identity. (9-12).

In effect, the concept of identity is about the sense persons have in relation to how they experience themselves as human beings and as belonging to their surroundings, human groupings, natural and human-made environment, etc. This is why, often, identity is qualified by the specific type of realm it refers to, e.g. ethnic, linguistic, age, gender, religious, cultural, geographical, social, racial, occupational, sexual orientation, etc. The sum total of all these types of belonging constitute the entirety of what we experience as our self-identity at any given time. Undoubtedly, it is this totality of one's identity that is shaken whenever one becomes a refugee, and not only one segment of it. Whenever one particular type of identity is affected by the upheavals that involuntary dislocation engenders, inevitably, it has an impact on the other facets of one's identity and, in turn, on the totality of one's self-identity.

Therefore, it is important to develop a more precise language to grasp the finer processes that take place in relation to one's identity when one becomes a refugee, and it is for this reason that I introduced the term 'onto-ecological settledness' (3-5). Usually, when we try to capture the wholeness of a human being, we refer only to 'certain parts of this totality, e.g. body and mind, personal and social, conscious and unconscious, emotional and intellectual, external and internal', (5 p40), etc. More specifically, in relation to the effects of involuntary dislocation, the focus tends to be either on external dimensions, such as

material and social or on the so-called 'internal' dimensions, such as psychological states, etc. The term 'psychosocial', with reference to refugees, attempts to capture the entirety of effects, both external and 'internal'. (13-15). Yet, it refers only to two dimensions, the psychological and social. The complexity of a human being encompasses much more than these two dimensions.

The term 'onto-ecological settledness' helps us appreciate that whenever one is dislocated involuntarily, what is affected is the overall way one's totality of self has been relating to the totality of one's environment. Another helpful term, here, is the *Umwelt*. The *Umwelt* distinguishes between the entirety of the external environment that surrounds us and it refers to that specific part of the external environment that, actually, has an impact on us. (2,16). Indeed, not every single detail of what is around us interacts with us in a way that is meaningful and making a difference. Over a period of time, persons develop a fairly settled arrangement of the specific way they relate the totality of their being with the totality of their *Umwelt*. This *Umwelt* includes all the human elements and components of the environment (e.g. people, society, belief systems, narratives, etc) as well as all the natural elements and components (e.g. animate and inanimate, landscape, animals and nature, climate, etc).

The concept of 'onto-ecological settledness' does not suggest an ideal state of perfect balance and harmony. 'Instead, it ... [refers to] the settled arrangement and pattern, which, consisting of the unique mixture of positive and negative elements, creates a certain fluency of life, familiarity, stability, and predictability—regardless of how satisfactory or unsatisfactory this state may be'. (5 p40). This type of settledness is a dynamic relationship,

'subject to change and adjustments as we and our environment keep changing in time and in response to specific events that affect us. Ordinarily, these mild alterations and fluctuations are imperceptible, as long as they remain within certain margins. Such moderate shifts do not upset our sense of continuity and stability. However, when striking external or internal changes take place, then we become aware of them and realise (in retrospect) that we did have a relatively settled arrangement that became unsettled'. (17).

Involuntary dislocation is the type of upheaval that upsets our 'onto-ecological settledness' to a considerable degree. Our settled sense of familiarity and predictability become unsettled and then four distinctive, but complementary processes tend to be activated:

- '(a) The first focuses on dealing with and limiting whatever damage the adversity may have caused,
- (b) The second addresses the immediate effects of disorientation, of the unpredictability, of the disruption of the familiar, and of what is confronted as disturbingly unknown,
- (c) The third endeavours to make sense of what has happened, and
- (d) The fourth, consequently and on the basis of the previous ones, attempts to work out novel ways of comprehending the newly created reality, our position in it, so that we can invent innovative and appropriate tasks and strategies to move forward.' (17).

This type of unsettledness with its four resulting consequences is extremely profound, and it cannot be reduced, merely, to the development of psychological or psychiatric symptoms. Its implications are much more far-reaching than the consequences of a cluster of psychological symptoms. (18). When the predictable arrangement of the 'onto-ecological

settledness' is disturbed, persons say that they are shaken to the core of their being, their whole world is turned upside down. These colloquial expressions convey the magnitude of impact that such unsettledness can produce. The persons' entire outlook and circumstances are affected and altered. In these situations, according to other colloquial expressions, people lose God or find God. What becomes unsettled is not only their 'psychological' state but also their entire belief systems, assumptions, 'internal' and 'external' relationships, attitudes towards spirituality, vocational practice, social positions, overall conceptualisations of themselves as persons in this world, meaning of life, etc. Indeed, such upheavals are, literally, life-changing.

