

Using the Genogram to Facilitate the Intercultural Competence of Mexican Immigrants

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Hispanics are the fastest growing ethnic group in the United States. Sixty-three percent of all Hispanics self-identify as Mexican, and 41% of these individuals were born outside of the United States. The purpose of this article is to introduce mental health professionals to the use of the genogram as an intervention to help Mexican immigrants identify traditional resources that they can modify or adapt for success in a new culture. Suggestions for constructing a genogram with Mexican immigrants and Spanish translations of basic genogram jargon are provided.

Keywords: *genogram; Hispanic; multicultural counseling; inter-generational families; immigrants*

According to the 2005 American Community Survey (U.S. Census Bureau, 2005), Hispanics now total 14.5% of the American population. Although the Hispanic population is heterogeneous and encompasses individuals from different countries, the majority of this group self-identify as Mexican (63%). Almost half (41%) of United States' residents who identify as Mexican or Mexican American were born outside of the United States and immigrated to this country for one or a combination of the following reasons: (a) to improve their socioeconomic condition, (b) to escape political unrest or oppression, and/or (c) to reunite with family or friends who immigrated before them (Santiago-Rivera, Arredondo, & Gallardo-Cooper, 2002).

The optimism that pulls many Mexican immigrants to the United States is often diminished as they experience the stressors related to leaving their home country and navigating a new culture. An exponential growth of relevant literature has resulted in several models of acculturation and its accompanying challenges. Marginality theory posits that people who transfer to a new culture can neither discard

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their native culture nor fully adopt the new one and are thus relegated to the margins. Biculturalism is more optimistic and suggests that individuals can embrace both the old and the new cultures equally and successfully. (For a more detailed account of acculturation theories, see Falicov, 1998.)

Regardless of the theoretical underpinnings, there is no dispute that acculturation involves change (Williams & Berry, 1991). Recent studies have found a positive relationship between time spent in the United States and the prevalence of a mental disorder (Alegría et al., 2007; Escobar, Nervi, & Gara, 2000; Grant et al., 2004). However, access to and utilization of mental health services is low for the Hispanic population (Bernal & Sáez-Santiago, 2006). Although there is considerable intragroup diversity among Latinos, they share certain similarities that contribute to their high-risk status, including (a) poverty, (b) substandard housing, (c) high proportion of single-parent families, (d) substance abuse, (e) acculturative stress, (f) prejudice, (g) relatively low educational status, and (h) "a history of conquest, oppression, defeat, and struggle for liberation" (Bernal & Sáez-Santiago, 2006, p. 123).

The stressors that Mexican immigrants experience are multiple, but perhaps the most noteworthy is the loss of the extended family (Grzywacz, Quandt, Arcury, & Marín, 2005; Smart & Smart, 1995). The cultural value of *familismo* (familism) refers to the significance given to the family, including the extended family, and is considered to be one of the most important culture-specific values of Hispanics (De Snyder, Díaz-Pérez, Maldonado, & Bautista, 1998; Fontes, 2002; Sabogal, Marín, Otero-Sabogal, Marín, & Pérez-Stable, 1987). "*Familismo* stems from a collectivist or allocentric worldview . . . manifested in a shared sense of responsibility to care for children, provide financial and emotional support, and participate in decision-making efforts that involve one or more members of the family" (Santiago-Rivera et al., 2002, p. 43).

The loss of the extended family attributed to immigration results in significant stress and psychosocial disturbances

when the value that is placed on *familismo* is considered. A study by Hiott, Grzywacz, Arcury, and Quandt (2006) verifies that stress ensuing from family separation is significant for immigrant women, and Salgado De Snyder's (1987) study of married Mexican immigrant women corroborates the substantial negative impact of family division.

In light of the evidence for the importance of the family and the negative results of separation, recommendations for mental health providers to consider the importance of the extended family when planning treatment are prolific (Bernal & Sáez-Santiago, 2006; Espin, 1987; Falicov, 1998; Fontes, 2002; Gutiérrez, Yeakley, & Ortega, 2000; Hovey, 2000b; Quiñones-Mayo & Dempsey, 2005; Santiago-Rivera et al., 2002). Hovey (2000a, 2000b) determined that family support and hopefulness for the future may provide protective factors against depression and suicide, and Sabogal et al. (1987) found that familism, and in particular perceived support from the family, remains constant across acculturation levels.

