

CHAPTER 7  
Family Systems Therapy and  
Postmodern Approaches

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Over the past century, due to war, political unrests, and dictatorships, Muslim families from diverse countries with distinct cultural backgrounds have immigrated to a variety of nations across the globe. Therefore, it is difficult to make universal statements about the relationship of Muslim men and women, and their attitudes about family life. Local ethnic, social, and historical factors affect the ways in which the Islamic faith is interpreted and applied. These influences determine how strict and traditional or how flexible and open the interpretation of Islam is in any given place. Most importantly, the attitudes of the family members toward their own ethnicity and its values, and their own perceptions of their position in the dominant culture influence every Muslim family differently. This is sometimes to the point that even family members have difficulty separating cultural issues from Islamic perspectives. Furthermore, in many Western countries, there has often been confusion regarding what characteristics come from being raised as a Muslim.

Nevertheless, Islamic ideology creates a fundamental link between cultures and establishes a common framework for understanding Muslim family life. Family structure, which derives from these belief systems, is predominantly patriarchal and values the extended family. Traditions and rituals celebrating important events in both individual and family life cycles often have religious underpinnings. These religious influences

foster important similarities in individual and family developmental tasks through the life cycle (Daneshpour, 1998).

There seems to be an increasing interest among family scholars, researchers, and therapists in understanding cultural diversity, couple and family systems, and the impact of Islam as a religious ideology on family life (Daneshpour, 1998, 2009a, 2009b; Hedayat-Diba, 2000; Springer, Abbott, & Reisbug, 2009). Of this growing literature many consider clinical work with Arab Muslim families (Abudabbeh & Aseel, 1999; Al-Krenawi & Graham, 1997, 2000, 2005; Abu Baker, 2003; Nasser-McMillan & Hakim-Larson, 2003; Sayed, 2003), but there are no integrated systemic and comprehensive clinical approaches in working with the diverse Muslim immigrant populations living in the West.

This chapter is an attempt to identify, discuss, and clarify some important issues for mental health professionals working with Muslim couples and families using systemic approaches and postmodernist perspectives. It is important to note that this chapter focuses on Muslims who live in Western countries who are either immigrants or their descendants. It does not deal with the other major groups such as the converts or Muslims living in their countries of origin. Also, even though there are numerous Shi'ii, Sunni, and Sufi groups living in the West, as a minority, the Muslim "sameness" is greater than that of their "differences," providing them with a sense of community, which in turn is an essential source of consolation and support (Hedayat-Diba, 2000).

This chapter has three major goals. The first goal is to familiarize readers with the basic premises of Islamic ideology as it relates to family. Islamic ideology provides guidance about creating and sustaining ideal couple and family relationships. These ideals may differ significantly from the actual dynamics of couple and family relationships, which are influenced by cultural beliefs, values, and practices. It is important for mental health professionals to be introduced to very general yet basic premises set forth in Islam for marriage and family life to prevent false stereotypes from interfering with clinician-client rapport (Daneshpour, 1998).

The second goal is to discuss the dynamics of Muslim couple and family relationships in terms of family systems theory and postmodernist perspectives. And, finally, the third goal is to provide guidance and insights that can assist mental health professionals in working with this population.

## Dynamics of Family Relationships in Islam

### Family in Islam

Muslims believe that the family is a divinely inspired and predestined institution. They believe that family was not evolved through human

experimentation involving a process of trial and error spread over time. Instead, family was an institution that came into existence with the creation of human beings.

The family can be the source of comfort, pleasure, and happiness as well as the source of intimidation and pressure. The response of the family may bring satisfaction and happiness when the individual's conducts and attitudes fit the will of the family and add credit to the family reputation and coherence, and may cultivate shame feelings when the individual displays any deviance from the family consensus. For many Muslims, the self is not often differentiated from the family's identity, thus self-concept and self-esteem will have collective meanings, depending on the family's reputation and approval and reflections of the family's identity (Dwairy, 2006).

### Institution of Marriage

Although marriage is a divinely ordained institution, each marriage is a contract. The word *nikah*, used for marriage in the Qur'an, means that the marriage as a social contract engenders a set of mutual rights and obligations. Divorce is permitted when partners have not been able to successfully work on their differences and manage their conflicts. The power to dissolve the marriage is the responsibility of both parties, and based on Islamic principles specified conditions should be laid down for it. Remarriage is allowed and even encouraged in Islam even though in some Muslim cultures there is stigma attached to remarriage or to marrying a divorced woman or a widower.