Understanding the effects of involuntary dislocation in this broader and more fundamental way, helps us also appreciate that the consequences of such life-altering upheavals cannot possibly be limited, exclusively, to the negative ones. Instead, when the 'onto-ecological settledness' becomes unsettled, the possibility also arises not only of repairing the damage inflicted, but also of the emergence of a new and more appropriate arrangement of the 'onto-ecological settledness', which represents a further development of the person and an improvement of the previous arrangement.

It is against this framework that now we can turn to examine the specific realities that families face when experiencing involuntary dislocation. Accordingly, the questions that arise include: how to understand 'onto-ecological settledness' in the context of families? Can we identify specific forms of family 'onto-ecological unsettledness' in relation to involuntary dislocation? Is it possible to conceptualise both the negative as well as the positive effects of such upheavals?

Families: systemic hub of stability and transformation

The literature is full of worthy studies about the difficulties refugee families face. (19-24).

This chapter focuses on the specific approach developed here and, therefore, it is important to proceed by identifying some basic characteristics of families, which can be of relevance to involuntary dislocation.

Due to their composition and complexity, families consist of intricate networks of interrelationships among its members. Family members share both strong similarities and strong differences. Their differences are not limited to their age, gender and personality idiosyncrasies, but also include roles and functions, responsibilities and benefits, as well as types of interaction with persons outside the family, relatives and wider societal groupings. Their similarities often encompass a wide range of shared characteristics, e.g. language, culture, sense of loyalty, etc. Under ordinary circumstances, this combination of similarities and differences forms a compact unit of complementary strengths and weaknesses that can be fairly robust and resilient. What needs to be clarified is that the differences should not be misunderstood as implying weaknesses. Differences in human groups, not only in families, can be complementary and strengthening, or they can be the source of insurmountable conflict. It all depends how a particular group of people conceptualise and address differences.

When adversity strikes, the family compactness (which is the product of an optimum combination of similarities and differences, strengths and weaknesses) is placed under

severe strain and it becomes precarious. When the unique way the cluster of the various complementary parts of the family fit together is altered significantly, then the family is shaken by an unsettledness, comparable to the individual 'onto-ecological unsettledness' that a person experiences. Moreover, in each arrangement of each family member's own 'onto-ecological settledness' the family dimension occupies a central part. The way one's totality relates to one's *Umwelt* cannot but include every single facet of one's family, from the explicit interrelationships to the various belief systems that they may share or not share, along with all other relevant dimensions. Although it would be true to claim that the younger the person, the more central role his or her family play in forming their 'onto-ecological settledness', the family never loses its importance in relation to this type of settled arrangement, regardless of one's actual age or relationship with one's parents and siblings.

This means that all individual arrangements of 'onto-ecological settledness' of all members of a family are inexorably interconnected in a most defining and dynamic manner, the one affecting the other, and the sum total of all of them together constituting the family's own 'onto-ecological settledness'. The latter refers to the unique way the family relates to the totality of its own (family's) *Umwelt* and the *Umwelten* of each one of its members.

Accordingly, when the family is subjected to involuntary dislocation, both the family's own collective 'onto-ecological settledness' as well as those individual ones of each family member will be affected considerably.

Here, it needs to be emphasised that involuntary dislocation may affect the family's settled arrangement not only in negative terms but also in positive ones. For example, it is not

uncommon that a family's settled arrangement according to which father occupies either an inappropriately dominant position in the family or a distant and uninvolved role in it, changes radically as a result of the involuntary dislocation experiences, improving substantially his positive engagement with his family. Following such changes, inevitably, the individual 'onto-ecological settledness' of each family member as well as that of the collective one of the family itself as a whole will be altered significantly (25).

Families, like every human system and even every eco-system, in general, are subject to two opposite tendencies that operate simultaneously. One towards stability, and another towards change. (26). Too much stability in the family results in stagnation and lack of development and renewal, whereas too much change may result in chaos. The balance between change and stability always is held by families in a very fine proportion.

Accordingly, involuntary dislocation may either provide the appropriate impetus for a timely change in order to rejuvenate the family, or the resulting change may be too excessive, upsetting the delicate balance and the internal family 'onto-ecological settledness', throwing them into turmoil, resulting in disruptive alterations. Continuing with the previous example of focusing on father's role, unfortunately, it is not very uncommon that following involuntary dislocation, his position in the family changes for the worse, resulting even in further distancing, separation, divorce or even active physical abuse of family members (27).

In principle, when considering families that are not dysfunctional, the family is the most important unit that can provide the best possible support for all its members, and the optimum conditions for positive human development. The realisation of this potential, of course, depends on many factors, internal and external to the family.