Despite documented distress, there is substantial evidence of the underutilization of mental health services among the Hispanic population in general, and Mexican immigrants in particular. Factors impeding use of mental health services among Mexican immigrants include lack of transportation and child care, mistrust of social services, and unfamiliarity with counseling. However, one of the most prevalent explanations for underutilization of services is the absence of culturally appropriate services (Griner & Smith, 2006; Lakes, López, & Garro, 2006; Paris, Añez, Bedregal, Andres-Hyman, & Davidson, 2005). Culturally appropriate services that improve outcome and perseverance have been defined as linguistic and ethnic match between client and therapist, integration of cultural values in assessment and intervention, and respect for inter- and intragroup variance (Griner & Smith, 2006; D. W. Sue & Sue, 2003; S. Sue, Fujino, Hu, Takeuchi, & Zane, 1991).

THE GENOGRAM AS A MEANS OF INTERCULTURAL COMPETENCE

The genogram, an assessment tool used extensively in family therapy, might be valuable in alleviating acculturation stress and promoting culturally appropriate mental health services. Lakes et al. (2006) recommended that mental health professionals acknowledge their clients' culture carefully, contending that the notion of culture is frequently ill-defined in the literature. They advised against using group-specific characteristics to mediate culturally appropriate therapy, contending that this approach leads to stereotyping and failure to address the client's individual needs. This approach to culture is commensurate with the Mexican *dicho* or adage, "*Cada cabeza es un mundo*," which translates to the idea that each individual is his or her own world or culture. A more appropriate strategy of knowing the clients' culture would be to use respectful inquiry and accommodate the clients' subjective cultural meaning into their existing schema.

To understand the client's worldview, a socially based conception of culture is proposed by Kleinman and Benson (2006). This approach emphasizes the client's local social world or what is at stake in the client's unique context. Lewis-Fernandez and Kleinman (1994) elucidated three culture-bound assumptions in which many traditionally trained North American mental health professionals indulge: (a) the egocentricity of self without regard to social or relational influences, (b) a dualistic approach or separation of soma and psyche, and (c) culture as a set of cognitive schema that are superimposed on individuals. When clinicians enter their clients' contextualized reality, these biases are dissolved and the client is more likely to persevere and succeed in treatment (Lakes et al., 2006).

In their study of 96 adult Hispanic participants, Torres and Rollock (2004) found a negative relationship between the level of intercultural competence and acculturative stress. According to Torres and Rollock, immigrants' success in adjusting to a new culture depends largely on two variables: general coping skills and intercultural competence. General coping skills refers to the ability to solve problems, and intercultural competence is the ability to use preexisting strategies in the transition to the new culture. Before coming to the United States, immigrants presumably had a repertoire of skills that they used for problem solving and task accomplishment in their home country. Individuals who can modify these existing skills for success in a new culture are thought to have high intercultural competence. To mitigate acculturative stress, Torres and Rollock recommended assisting individuals in the identification of skills that were useful in the traditional culture and adapting them for use in the new culture.

The genogram, a widely used assessment tool in family therapy, may be useful in the identification of long-established skills that might increase intercultural competence and alleviate acculturation stress. The genogram is a diagrammed family tree that allows clients to identify significant family life cycle events such as births, deaths, unions, and divorces. In addition, the genogram serves as a visual map for relationship patterns and legacies (McGoldrick, 1995; McGoldrick & Gerson, 1985; McGoldrick, Gerson, & Shellenberger, 1999). As such, the genogram encompasses Kleinman and Benson's (2006) notion of finding out what is at stake in the client's unique context, Falicov's (1998) and Santiago-Rivera et al.'s (2002) recommendation of including the extended family in therapy, and Torres and Rollock's (2004) call for identification of preimmigration competence. A closer look at the genogram and its construction follows.

According to McGoldrick et al. (1999), family interactions are vastly redundant, allowing us to make predictions about future interactions based on the family's historical events. Although there is a propensity in families to ignore those events or interactions that are considered less than favorable, failure to identify and acknowledge them results in a tendency to repeat the events and interactions. Contemporary

culture has focused on the individual or nuclear family; however, McGoldrick (1995) maintained that individuals cannot separate themselves from what their families have been, validating the significance of the extended family on the behavior of the individual. Furthermore, “failing to connect with your family leaves you alone in important ways that lovers, children, friends, and work cannot replace. If you are estranged from your family, there remains deep within you a buried part of your spirit” (p. 32).