It is important to note that even though marriage is first and foremost a relationship between the spouses, it in fact builds relationships between families. For this reason, other members of the family, particularly the parents of the spouses, typically play an integral and affirmative role in the whole process. This may mean that parents may have both administrative and emotionally supportive roles. Based on the Islamic principles, consent of both the bride and the groom is crucial and indispensable, and even though free mixing of the sexes is not often allowed, it is mostly permitted for the intending partners in marriage to see each other before the marriage. The main point, however, is that marriage in Muslim society is not simply a private arrangement between the husband and the wife. The entire family is part of the whole process and contributes effectively toward its arrangements, manifestations, and fulfillments. This factor has played an important role in the stability of Muslim families, because when families are part of the selection process, they are more likely to provide support when the couples are later struggling with marital and family issues.

## Family Systems Theory

Systems theory can be used as a foundation and integrating force for understanding Muslim family behaviors and dynamics. Similar to Islamic values about family relationship, family systems theory identifies the interactional milieu of the family as central to emotional development, behavioral patterns, values, and loyalties for individual members. In Islam, the family is a part of the greater social order. Families establish an ideological society, with a high level of moral awareness and purposive orientation of all human behaviors where a high degree of social and familial responsibility prevails. Therefore, every family member is responsible for healthy family functioning. In the same manner, family systems theory assumes that the appearance of symptoms is an expression of systemic dysfunction. Such dysfunctions, or imbalances, may appear in an early generation and be passed across numerous generations, or be displayed as symptoms in individuals, marriages, or parent–child relationships.

Most traditional theories of individual psychopathology, like cognitive behavioral and person-centered models, focus on the individual or internal aspects in isolation from the emotional and interactional milieu of the individual. Clearly, other individualistic theories such as psychodynamic, cognitive, and behavioral may contribute to an understanding of certain individual components within a Muslim family system, but they are inadequate to explain the broad patterns of family structure and process or the powerful influences of interactional and intergenerational loyalties (Boszormenyi-Nagy & Spark, 1973; Minuchin, 1974). Family systems theory is a practical model to use with Muslim families because it represents an organismic approach that considers the interaction and roles of each member across the generations as potentially influencing and affecting the emotional makeup and behaviors of all members and their relationship patterns within the entire system (Nichols, 2009).

Family system theory views the family as more than the sum of its parts (Figure 7.1). It also understands internal or external events for a family to have a circular causality. This means that any singular action by a family member will influence not only all other family members, but their responses will be reciprocal to that first action by influencing the initial actor and the nature of the family's overall response (Nichols, 2009).

Based on this broad view of circular and reciprocal interactions, and the recognition of presenting symptoms as part of a wider family system dysfunction, family systems therapists working with Muslim couples and families may respond to the symptoms, or they see the symptoms only as a method of entrance into the system to correct the broader dysfunction. The acting out of a young Muslim child at school, for example, may be an expression of an underlying marital dysfunction between the child's

***The principle components of family system therapy with Muslim families:***

- *Family patterns are circular rather than linear.*
- *All parts of family systems are interdependent.*
- *Families try to maintain stability of their patterns even when it is not functional.*
- *Family systems always have subsystems that can make family function well or become highly dysfunctional.*
- *The subsystems within a large family system are separated by boundaries, and interactions across boundaries are governed by implicit rules and patterns.*

**Figure 7.1** The principal components of family system therapy with Muslim families.

parents. Thus, family systems therapists may work with individual, marital, parent–child, and sibling subsystems; nuclear family systems; family of origin and intergenerational systems; and social networks to understand what patterns affect the whole system and to develop strategies for change throughout the system. Because family system therapists use genograms to track intergenerational roles and events and to analyze triangular relationship patterns, it is a very helpful model given the extent of interdependence or heavy involvement in most Muslim families. Family system therapists can challenge rigid boundaries and shift the structural organization of a Muslim family or dramatize the symptoms themselves in order to further imbalance the system and cause internal change.