The point that needs to be emphasised here is that families do not need to be perfect in order to provide this vital support to its members. Conflict is inevitable in every form of human communication. What matters is how it is dealt with. Consequently, the presence or absence of conflict in the family, on its own, is not critical in the family's ability to perform this significantly positive holding function for its members. What matters is the way conflict is addressed by individual members and by the family as a whole. It is the specific manner in which conflict is conceptualised and addressed in families that affects the degree of the individual and family 'onto-ecological settledness'. Negotiating respectfully, sensitively and fruitfully through conflict situations, in fact, deepens family relationships and strengthens the family's capacity for tolerating differences and providing containing and facilitative support for all its members.

This means that if during the various phases of involuntary dislocation, the family is exposed to improved ways of addressing conflict, then their own capacity to comprehend and deal with their own internal conflicts and with their conflict with their surrounding environment, will also be strengthened and enhanced. In effect, developing this ability is one of the important components of family resilience, which proves to be of enormous help to the entire family in coping with all the adversities engendered in involuntary dislocation.

Unfortunately, most of the experiences that families are exposed to during involuntary dislocation are not particularly positive. Armed conflict, fleeing under persecution, deracination, struggling to survive in new lands whilst confronted by mistrust, experiencing hostility and feeling unwelcomed, all these represent examples of unresolved conflict,

creating and strengthening polarisation and fostering dehumanisation. Most definitely, none of these experiences are good examples of how conflict can be addressed and resolved constructively, and this is one of the dangers of involuntary dislocation which is not sufficiently appreciated: by being exposed to destructive forms of conflict resolution, the families' own ability to address conflict becomes impaired and it deteriorates.

This observation indicates the importance of the complexities involved in providing appropriate assistance to families during their involuntary dislocation process. What matters is not only what is offered to them, materially and/or therapeutically, but also the type of example that they are exposed to, in terms of how we interact with our colleagues and others, and how we address conflictual situations, regardless of their magnitude or insignificance. Refugee families often speak with admiration about positive models of conflict resolution that, unwittingly, they are were exposed to, even when they do not address these incidents using explicitly the terms of conflict resolution. Therefore, particular attention needs to be given to the subtleties of the multiplicity of impacts that our ways of relating and behaving have on the refugee families we work with.

Families: multiple forms and beneficial effects

The cardinal rule that needs to be remembered is that, insofar as families represent the best possible source of healing for all its members, they deserve particular attention. Investing in strengthening a family as a whole, we also assist all of its members, not only at that given point in time, but also for the years to come. In principle, it is better to help the family to

help its members than help an individual family member on his or her own, if this were to jeopardise her or his family belonging and impact negatively on the family cohesion.

Needless to say, families have different forms, structures and styles, and it is of paramount importance to respect each family's own uniqueness. Although some idiosyncrasies with respect to family composition, patterns of relating, etc may be a product of specific ethnic, cultural, religious and other traditions, this is not always the case. Invariably, there are also families with atypical styles of being, of interrelating and of interacting, which are not due to identifiable collective forms of relating, but are unique to that specific family as a result of their own distinctive history. There are many forms of such styles that may appear to us as odd, e.g. when a man may be called an 'uncle' although he is not, in fact, a blood relative, but a neighbour and a close family friend for years; or when we are given hospitality by a family far beyond our expectations, depriving themselves of precious food to give to us, etc.

In all these unexpected situations, it is important that our own mind remains open and we do not rush into quick interpretations.

During involuntary dislocation, and under relatively optimum conditions, families can offer a remarkable array of beneficial effects to its members. Returning to the four processes that are activated during the 'onto-ecological unsettledness' that is generated during involuntary dislocation, families can provide substantial assistance with all four of them. More specifically,

- (a) The presence of other family members who also experienced the same adversities, can ease considerably the various forms of damage inflicted, limiting their negative effects in the best possible way.
- (b) The continuation of a relatively intact segment of the family structure, even despite human losses which the family may have sustained during the dislocation process, provides a vital antidote to the disorientation, unpredictability, the disruption of what used to be familiar, and the effects of being confronted by the disturbingly unknown. Even if, at least, two members of a family remain together, they can re-enact the styles of relating, recount the stories that bind them together, and recreate the familiarity that families produce. It is not accidental that both family and familiar have the same etymological root. In Latin, familiaris refers to anything belonging to the family. Familiaris, in classical Roman society, was used to refer to the domestic servants, i.e. those persons who belonged to the family and were closely and intimately associated with the family for a very long time, and were well acquainted and accustomed with the family's ways of interacting and being and thinking, etc. It is this sense of familiarity and predictability that provides the sense of continuity that enables family members to withstand the unpredictabilities that involuntary dislocation heaps onto them.
- (c) Making sense and giving meaning to the disruptions brought by the involuntary dislocation is another important function that the family performs for all its members, even if each member has an idiosyncratic variation of this meaning. Research has shown that making meaning of an adversity is one of the most significant factors not only of coping with it, but also in developing further and thriving (28-31).