More recently, the genogram model has been elaborated to include culture and ethnicity in the assessment of diverse individuals. In addition to the aforementioned categories represented on the genogram, questions about race or ethnicity, immigration, gender, socioeconomic status, spirituality, and worldview can be included for a more comprehensive assessment (Hardy & Laszloffy, 1995; Rigazio-DiGilio, Ivey, Kunkler-Peck, & Grady, 2005; Santiago-Rivera et al., 2002; Thomas, 1998).

Thomas (1998) concurred with authors mentioned elsewhere in this article (Falicov, 1998; Hiott et al., 2006; Santiago-Rivera et al., 2002) that immigration and acculturation lead to significant clinical issues including grief and loss, intergenerational parenting conflicts, and acculturative stress. She recommended that therapists acknowledge the stress of the family’s migration and explore conflicts that arise from differing rates of acculturation. The genogram provides a medium for documenting the family’s migration narrative. Strategies for eliciting the family’s story, including the resources that made the journey possible, are described in the following paragraphs.

Stage 1: Basic Genogram Construction

Stanion and Papadopoulos (1997) advised therapists to introduce the genogram in more colloquial terms such as a family history or family tree. In Spanish, the family tree is called the *árbol genealógico*. It is critical that the therapist takes the time to explain the value of such an investigation of the family history. Because Latinos favor a more personal approach to therapy (Santiago-Rivera et al., 2002), beginning in this way may put clients at ease and provide more time for building trust. It may be helpful for therapists to share their own genograms as a visual model because the conceptualization of the completed genogram is difficult with no prior experience in this strategy. This self-disclosure may also foster *confianza* and *personalismo* (the Hispanic values of trust, warmth, and personal relationships). Furthermore, the therapist’s genogram may serve as a springboard for discussion of an immigration continuum; for as Falicov (1998) put it, we are a “nation of immigrants” (p. 5). Hearing about the successes of second-, third-, or fourth-generation immigrants can provide a sense of hope and relief for the recently arrived immigrant. Hardy and Laszloffy (1995) provided guidelines for training therapists to create their own cultural genogram.

Once the rationale for creating the genogram has been established, clients are encouraged to tell their own story. The construction of the genogram can begin in a horizontal

way, elaborating on marital or sibling relationships and then progressing in a vertical manner as clients include parents and children. It is important that clients tell the story in the manner that makes the most sense to them. Based on the Latino cultural value of *familismo*, clients should be invited to include as many members of the extended family as they wish in their genograms. The extended family may include close friends and other members of the support network who are not related by blood but have an impact on the individual’s life. This social network often includes godparents, or *comadres/compadres*, who figure highly in the Latino culture and serve as important links to the larger community (Santiago-Rivera et al., 2002). The genogram might also include multiple preceding generations. According to Smart and Smart (1995), “the family is seen as a problem-solving unit. . . . Hispanic culture is characterized by great respect for the elderly of either sex, and an honored place in the family is reserved for them for what they have accomplished, their wisdom and insight, and the sacrifices they have made” (p. 392).

Stage 2: The Immigration Narrative

Once the graphical map includes all of the members of the family and social network that the client wants to include, the relationships between the noted individuals can be explored in terms of the immigration. Falicov (1998) asserted the value of the migration narrative as a frame of reference and way to explore the premigration experience, the migration proper, and encounters with cultural transition. The migration story serves as a form of *testimonio* or testimony “focused on validating personal experiences of loss, trauma, and abuse” and is “extremely valuable in dealing with the consequences of traumatic migrations for women, men, and children” (p. 51).

McGoldrick and her colleagues at The Multicultural Family Institute (n.d.) have published an updated glossary of symbols for use in the genogram, including a symbol for immigration. Figure 1 provides the standard genogram symbols in Spanish, translated using the original format with permission from the author while Figure 2 includes symbols and their Spanish translations used to denote addictions, physical and mental problems, and interpersonal relationships (M. McGoldrick, personal communication, September 6, 2007). However, clients should be encouraged to use or create symbols that are meaningful to their own unique experiences. Thomas (1998) provided useful questions regarding the immigration experience:

1. What is the family’s history of immigration?
2. When did individual members migrate to America and why?
3. Are there plans to return to the country of origin?
4. What difficulties did they face during immigration?
5. Has each member acculturated to the majority culture?
6. Is there conflict between members who retain culture of origin and members who have acculturated (p. 28)?