### **Postmodernist Perspectives**

Postmodernism embraces the contradictions and complexities of postmodern life, envisions nondichotomous possibilities, challenges cultural constructions of sex and gender, and ultimately reclaims and redefines couple and family relationships by assuming that grand utopias are impossible (De Reus, Few, & Blume, 2004). Postmodernism rejects grand

narratives and favors “mini-narratives”—stories that explain small interactions, rather than large-scale universal or global concepts. In this view, Islam and Muslim families can be examined from many different perspectives. Therefore, culture and cultural differences do not become trans-historical entities (Sandoval, 2000) or homogeneous (Grewal & Kaplan, 2002). Internal class, religious, ethnic, and regional divisions crisscross each culture. Therefore, even though Muslim “sameness” is greater than its “differences,” sociopolitical changes impact each Muslim country in many different ways, and systemic issues such as gender relations, power dynamics, extended family support, education, class, and age impact each Muslim couple and family relationship.

Thus, the guidelines proposed in this chapter are an attempt to create some sense of “sameness” for Muslim couples and families so therapists can gain understanding regarding the Muslim populations living in the West. In any specific situation, however, the postmodernist’s perspective should be used to understand Muslim couples’ and families’ own “mini-narratives” to help them repair their relationships (Figure 7.2).

***The principle components of***  
postmodern therapy with  
Muslim families:

- *The therapist is the participant-manager of the conversation, not the “expert”*
- Meaning and understanding are achievable through continued efforts
- Difficulties are constructed in language system and can be “dissolved” through language
- Families come to therapy with a ‘problem-saturated narrative’ that has become internalized as their primary self-description
- Problem stories/identities are created, lived and kept alive by their connection to important others

Figure 7.2 The principal components of postmodern therapy with Muslim families.

## Muslim Couple and Family Relational Issues

Immigrant Muslim families often come from collectivistic cultures that value the connectedness of the community, tribe, or family more than the individual. Harmony within the family, sensitivity to the needs of others, and support between family members are priorities. Therefore, the autonomy of the individual, which is of significant importance in European and White Western identity development, is not a priority and, in fact, may be sacrificed for the good of the family. Further, due to the influence of a mixture of culture and religion, Muslim families may have a strict patriarchal family system with a hierarchy of generations, and females may be subordinate to males. Parents may be authoritarian, giving direction to children, and collaborative discussion may not be expected. This section reviews some of the common clinical issues that the family therapist may encounter. Several case examples are presented to demonstrate the use of family systems and postmodern perspectives.

### *Gendered Relationships*

The question of gender relationships and the equality or inequality of the sexes is a very controversial issue for Muslims. Muslim are very diverse in their interpretations and understandings of the issues related to gender relationships. The dynamics of gender relationships may be the product of certain cultural and legal contexts, and are not always consistent with the Islamic ideology where the equality of men and women as human beings has been divinely confirmed and legally protected. Ideally, based on the Islamic principles, there is a differentiation of roles and responsibilities, and certain arrangements are made to meet the demands of family institutions—not on the basis of superiority or inferiority of the sexes—but in the light of the basic facts of life and the needs of society. Their roles are considered to be not competitive but complementary. Muslims may believe that one of the main reasons men have been made the head of the family is that order and discipline will be maintained. However, both parties should work together to discharge their respective functions with justice and equity. Therefore, conflict may arise when justice and equity are interpreted by one gender differently than the other.

### *Case Example\**

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Iman and Tarik are from Egypt. They have been married for 12 years and have two children aged 10 and 8. They immigrated to the United States about 10 years ago, and both were raised in traditional Arab

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\* All the names, geographic locations, genders of children, and ages in the case examples have been altered to protect the identity of families that are mentioned in this chapter.

families. Tarik, a mechanical engineer, works long hours and spends most of his evenings and weekends socializing with his friends to “relax and unwind.” Iman takes care of family life including all the major responsibilities for children and household chores. Tarik does not allow Iman to visit her friends, claiming that he is responsible for her well-being and women should not socialize with anyone other than family members after they are married. Iman feels isolated and is upset about this double standard in their relationship. A genogram of their family of origin revealed the same interactional patterns in his family. Tarik’s mother never socialized with anyone other than family members, and his father spent most of his time with friends after work. Iman’s family of origin had the same pattern with her mother never socializing outside of the family circle; however, her father was always home after work helping his children with homework and doing some household chores. Iman believes that Tarik is not attending to his duties as a good Muslim husband and father, and Tarik believes that he provides for the family and can choose what to do with his own time after a stressful day at work.