(d) Finally, it is within a supportive family context that individual members can find creative ways of locating themselves meaningfully in the new realties, which involuntary dislocation imposes, and develop novel and appropriate tasks and strategies to move forward. (32). The security of family support can provide the required framework of balancing the old with the new. The family can enable its members not to get overwhelmed by the unpredictability and unfamiliarity of the new, and to maintain the right balance between not ignoring or underestimating the adversities, but also not to over-estimate them and their destructiveness. Learning from their experiences, however adverse these may have been, is another capacity of a family to digest what happened so it can plan forward based on lessons learned.

Often, we hear very clearly from refugee families that as long as they remain together, they are confident that they can survive any type of adversity, regardless of its severity, and even make the best of it. This is not an abstract and unfounded claim. It touches on the positive potentiality that families have in transforming adversity into creative new directions. (25).

In addition to the four consequences of involuntary dislocation that were identified above, families of refugees can be exposed to specific types of dilemmas and complexities that test the limits of their resourcefulness. Below, I examine a few:

Relationships with the outside world:

As a human system, the family, like all other eco-systems, has permeable boundaries that are used in a highly sensitive and flexible manner to ensure the maximum possible benefits for the family at all times and under all possible conditions. Both excessive permeability or excessive insularity are detrimental. Ordinary, reasonably functioning families succeed in sheltering their members sufficiently from obnoxious influences from the outside world. Families, as long as they are not dysfunctional, have a very delicate filtering mechanism which distinguishes between the toxic influences, which it keeps out, and the beneficial inputs and interactions, which it allows to enter the family. This is a very fine process that, under ordinary circumstances, takes place almost unnoticed. During each phase of the involuntary dislocation, this process acquires additional significance in minimising the harmful external effects and maximising the helpful and advantageous ones.

Throughout the duration of the involuntary dislocation process, it is essential that the family retains appropriate contact with the outside world, not only with the various humanitarian agencies, organisations and services, but also with the appropriate individuals and groups that can provide crucial assistance to the family at each given point in time. Distinguishing between the helpful connections and the harmful ones is not easy, especially when one is outside the context of one's culture, familiar environment, etc. Helpful contact with the outside world provides the lifeline of the family and ensures its survival, whereas harmful contact weakens the family's resilience and may even destroy the family.

Although parents often tend to lead this vital process of regulating the permeable boundaries of the family in relation to the outside world, children also contribute considerably to this process. Moreover, it is not uncommon that whenever parents are

overwhelmed by the involuntary dislocation experiences and are unable to maintain the family boundaries properly, children step in and take over as leaders of this process.

A young Afghani refugee comes to mind who, when his father was experiencing mental health problems and his mother was unable to communicate due to language difficulties, he took over as the family protector, controlling who comes to the house and for how long, and who talks from the family to what authority. It was remarkable how this 17 year-old young man effortlessly stepped into that role, whilst also maintaining and protecting his respectful relationship with his father and mother. It was an admirable balancing act that seemed to come naturally to him.

Internal family dynamics and external pressing needs:

During the adversities of involuntary dislocation, families are at risk of overlooking their own internal family dynamics, focusing on surviving the external pressing needs. This is an extremely common phenomenon. It is understandable and most appropriate that the emergency priorities of survival enlist all family members to concentrating all their efforts in dealing with the dangerous events and circumstances that threaten directly the family and its members. However, if the family slackens its vigilance and loses sight of its own internal inter-relationships and ways of functioning, they may succeed in fending off the external dangers but they may succumb to the negative effects of the internal family dynamics.

An example of this typical danger is that of a Syrian family who succeeded remarkably in surviving the civil war in their country, in crossing into Turkey, in surviving impossible odds

during three very difficult years in Turkey, living in limbo and under very adverse conditions, then crossing over to the Greek island of Samos, then moving up to Europe, finally managing to reach the UK. Their achievement was astonishing. They are a middle class family who accomplished almost the impossible, remaining intact as a family: father, mother, three daughters and a son. Then, when everything looked bright and when all of them started considering their future, their elder daughters planning to get to university and both parents preparing to resume practising their profession in the UK, the bombshell exploded: the parents announced that they were splitting up and were pursuing divorce proceedings. All staff working with them were shocked. Nobody believed that, after going through all those difficulties together and having succeeded against all odds, now they were going to break up as a family. Evidently, with their entire focus on external coping with adversities, they overlooked their own internal family dynamics, which led to the breakdown of the parental relationship. The children, especially the younger ones, were inconsolable, pleading with their parents to reconsider their decision, but the parents did not change their mind and they went ahead with their separation.

Despite all the successes in coping with external pressures, neglecting or minimising the importance of their own internal family dynamics, cohesion, difficulties and conflicts can prove fatal.