Another critical area to process in depth is the decision to immigrate, particularly with women. Whether women are included in the decision or not, the consequences can put

Standard Symbols for Genograms

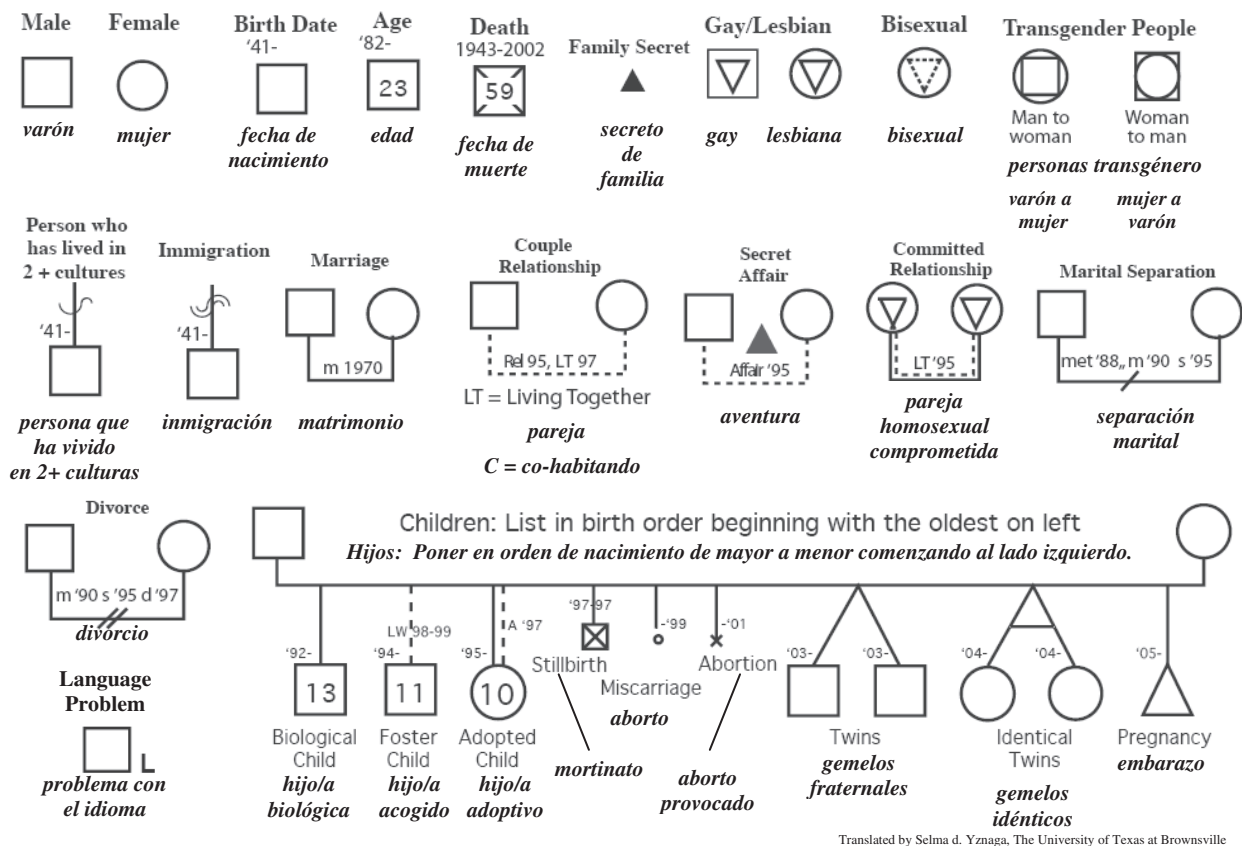
Símbolos estándar para genogramas

FIGURE 1: Standard Symbols for Genograms

them at a high risk for acculturative stress. Women who did not play a significant role in the decision deal with the guilt and loss of leaving children and/or parents behind, and women who migrate alone may be criticized for not adhering to the traditional gender roles prescribed by Mexican culture. Those who return to Mexico for visits have to contend with temporal holes in their own and their loved ones' development, adding to the stress and difficulty of migration (De Snyder, 1987; Espin, 1987; Falicov, 1998).

