

HELPING FAMILIES HELPING THEMSELVES

A transcultural-systemic approach to self-healing of families and communities

Dirck Van Bakkum (clinical-systemic anthropologist www.ctt.nl & www.cttamsterdam.nl) & Judith Limahelu (transcultural system therapist www.familieverhalenspel.nl & www.cttamsterdam.nl)

Resume

The authors present, based on the vicissitudes of the Iraqi Shakir refugee family (1,5 years in the Netherlands), a transcultural system therapy approach that has been put into practice for several decades. Since 2005, about a thousand therapists and social workers in The Netherlands have been educated and/or trained in this approach. The starting point of the approach is to help families, communities and social networks as self-healing systems to vitalize and strengthen their capacity for self-correction. The children's and adolescents troubling/troubled patterns of communications at home, at school and in public spaces are taken as signalling the unseen 'systemic errors' (increasing unsafe situations) which slow down and block their complex and difficult coming of age processes (Van Bakkum et. al. 2000a; 2000b; 2001; 2010). We see families and communities, with children in (psychiatric/educational) problems, as self-healing systems who try to cope with too many changes in a short period of time and with layered disruptive 'unprocessed' events from the past (Van Bakkum et. al. 1996). Seen from an updated thinking of the anthropologist and system thinker Gregory Bateson their adaptive and self-regulating ability has been compromised. (Bateson 1972, 1979). Our systemic approach focuses on revitalizing, strengthening and restoring that ability. This is done by tapping into restorative (self-correcting) forces in families and revitalizing them in order to raise new generations. In addition to parents, present and absent grandparents/aunts/uncles are also used to help the system to get their self-recovery potential running again. We conceptualize these forces as part of [Family & Community Continuity](#) (FCC). FCC is a neglected part in Family Therapy and in Community Care solution strategy in psychiatry and youth care.

The assumption in this approach is that care providers can not replace the unconditional and long-term efforts in love and care that parents, brothers, sisters, grandparents and neighbours offer. An extended family consists of the following nested (nested) subsystems: 1) the child (as organism-in-context), 2) the parents (marriage / partners, as a minimum reproductive system), 3) nuclear family (2 generations: parents and children), hereby always involving two families, 4) large family (at least 3 generations with cousins and (old) uncles and (old) aunts) and 5) the communities in which fathers and mothers families are embedded and 6) the nation -states, religions and the other worldviews of which these communities are part.

Three follow-up steps result from the FCC principle:

- 1) map with the family, in a culture-sensitive, experience-near and system-following way, 'frozen' communication patterns, neglected, forgotten, repressed fractures, breaches, losses and traumas in families/communities.
- 2) follow the family, by co-creating deep-safe (transitional) spaces, in reliving, repairing these frozen communication and 'overdue mental maintenance',
- 3) during these ritual (transitional/transformational) moments facilitate the parents, children and grandparents to surrender and integrate ancestral systemic wisdom from both fathers & mothers families. This opens the possibilities of the three generation family system to take their collective lives in their own hands again to raise this child/these children in problems.

The self-corrective ability as part of Family & Community Continuity is being revitalized and restored. The approach has been developed with the help of families and communities without and with a migration background. It is a culturally competent approach.

The basis of the article are the anonymized and exemplary events in the Shakir refugee family during the treatment at home. We build on our learning experiences from the system therapeutic approach in the [Marjon Arends Institute](#), the [Protective Wrapping method](#) and the [Transition Model](#) (Van Bakkum et al, 1996, Van Bakkum et al. 2010).

From these clinical/educational practices and from an anthropological perspective we found seven, recurring themes can be named in transgenerational systemic changes in families and their communities:

- a) gender (reproductive complementarity of women-man worlds).
- b) generations (complementarity between unborn-children-parents-grandparents-ancestors).
- c) kinship relationships (positions in family systems are 'formative' and systemic and change at each life phase transition, including migration / flying)
- d) constructive authority relations in the system
- e) family and community-specific transitional and restorative rituals to break / tension (dramas) to solve and to structure transitions (phase transitions).
- f) organizing positive dependencies in embedded systems (social cohesion)
- g) processes of inclusion and exclusion (dealing with ethnocentrism and forms of discrimination)

The six themes can be used as exploratory, analytic, diagnostic and intervention stances. Tangible yet 'unverbalized' tensions that arise from the above themes are made visible in this article on the basis of the fate of the Shakir family and methodically (transferable and repeatable). The deep-safe (transitional) spaces are created together to overcome powerlessness, fractures, discontinuities and weakening of the bonds through painful and disruptive experiences in the past and present as a system. Telling stories, joking, playing like [The Family Stories card game](#), making genograms/life/lines and ritual moments alternated.

The recovery also takes place on a different level. The family integrates its culture/religion/region's bounded patterns 'systemically' with the 'contextual' presence of Dutch cultural patterns. An important part of the intervention strategy is the co-creation (with families) of transitional (deep-safe / ritual) spaces facilitated by the system therapist. In this family Judith Limahelu was the facilitating therapist. She accompanied this family.

This co-creation of ['communitas' experiences](#) is directly connected with the competence of the system therapist 'co-resonating' with emotions/experiences of the clientsystem (Turner 2012; Peutz 2012). Some of these 'reflexive transformative key moments' are described in italics in the text. These specific competences are known in all therapeutic professions but not always consciously, reflexively and intentionally employable. In the courses of the Marjon Arends Institute and the Protective Wrapping Trainings, these cultural competences form an explicit and central part (de Voogt et al 1988, Tjin A Djie & Zwaan 2007/2016, Van Bekkum et al., 2010). To keep these systemic and ritual expertises going requires continuous collective learning processes (Van Bekkum 2017).

The chapter concludes with a brief overview of culture-sensitive instruments that have proven their value and usefulness in complex practices (Appendix 1). Appendix 2 offers an entrance, from 25 years of practical experience in fieldwork and research, how to pinpoint, unravel and improve three structural stumbling blocks in youth care and mental health care contexts.

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