A variation of the above occurs when the attention of family members is not focused on their own survival but is diverted to issues of external reality, to preoccupation with political realities, legal complexities of seeking asylum, etc; when this happens, family members again overlook or are unable to deal with their own needs as a family. This often results in

neglecting either internal relationships or the specific needs of a particularly vulnerable or traumatised member (or members) of the family. Again, this may have dire consequences.

Family divisions during involuntary dislocation:

During the process from dislocation to relocation a family member or family members may be forced to separate from the rest of the family. This separation (regardless how long it may last) often leads family members to experiencing their ordeal in radically different ways. The lack of shared experiences and the discrepancy in their experiences will affect the family and its members to varying degrees, and it requires specific and sensitive attention.

A variation of the above happens when, due to their different roles, positions and vulnerabilities as well as accidental circumstances, different members of the family experience the process from dislocation to relocation significantly differently from other members, even if they remain together throughout their ordeal.

Both variations create new divisions, new roles, new identities and new imbalances within the family that may weaken the family cohesion and impair the healing function of the family.

The Adversity Grid

As it has been discussed above, involuntary dislocation creates a multiplicity of changes in many different spheres. Yet, the tendency is to oversimplify things and narrow the impact to

a set of psychological difficulties and even psychiatric symptoms. The psychiatric category of Post Traumatic Stress Disorder (PTSD) has dominated the field for decades in a hegemonic way that has masked all other consequences that the exposure to adversity has. It is for this reason that I developed the 'Adversity Grid'; previously, I termed it 'Trauma Grid' (33). The Grid provides a framework that identifies three categories of effects, of consequences, of responses to adversity by individuals, families, communities and by the wider society/culture.

[Table 17.1 about here]

The Adversity Grid is perfectly suited to provide the appropriate complexity to understand the impact of involuntary dislocation on families. The three categories of consequences of adversities are described in the following subsections:

1. Negative responses to adversity:

The tendency is to identify, almost exclusively, these negative responses to adversity because these are the ones that are considered to form the field that society wishes to address, redressing the damage inflicted by the adversity. This is understandable. Following any catastrophic event, such as involuntary dislocation, the focus is on identifying the losses and destruction and the ways people have suffered and were affected negatively. The needs assessment exercises are geared, precisely, to specifying such damages to the affected people and their environment. This is correct and appropriate. However, this is only one category of the consequences of these adversities. In addition, at least, we need to ascertain what existing strengths individual family members and the family as a whole were able to

retain, despite their exposure to adversity. This enables us to have a more realistic picture of the totality of the situation, in order to formulate more suitable interventions.

Then, we need to observe that not all negative responses are of the same type, severity and strength. Thus, it is imperative to identify various forms and degrees of negative responses. The most severe one is when people develop actual psychiatric disorders, and PTSD is, indeed, the most frequently identified one. However, not everybody develops PTSD as a result of being exposed to the adversities of involuntary dislocation. Without entering into the debates about the percentages of the affected people who develop PTSD, the specialist professional literature seems to agree that it is not a large proportion (not exceeding 10%). Moreover, we need to consider the duration of such conditions. Undoubtedly, PTSD is a fairly disabling condition, making a person unable to function properly in all situations. As it is known, PTSD consists of a cluster of various specific symptoms, e.g. intrusion, avoidance, alterations of cognition and mood, etc. This means that there are also many persons who have different combinations of these or other similar psychological symptoms and who do not suffer from the precise cluster of the prescribed symptoms that constitutes PTSD or any other psychiatric disorder. Therefore, this should be considered as forming another category of negative responses to adversity and which is less severe than a psychiatric disorder. This subcategory of negative responses I call 'Distressful Psychological Reactions'. In effect, these can be called psychological as opposed to psychiatric symptoms and although they may be equally negative, their negative effect would be less severe on the persons' daily functioning.

The least severe sub-category of the negative effects I call 'Ordinary Human Suffering'. This

reminds us that people can be affected negatively in ways that cannot be characterised either as psychiatric or psychological; instead, taking these effects into their own stride, although they still experience them as negative, the affected persons give them meanings within the context of life misfortunes, conceptualising them within systems of meaning such as political, religious, ideological, etc or even existential. People may say that it was 'Allah's will' or that 'Allah is punishing me' or 'testing me' or that it was a life hardship that they had to endure, etc. They are not saying that these effects are positive, but they are experiencing them as part of the tragedies that happen in life.