Stage 3: Resources and Resilience

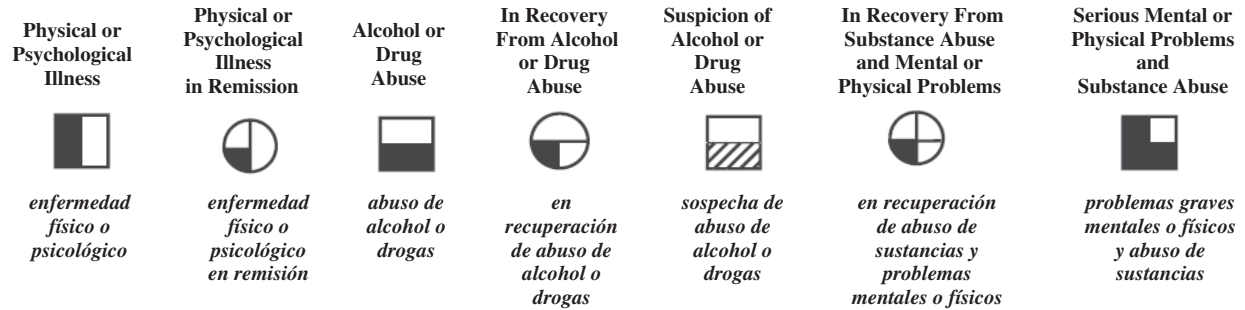
In addition to its assessorial and cathartic function, the genogram can be used as a way for clients to identify their extended family's resources and strengths. McGoldrick et al. (1999) recommended using the genogram as a way to reframe, detoxify, and normalize family patterns and interactions. Kuehl (1995) used the genogram as a means of solving problems, searching for exceptions, and documentation of change and accomplishments in therapy.

Once the factual information has been established on the genogram, therapists can direct clients to depict their family

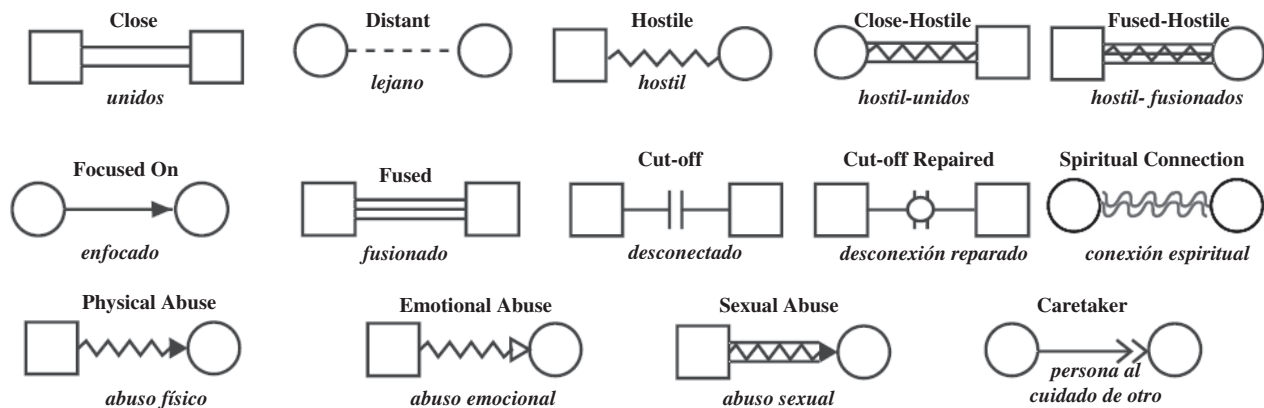
member's traits in a positive way. Asking clients to add personal strengths and positive characteristics to the individuals diagrammed on the genogram orients clients to those resources that have also been influential in their immigration story. Because the act of immigration is difficult and laden with risks, it is useful to begin with the immigrating individuals, which could be the client or family members in any preceding generation. Questions to elicit information about personal resilience may include the following:

1. Who was the first member of your family to immigrate?
2. What characteristics did he or she have that made the journey possible?
3. How were those characteristics important to the success of the journey and achievement once he or she arrived?
4. How did this individual acquire these traits (i.e., handed down from generation to generation through modeling or genetic inheritance)?
5. Who else in your family has similar characteristics?
6. How can you use those characteristics in this culture?
7. How can you ensure that these characteristics are passed down for the success of future generations?

Symbols Denoting Addiction, and Mental and Physical Problems
Símbolos indicando adicción, y problemas mentales y físicos



Symbols Denoting Interactional Patterns Between People
Símbolos indicando formas de interacción entre personas



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FIGURE 2: Symbols Denoting Addiction, and Mental and Physical Problems; Symbols Denoting Interactional Patterns Between People

It is possible that the resources identified in the genogram do not translate to the new culture, and a dialog with clients about why this is so will be required. In addition, therapists are warned to monitor for clients' idealization of the culture of origin; some individuals use this strategy in a defense against identity loss (Espin, 1987).

