

Working with Arab/Muslim Americans: Cultural Competency in Mental Health

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Who are the Arabs?

- The Arab American population in the United States is currently estimated to be nearly 3.5 million people.
- Over 250 million Arabs living in 22 different countries.
- 63% U.S. born; 80% of Arabs are U.S. Citizens.
- Concentrated in 10 states, particularly Dearborn, Michigan; California and Brooklyn, NY.
- Mostly Lebanese, Syrian, Palestinian and Egyptian.



Arab Americans in New Jersey

- Counties with largest Arab population: Passaic, Bergen, and Hudson.
- Common for immigrants to live within ethnic enclaves; daily life: language, food, religious services within their communities.
- 88% of Arabs are bilingual.
- In any immigrant population, approximately 50% of the migrant people are women & girls.



Religion vs. Culture

- Islam is a religion; 2nd largest in the world (Indonesia, Pakistan), US 6-8 million (U.S. State Department, 2001).
- Muslims in US are divided between immigrants and non-immigrants with only 26 % being Arab.
- Common misperception: all Arabs and Arab Americans are Muslims.
- Despite connection between Arab culture and Islam, they are not the same.
- Islamic values and traditions have an impact on the Arab identity.



The Invisibility of Arab Americans

- There is no official recognition Arab Americans identity within the US classification system.
- Are Arab Americans white? Skin color varies anywhere from fair skin/blue eyes to dark skinned/brown eyes.
identify as 'white' *some choose to
others do not.



Characteristic of Arab Societies

- Majority of our clients are Muslim.
- Common collective experience: national disasters, rejection from West, political conflict-Palestinian/Israeli conflict.
- Strong need to identify.
- Families torn apart by deportation, ongoing trauma, misunderstandings/assumptions post 9/11.



Common Issues Among Arabs

- Acculturation
- Discrimination
- Parenting in the West
- Social isolation
- Generation gap
- Loss of honor/shame to family
- Language barriers

Customs of Muslim Arabs

- Opposite gender physical contact limited: *Eye contact
 - *Handshaking
 - *Personal space
- Respect for modest dress
- Communication through:
 - *Metaphors
 - *Speak to those only within the community

The Arab Family

Collective Identity

- Individual's main function is to be in service of the family.
- To Maintain family honor and reputation within society is central to Arab psychology.
- Commitment to family's well-being required
- Family is the main source of support for the individual (economic/emotional/social).

'foster families' for isolated members

The Arab Family

Patriarchal Structure

- Father- “Head of the family”-authoritarian
- Gender differences in Muslim societies tend to remain strong (social structure is male dominant)
- Hierarchical stratification based on age and gender, subordination of woman and children.
- Mother entrusted with child rearing tasks under the father’s authority

*endure marital problems fear of stigma/losing children.

* role is contingent on being married and rearing children (boys).

The Arab Family

Extended Family

- The extended family members are highly valued, are expected to be involved, and are consulted in times of crises.
- Personal privacy within the family is virtually nonexistent.
- During interviews, expect family members to answer for the client.
- Involvement of nuclear and extended families is beneficial to gaining trust.

The Arab Family

Extended Family

- The group or family identity remains the focus and the individual remains embedded in the collective identity.
- Working with Arab Americans/Muslim Arabs, practitioners will come in contact with the family and need to reconsider what otherwise might be seen as: *over involvement, over protection, blatant codependency, or enmeshment.*

The Arab Family

Values

- The average size of an Arab family is 5.8 persons, while western family size is 2.8 persons (Simadi, 2000).

*May lead to more interaction in relationships among family members which may be reflected in the functions, tasks & laws of the family, which in turn may affect the family values.

- Role of children is to receive discipline and to assume adult economic responsibilities early on.



Traditional Marriage

- Marriage is seen as a contract joining two families.
- Parents traditionally arrange marriage according to family interest and maintaining social status.
- These patterns have changed & majority are choosing their own partner with parents consent.
- Interfaith marriages are strongly prohibited.
- Typically, parents encourage their children to marry in their early twenties; as one ages, marital prospects decrease.

Marriage

Islamic Rulings

- Exchange between the bride's guardian (male) and the bridegroom.
- Polygamy; even though is sanctioned by Islam under certain conditions, is rare in reality.
- Muslim women cannot marry non-Muslim men.
- Islam has given rights and official social standing to women that was non-existent previously.



Divorce

- Divorce patterns are affecting the status of women.
- Most Christian sects do not allow divorce.
- Islam allows it, though described as most hated of lawful practices.
- Divorce rate varies: recently suggesting a rise, often occurring in 'engagement period'.



Views of Mental Health

- Unfamiliar with the idea of therapy.
 - *No word in the Arabic language other than psychiatrist.
- Negative and mistrustful feelings.
- Use of metaphors and proverbs to explain their feelings.
- Prefer to be treated by a medical provider of the same sex.
- Therapist is viewed as the expert.
 - *Often have to be corrected in thinking of therapist as a doctor.

Attitudes & Barriers Towards Mental Health Care

- Social stigma
- Clinicians' lack of awareness of cultural and religious issues.
- Language barrier
- Apprehension towards unfamiliar authoritarian figures.
- Mental illness reflects on the reputation of the whole family; threatens family honor.
- The use of religious leader's (Imams/priests) as counselors is more culturally acceptable. (e.g. case S.A.)



Somatization of Affective Disorders

- Somatic complaints is a common presentation: emotions are expressed in physical symptoms.
- Prefer medical treatment, e.g. prescribing pills/giving injections, rather than talk therapy.
- Emotions described through physical symptoms: e.g. Depression- "A dark life."/ "My heart fell down."
- Depression is viewed as self-absorption and narcissism.
- Women in particular tend to internalize public attitudes and become embarrassed/ashamed that they often conceal symptoms and fail to seek treatment.

Suicide

- Strongly condemned in the culture and religion.
- Direct questioning regarding suicide is not necessarily reliable.
- Better question: "Do you wish God would let you die?"



Limits and Boundaries

- Fluid conception of time- strict time keeping is not natural in the Arab culture.
- Professional (western) framework of boundaries and time settings must be maintained.
- Therapeutic relationship needs to be more personalized; e.g. gift exchange.
- Do not use family members as interpreters



Culturally Sensitive Guidelines

- Be sensitive to larger political reality.
- Systemic view of individual within context of family.
- Caution against Western bias that reinforce values of independence and autonomy.
- Remember: Western view of enmeshment, over protection, over involvement, and codependency are viewed as familial duty.
- Do not view difficulty with self-disclosure as resistance. Arabs have trouble speaking to someone outside the family about personal problems, it is viewed as disloyal or as a weakness.



Effective Interventions

- Provide directions and explanations.
- Family therapy works best
- Address the father first as head of the family.
- Utilize Psycho-education
- Keep length of treatment short and directive.
- Direct instructions and homework assignments are best to keep family/individual involved in treatment.

Services in New Jersey

- Mental Health Association in Passaic County: Arab-American Mental Health; (973) 478-4444 ext. 12
rsalloum@mhapc.com
- Support center for victims of domestic violence.
WAFA HOUSE; wafahouse_inc@yahoo.com