2. <u>Unchanged responses to adversity</u>:

Regardless of whatever negative ways every person and family respond to adversity, to varying forms and degrees they also retain some of their previous strengths: abilities, qualities, characteristics, behaviours, functioning, relationships, etc. It is essential to discern this category because, under the distorting effects of inappropriate epistemologies which are developed in these adverse circumstances, the exclusive focus tends to be on the negative effects, forgetting that always people also succeed in holding onto some previous forms of positive functioning. Moreover, it is imperative to remember that our systems of aid are based exclusively on the negative effects. We all know that in order for any form of assistance to be offered to the affected persons, they need to be identified by some specific form of vulnerability. Therefore, addressing their needs, in effect, means identifying the negative ways they were affected by the adversity.

This conceptualisation of 'the problem' leads to interventions that are geared exclusively to rectifying the damage inflicted, to fixing a problem, to repairing a malfunction. Such a

conceptualisation ignores the totality of the impact adversity has on individuals and families and it ignores their strengths.

Within the category of 'Unchanged', I differentiate two subcategories: the negative and positive ones.

Not all the difficulties which persons and families experience following adversity are a direct or even indirect result of their exposure to adversity; some of these negative ways of functioning existed even before the emergency or displacement. For example, persons may have suffered from a physical or mental ailment which continued unchanged after they were exposed to involuntary dislocation and was not caused by it; or, families were dysfunctional well before their involuntary dislocation and their ordeal did not alter their dysfunctionality at all, either positively or negatively.

In addition to the 'negative unchanged', there are the 'positive unchanged', and these are of extreme importance because these are the ones that constitute the resilient facets of a person or a family. Indeed, resilience, according to physics (where the term originates from), is the ability of a body to retain its previous positive functions despite its exposure to adverse conditions. Resilience has become a very popular term in recent times, and there is a great deal of confusion as to what it means precisely. Defining it in this way, i.e. as the retained positives (16, 33), offers a tangible and operational way of identifying the specific resilient functions, qualities, characteristics, relationships, behaviours and abilities of a person or a family, without resorting to idealised and intangible portrayals that refer to vague and unspecific states of being.

Identifying such positive facets which were retained despite the exposure to adversity, helps us ascertain, in a more reliable and specific way, the complexity, uniqueness and totality of the actual state of the persons and families that we wish to assist during their involuntary dislocation process. Appreciating their retained strengths and weaknesses, which were not caused or affected by the involuntary dislocation, is crucial in completing a comprehensive diagnostic appraisal of the family.

3. Positive responses to adversity:

This category is often neglected. In addition to the negative and unchanged responses to adversity, every person and family who are exposed to adversity also gain something, and to some degree from these experiences. The saying in most languages and cultures 'whatever does not kill you, makes you stronger' conveys the reality that the experience of devastating events (here, that of involuntary dislocation) also has a transformative power. The enormity of such experiences shakes people to the core of their being, making them question and review almost every aspect of their life. This is the impact of 'onto-ecological unsettledness'. The fact that they lost so much, that they came so close to death, that they witnessed extreme forms of human behaviour both 'evil' as well as 'good', that they saw their life efforts, plans and ambitions being destroyed, etc., makes them pause, wonder and reflect. It is then that they begin to view life differently, re-evaluating their fundamental *Weltanschauung*, their priorities in life, their values and beliefs, their very identity, etc.

This is why I have called these types of responses to adversity 'Adversity-Activated Development' (AAD), because they refer to those positively transformative aspects of

development that are activated specifically by the very exposure to adversity. There are endless examples of AAD in real life in individuals and families, altering their previous individualistic style of life by appreciating the importance of human contact and support; widening and deepening the scope of their previous life-goals, correcting wasteful and meaningless pursuit of goals that proved worthless, leading to the adoption of more meaningful life goals.

It is difficult, indeed, to consider anything positive when one is struck by any severe form of adversity, such as involuntary dislocation, and this is the actual problem. Under the weight of all the losses and painful experiences, it is almost impossible to even contemplate that anything good can possibly come out of such catastrophic events. However, if we do not consider the complexity, uniqueness and totality of a person and of a family in these difficult times, we risk skewing our perception of who they are, what they are capable of doing, with detrimental effects on our interventions.

The Adversity Grid provides a helpful framework to remember the complexity, uniqueness and totality of all persons and families affected by involuntary dislocation, thus counteracting the unhelpful polarisations and generalisations. In this way, the Grid offers an effective antidote to the ill effects of the traditional trauma discourse, which views adversity survivors exclusively as helpless victims. The Grid enables a comprehensive assessment of families and family members, which supplements all other forms of our diagnostic endeavours, thus enabling us to formulate interventions which are based on a more sound and informed foundations.

Final comments

The role of community support is of paramount importance. Appropriate support from the extended family and community strengthens the involuntarily dislocated families and reduces the negative effects. However, we need to be extremely sensitive in terms of considering which is the appropriate community for each family, and, for that matter, each family member. It is always strongly recommended that we collaborate with the family in selecting their community of choice and not to assign to them a community that is assumed by us or others to be 'their community'. For example, for a Kosovar Muslim family, is 'their community' other Balkans or other Muslims? For a Christian Arab refugee family, is 'their community' other Arabs or other Christians? These are tangible choices, but if we deleve into the complexities of each refugee family, we will discern many unclear complexities with regard to which is their 'natural' community.