By recording the strengths and skills of their ancestors on the genogram, clients reconnect to their families and social support networks that were left behind in the process of immigration. Finding a way to metaphorically bring extended family members into the new culture may help them feel less alone and mitigate some of the stress associated with loss and grief. According to Hovey (2000b), access to support is not as important as perceived support from family members.

Intergenerational family theorists have used the genogram to retrospectively examine and identify redundant patterns in family functioning, whereas more contemporary theorists utilize the genogram to identify exceptions and externalization of problems as well as to orient clients toward the future. Combining both styles results in a temporal continuum that will assist individuals dealing with acculturative stress in ways that increase their intercultural competence while honoring *familismo*.

It is estimated that the Hispanic population will comprise 24% of the country's population by the year 2050 (U.S. Department of Health and Human Services, 2001). As this group grows, they will continue to need access to mental health services that are culturally appropriate. Using the genogram to help Hispanics identify emotional and behavioral resources that are generationally prevalent in their families promises to be an intervention that meets clients' needs for staying connected to family members despite the geographical border between them. More important, helping clients identify the resources and skills that generations of family members have used successfully in the past will allow clients to apply skills that can be modified for success in their new culture, resulting in intercultural competence. To illustrate the use of the genogram as a means of facilitating such competence, a case study is presented.

CASE STUDY

Carmen (not her real name) originally presented with issues of intergenerational stress between herself and her two teenaged daughters. Carmen was born in Mexico and had been

in the United States illegally for more than two decades. She was staunch in her intentions to raise her children as she had been raised, declaring that she was not going to raise her children in what she perceived to be the *mal educación*, or bad manners, of their American friends. The traditional methods had served her adequately, if not perfectly, while her children were young. However, as they entered adolescence, they became more resistant to her disciplining and increasingly referred to their peers' experiences as normal. The more Carmen tried to force her daughters to behave in ways that she thought were consistent with "good Mexican girls," the more her daughters rebelled. This had resulted in many family fights and her daughters' threats to run away from home.

Because Carmen had come to the United States as a teenager herself, we briefly processed her experience with her own parents, whom she admitted had imposed their own parents' values and behavioral expectations on her. Carmen was very insightful and readily made the connection between her own adolescence and that of her daughters. However, this brought on new anguish for Carmen. She lamented that even if she wanted to allow her children the same standards as their friends, she could not afford to. Carmen was a single mother who cleaned houses for a living and had difficulty making ends meet.

At this point, I suggested that we draw Carmen's family tree to search for some answers within her history and her family, whom she very much valued. After we had the basic genogram drawn with her extended family's vital statistics on it, I asked Carmen to reflect on her experience of coming to the United States. As she recalled her mother's original objections to the immigration, I asked her to identify how her mother was able to resign herself to the move. Carmen told me that her mother's dedication and commitment to keeping the family together eventually made her reconsider her original refusal to immigrate.

We proceeded to identify the strengths and resources that each of the individuals on her genogram used to deal with the challenges of being in a transnational family. Carmen was able to see the pattern of dedication to family integrity in three generations. We went further and explored what skills each parent used to keep the family intact, and Carmen identified flexibility, humor, and a propensity to frame adversity as opportunities for personal growth as characteristics that kept the family together.

Carmen was adept at translating her ancestor's characteristics into skills that she could use to ensure that she did not drive her daughters away. She began to allow for some compromise in her strict rules, always reinforcing to her daughters the core family values and letting them help her rewrite them so that they were contemporary but not eradicated. After recounting some of the ways in which her family of origin and her grandparents were playful and humorous, Carmen allowed herself to laugh and to find some absurdity in her authoritarian family rules. Finally, Carmen reminded herself frequently of an old family *dicho*: *No hay mal que*

por bien no venga (which is similar to the English adage, "Every cloud has a silver lining") and learned to look for the opportunities that resulted from difficult situations.

Our final sessions included Carmen's plan to pass these characteristics on to her daughters and their children. We added future generations to the genogram and talked about ways in which Carmen could deliberately impart their legacy of family integrity. When we completed the genogram, Carmen asked whether she could keep it. Because she had found the way back to her daughters, Carmen wanted to offer it to them as a roadmap for the future and the conflicts that they would certainly face with their own children.

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