Based on the family systems theory there is a clear family of origin influence on how this couple views their problems. Tarik continues his father’s pattern and expects Iman to behave like his mother, even though they live in another country and she does not have any close relatives with whom to socialize. Iman expects Tarik to behave like her father, even though Tarik’s job demands more social interaction than her father’s farm-based job. Both are stuck with their own expectations of a perfect relationship.

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Through the process of couple’s therapy, Tarik and Iman realized that their relationship would not improve unless they redefined their expectations of each other based on justice and equity in their own relationship. They agreed that they were bringing the family of origin’s pattern to justify their expectations without realizing that every relationship is different and has its own dynamics. They realized that they live in another social context that demands different interactions and social relationships. Couple therapy was successful in helping them reevaluate their own expectations and create their own subsystem while respecting their family of origin’s systems of relating and functioning. They both realized that a relationship is unfair when a partner’s fair expectations are not being met.

### *Child-Rearing Practices*

Child-rearing practices of any group are influenced by its local culture and religion. There seem to be some differences between the child-rearing practices of the Europeans and White Westerners and Muslims from mostly



Asian and Middle-Eastern cultural backgrounds. For example, the process of separation-individuation that is an important focus of child rearing in European and White Western cultures is not considered important at an early age for Muslim families. As in all other cultures, the success of children is reflective of good mothering and solid family relationships (Daneshpour, 1988).

Discipline begins at an early age and there are usually clear expectations of children to obey their parents without questioning them (Abudabbeh, 2005). Physical punishment may not be considered problematic, and scolding with a light strike may be accepted. As children grow up, they are instructed that they should not do certain things because God has said so, whether or not they understand the reasons behind it. Parents' expectations for compliance increase as children grow older and their cognitive abilities increase (Kasule, 2000).

Many parents are rightfully concerned about the difficulty of raising their children in Western culture without being heavily influenced by it (Smith, 2010). The culturally sanctioned parental strictness becomes problematic after migration to a culture where flexibility and collaborations are considered a sign of healthy families. Raising children, especially girls, becomes a major issue in such a pervasive culture; not uncommonly, families with teen-aged girls may consider returning to their home countries to avoid conflict.

This time period also can be traumatic for the child (Nobles & Sciarra, 2000) because in many immigrant Muslim families, open discussion and expression of emotions are not encouraged, which can lead to poor communication. A child that has difficulty understanding sexual and hormonal changes, for example, may find it difficult to approach his or her parents for guidance. Immigrant Muslim parents living in the West may find these issues even more challenging, because at some level they blame themselves for bringing their children and families to these countries and feel that doing so has caused an imbalance leading to subsequent behavioral or emotional problems for their children. Both children and parents struggle to balance acculturation while maintaining their own ethnic identity (Nobles & Sciarra, 2000).

Concerns around a person's sexuality, dating, and dressing are all controversial issues because there are sharp differences between Muslims' beliefs and Western culture. Islam has very clear guidelines on the issue of sexual relationships. Premarital sex is forbidden. This is considered a preventive step against teenage pregnancies, sexually transmitted diseases, and emotional challenges associated with having difficult relationships at a very young age, even though there are instances of early marriages for young girls in many Muslim families. Some Muslim parents, in general, may feel more comfortable when these issues are discussed in school, preferring to avoid discussing these issues with their children at home (Athar,

2010), while some may not want any issues related to sexuality to be discussed at school. The Islamic perspective on sex education involves not only knowledge about anatomy, physiology, and contraception, but also about the morality of sexual issues.

### *Case Example*

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Ahmed and Janan came in for couple and family therapy. Ahmed is from Jordan and has lived in the United States for the past 25 years. He is a devout Muslim believing that his religion has given him “all the answers for life challenges.” Ahmed’s deceased mother was a very spiritual and kind woman and had a strong role in his upbringing and his sense of religious identity. His father, on the other hand, was a very abusive man. Ahmed has many disturbing memories of being physically and emotionally abused by him. At age 18, Ahmed immigrated to the United States to study and work. He met his wife, a Scandinavian American, a few years later and after she converted to Islam, they got married. They have four children: three girls (Sanam and Sarah, 16, and Samaneh, 14) and one boy (Sadedgh, 10). Ahmed claims that his plan has always been to move back to Jordan once his children are older so his children can be raised in a Muslim country with Islamic values.