The role of spirituality and religious affiliation is of vital importance for a lot of families, at all times, but especially during the periods of dislocation and relocation. Continuation of religious rituals and practices is a most crucial part of a family's 'onto-ecological settledness', and finding adequate means of restoring them can be immensely therapeutic for them. We should endeavour to be sensitive to families' spirituality and religious affiliation and not to minimise their importance. Instead, we should enable each family to have access to their preferred spiritual/religious community. Community rituals, especially those that are also connected with spiritual meaning can be extremely effective in strengthening the individual family members and the family as a whole.

Traumatising experiences tend to freeze time. It is imperative that we understand these families, and also help them understand themselves, *diachronically*, considering their past, present and future. The fluidity that is developed in the process of appreciating the changes in time enables these families to avoid encapsulating themselves within a victim identity.

It is of paramount importance to use reliable, sensitive and professional interpreters. (34). It is essential that we endeavour, to the best of our abilities, to develop a good understanding with the interpreters we use; ideally, we should develop a good and ongoing relationship with them so that we work with them as co-workers, i.e. that they understand our goals, methods and overall approach. We need to be particularly sensitive in selecting our interpreters, mindful of issues of ethnicity, language sub-groups, culture, religion/spirituality, gender, age, LGBT, social class, and all other relevant to the situation parameters.

Difficulties with regard to legal status is one of the most significant and defining realities in working with refugee families. Often their own preoccupation with these difficulties is so overwhelming that they cannot focus on any other issues. It is essential that they have sound and reliable legal representatives and we should endeavour to facilitate, to the best of our abilities, good relationships between the refugee families and them.

Attention should be given to assisting the families to have realistic expectations in relation to all facets of their new lives; unrealistic expectations have a harmful effect on them. We need to be extremely sensitive to discern between realistic and unrealistic expectations in

relation to each given goal and context. Expectations form a particularly subtle part of a family's 'onto-ecological settledness' and it is often overlooked by all concerned and, therefore, we should be watchful not to neglect it.

Finally, a very important differentiation that we need to keep in mind throughout our work with these families is between distress and disorder, as the 'Adversity Grid' suggests. Not all forms of distress are types of disorder; not all distress implies dysfunctionality. We need to appreciate that for the majority of these families, their current situation can be understood in terms of being normal responses to abnormal circumstances. It is very easy to psychologise and even pathologise their suffering. We should be extremely vigilant to avoid both.

References:

- Papadopoulos RK. Refugees, home and trauma. In: Papadopoulos RK, editor.
 Therapeutic Care for Refugees. No Place Like Home. London: Karnac, Tavistock Clinic Series; 2002.
- 2. Papadopoulos RK. Trauma and Umwelt. An Archetypal Framework for Humanitarian Interventions. In: Maercker A, Heim E, Kirmayer LJ, editors. Cultural Clinical Psychology and PTSD. Göttingen: Hogrefe; 2018.
- Papadopoulos RK. Home: Paradoxes, complexities, and vital dynamism. In: Bahun S,
 Petrić, B, editors. *Thinking Home: Interdisciplinary Dialogues*. London: Bloomsbury;
 2018.
- 4. Papadopoulos RK. *Involuntary Dislocation. Home, Trauma, Resilience and Adversity- Activated Development.* London and New York: Routledge. In press.

- Papadopoulos RK. Failure and Success in Forms of Involuntary Dislocation: Trauma,
 Resilience, and Adversity-Activated Development. In: Wirtz U. et al, editors. *The Crucible of Failure*. Spring Publications; 2015.p.25-49.
- 6. De Haene L, Rousseau C, Kevers R, Deruddere N, Rober P. Stories of trauma in family therapy with refugees: Supporting safe relational spaces of narration and silence. Clinical child psychology and psychiatry, 2018;23(2):258-278.
- Measham T, Guzder J, Rousseau C, Pacione L, Blais-McPherson M, Nadeau L. Refugee children and their families: Supporting psychological well-being and positive adaptation following migration. Current problems in pediatric and adolescent health care.2014; 44(7):208-215.
- 8. Weine SM. Developing preventive mental health interventions for refugee families in resettlement. Family process. 2011;50(3)410-430.
- 9. Abdi AM. In Limbo: Dependency, insecurity, and identity amongst Somali Refugees in Dadaab camps. *Refuge: Canada's Journal on Refugees*. 2005;22(2):6-14.
- 10. Groen SP, Richters A, Laban C J, Devillé WL. Cultural identity among Afghan and Iraqi traumatized refugees: Towards a conceptual framework for mental health care professionals. Culture, Medicine, and Psychiatry. 2018;42(1):69-91.
- 11. Fukuyama F. *Identity: The Demand for Dignity and the Politics of Resentment*. London: Profile Books; 2018.
- 12. Zetter R. Labelling refugees: Forming and transforming a bureaucratic identity. *Journal of refugee studies*.1991;4(1),39-62.
- Papadopoulos RK. Working with Bosnian medical evacuees and their families:
 Therapeutic dilemmas. Clinical Child Psychology and Psychiatry. 1999;4(1):107-120.

- 14. Papadopoulos RK. Refugee families: issues of systemic supervision. *Journal of family Therapy*. 2001;23(4):405-422.
- 15. Papadopoulos RK. Refugees and psychological trauma. In: Leo G, editor. *Psychoanalysis, collective traumas and memory* places. Lecce, Italy: Frenis Zero Press; 2015.p.225–246.
- 16. Papadopoulos RK. The Umwelt and Networks of Archetypal Images; a Jungian approach to therapeutic encounters in humanitarian contexts. *Psychotherapy and Politics International*. 2011:9(3):212-231.
- 17. Papadopoulos RK. The Traumatising Discourse of Trauma and Moral Injury. Distress and Renewal. In: Papadopoulos RK, editor. *Moral Injury and Beyond: Understanding Human Anguish, Philosophy and Spirituality*. London and New York: Routledge. In press.
- 18. Kirmayer LJ. Failures of imagination: the refugee's narrative in psychiatry. *Anthropology* & medicine. 2003;10(2):167-185.
- 19. Dalgaard NT, Montgomery E. Disclosure and silencing: A systematic review of the literature on patterns of trauma communication in refugee families. Transcultural psychiatry. 2015; 52(5):579-593.
- 20. Dalgaard NT, Todd BK, Daniel SI, Montgomery E. The transmission of trauma in refugee families: Associations between intra-family trauma communication style, children's attachment security and psychosocial adjustment. Attachment & human development. 2016;18(1):69-89.
- 21. Papadopoulos RK. Working with families of Bosnian medical evacuees: therapeutic dilemmas. Clinical Child Psychology and Psychiatry. 1999; 4(1):107–120.
- 22. Papadopoulos RK. Refugee families: Issues of systemic supervision. Journal of Family Therapy. 2001; 23(4):405–422.

- 23. Sveaass N, Reichelt S. Refugee families in therapy: from referrals to therapeutic conversations. Journal of Family Therapy. 2001;23(2)119-135.
- 24. Voulgaridou MG, Papadopoulos RK, Tomaras V. Working with refugee families in Greece: Systemic considerations. *Journal of Family Therapy*. 2006;28(2)200-220.
- 25. Papadopoulos RK, Gionakis N. The neglected complexities of refugee fathers.

 *Psychotherapy and Politics International. 2018:16(1).
- 26. Bateson G. Steps to an ecology of mind: Collected essays in anthropology, psychiatry, evolution, and epistemology. New York: Ballantine Books; 1972.
- 27. James K. Domestic violence within refugee families: Intersecting patriarchal culture and the refugee experience. Australian and New Zealand Journal of Family Therapy. 2010;31(3):275-284.
- 28. Bonanno GA. Meaning making, adversity, and regulatory flexibility. *Memory*; 2013;21(1),150-156.
- 29. Garrison MB, Sasser DD. Families and disasters: Making meaning out of adversity.

 In: Cherry KE, editor. *Lifespan perspectives on natural disasters*. New York, NY: Springer; 2009. p. 113-130.
- 30. Park CL, Ai AL. Meaning making and growth: New directions for research on survivors of trauma. *Journal of Loss and Trauma*. 2006;11(5): 389-407.
- 31. Ryff CD. Self-realisation and meaning making in the face of adversity: A eudaimonic approach to human resilience. *Journal of psychology in Africa*. 2014;24(1)1-12.
- 32. Rousseau C, Measham T. 2007. Posttraumatic suffering as a source of transformation: A clinical perspective. In L.J. Kirmayer, R. Lemelson, & M. Barad (Eds.). Understanding trauma: Integrating biological, clinical, and cultural perspectives. Cambridge: Cambridge University Press; 2001.p.275-293.

- 33. Papadopoulos RK. Refugees, Trauma and Adversity-Activated Development. *European Journal of Psychotherapy and Counselling*. 2007;9(3):301-312.
- 34. Papadopoulos RK. Narratives of translating-interpreting with refugees: The subjugation of individual discourses. In: Raval H, Tribe R, editors. *Working with interpreters in mental health*. London: Routledge;2003.p.238-255.