Janan was raised in a very chaotic family and claims that a family friend raped her at a very young age. As a result, she has no contact with her family of origin and has many unresolved emotional and psychological issues. She is extremely overprotective of her children and assumes that any conversation with the opposite sex is extremely dangerous and can have sexually abusive consequences. She constantly talks to her children about her own sexual abuse and follows her daughter everywhere they go. She volunteers at their school so she can observe their behaviors and listen to their conversations with friends. Whenever she complains to her husband about the children’s behaviors, Ahmed blames the “corrupted American society” and blames Janan for not agreeing to leave the United States to live in Jordan.

The conflictual relationship between the parents has resulted in many behavioral problems with their children. The children do not show respect to their parents and defy them all the time. They secretly have dates with boys and have bought cell phones to talk to their friends. They sneak out of the house at night and come back home before morning only to find that their mother has been sitting in their room waiting for them. Over the years, the children have become more and more accustomed to living in the United States, and they have become very comfortable with their lifestyles. On the other hand,

Ahmed has become more bitter and resentful and sees their behaviors as a result of the lack of moral character of American teenagers. He strongly believes that if they move back to Jordan, his children will become devout Muslims, marry devout Muslim men, and then life will become perfect. Janan, on the other hand, blames her children for their own behaviors and is very resentful of Ahmed for criticizing the American way of life and not holding their children responsible. She is extremely overprotective of her country and children. As a result, Ahmed and Janan fight constantly, blaming each other for what is happening in their family while their children have become more disrespectful and defiant. No one wants to take responsibility, and the vicious cycle of blame and disconnection constantly continues.

Family systems theory and postmodern perspectives were extremely useful in working with this family. The therapy concentrated on the parents' subsystem first. It seemed clear that Ahmed and Janan had a complementary relationship that was no longer effective. None of them took responsibility for what was wrong in their relationship and both blamed each other. The first step was to get them to realize that this dysfunctional pattern had developed over time and both of them had contributed to it equally. Ahmed had been able to blame Janan without seeing his own role, and she had been defending herself and her children without acknowledging her children's behavioral problems. Ahmed accepted the fact that it was his decision to move to the United States and marry an American woman, and he could not expect his children to live in the United States without being influenced by the culture. Janan accepted responsibility for being overprotective of her children without realizing that her own issues related to the childhood sexual abuse had never been resolved or dealt with. She was challenged to see that controlling her children's interactions with men was a way for her to gain control over her own unresolved issues. Ahmed's fantasy that his children would become devout Muslims only in Jordan was challenged by giving him examples of many devout young Muslims in the United States. Janan's fantasy that controlling her children would make them obey her was challenged by giving her examples of their sneaky and out of control behaviors.

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Once they both resolved some of their own personal and relational issues, the children were invited to be part of the sessions. Each child told her or his "mini-narrative" about family life while the parents listened. Their wishes and desires for a better relationship with both parents were discussed. The family's understanding of the generational gaps that always exist between two age groups helped both parental and children

subsystems to come closer to recognize the source of their miscommunications and misconnections. Parents listed some of their parental expectations and their hopes and dreams for their children, while the children listed some of their own desires and ideas. The pros and cons of living in Jordan versus the United States were discussed first from the parents' and then from the children's perspective. They all discussed likes and dislikes about both cultures. The children requested to have some privileges as long as they respected the parents' roles, the parents asked for more respect and responsibilities in return, and both subsystems agreed to honor them. For the first few months, both generations had lots of difficulties honoring their new boundaries, but over time they realized that the old system did not function well and they needed to respond to their family needs differently.

### Problem Solving and Communication

Muslim families, like many other Asian and Middle-Eastern families from collectivistic cultures, may have a style of communication that is more restrained and indirect than in European and White Western societies, with less confrontation and more inference (Daneshpour, 1988; Al-Krenawi & Graham, 2000). This communication style is in contrast to European and White Western culture in which the family is expected to be more flexible, with more egalitarian relationships and direct, explicit communication. For example, the father may want to communicate rules with his children but he may not directly have a conversation with them about it and may ask his wife to explain his viewpoints to his children. This in turn (in the Western perspective) triangulates the mother and creates distance between him and his children.

### Case Example

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Sarah and Hamed have two children: a 14-year-old daughter, Hannah, and a 12-year-old son, Ali. Both Hannah and Ali have some emotional and behavioral problems at school and at home. Although in many situations parents agree on the unacceptable behaviors and support the same action plan, Sarah feels closer to her children and tends to try to mitigate the punishment, expressing some degree of empathic affection for them or dissatisfaction with the punishment, while Hamed is more remote and strict, and displays less affection and often does not talk to his children.

During couple therapy, it became apparent that Sarah tends to be ambivalent about supporting the behavioral plan for Hannah and Ali due to her own conflictual relationship with Hamed. She claimed that

Hamed was very controlling and she needed to protect Hannah and Ali even though she expressed weariness with the burden she carried in disciplining them and acted very helpless. She often played the role of the weak agent obliged to fulfill the will of the stronger patriarchal authority, but she also threatened Ali and Hannah with their father's authority when they disobeyed. She used sentences such as "I will tell your father when he returns home" on a daily basis. Family systems therapy was able to get Sarah to realize how her attitudes in fact maintained the patriarchal system that she did not like. Hamed was able to process his family of origin issues and understand the reason behind his lack of connection with his children, which was related to how his mother always "translated" his father for him and his siblings. Hamed agreed that his parents did not act as a unified system mostly due to the hierarchical nature of their relationships. Sarah agreed that her helplessness in dealing with Hamed perpetuated the cycle of patriarchy and kept all of them stuck in the same pattern.

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Because Hannah and Ali's behavioral problems were mostly related to Hamed and Sarah's own relationship issues, couple therapy helped them to come to mutual agreements about some of their own conflictual patterns. Once Sarah felt better about her relationship with Hamed, she was able to stabilize her relationship with Hannah and Ali and become less enmeshed. Hamed felt better about making his wife happy, and both agreed on disciplining Hannah and Ali if they have behavioral problems without becoming trapped in the previous cycle.

### **Clinical Implications in Working with Muslim Couples and Families**

After coming to a Western country, immigrant Muslim families lose the support of the extended family and become very isolated, but do not know where to go or how to look for help. Religious places such as mosques and Islamic cultural centers are now recognizing this need. As a result, there is more awareness in the Muslim community, although there is still a lack of an organized structure to provide help in a systematic way. Muslims may expect help to be practical, specific, and directed to problems in the "here and now." For example, the use of family systems theory may lend to increased success in short-term therapeutic relationships if helping professionals use a more explanatory and instructional nature, similar to treatments for physical illnesses (Al-Krenawi & Graham, 2005).

Further, there are several stages in recognizing and addressing the impact of cultural influences in cross-cultural couples and family therapy. These stages can also be used with Muslim families and include gathering

a history of the family's ethnocultural heritage, understanding the reasons for migration, conducting an assessment of the family member's adjustment, and gaining an understanding of the therapist's ethnocultural background for countertransference issues (Jacobsen, 1988). As in working in other cross-cultural situations, the clinician must explore his or her own preconceived notions about this cultural group. The clinician must also consider to what extent the family fits into expectations of the cultural group (Nobles & Sciarra, 2000).

After the family is engaged in treatment, there are several issues that should be considered in individual and family therapy. The therapist must realize that open and direct expression of causes of stress may be difficult for many immigrant Muslim families. The therapist must focus on encouraging partners to listen to each other rather than working on open communication (such as the use of "I statements") and remember that assertive communication may not be valued. Open discussion of issues in a family session may not be a comfortable situation and often does not help immigrant Muslim families who may perceive that as disrespectful. It is helpful to have some individual sessions with children or adolescents and some separate sessions with parents to discuss some fundamental issues and then conduct family therapy. This practice allows the clinician to focus on family orientation and interdependency rather than self-identity and independence with teenagers at first, and then use family systems theory to reconnect all family members at a healthier level. A multigenerational genogram may help the practitioner recognize the impact of the extended family on day-to-day functioning of the family in treatment (Daneshpour, 1988). For Muslim and non-Muslim therapists, one goal is to recognize the differences between Islamic and ethnocultural values and not impose their own ideas about proper ways of living. Sometimes, even Muslim families have a hard time separating Islamic values from the cultural ones.

## Conclusion

It is important for mental health professionals to apply approaches that are congruent with Muslim values and their family processes. Family systems theory is the most applicable model to work with Muslim immigrant families because of its emphasis on the connectedness of relationships and the importance of family interactions for healthier functioning. Mental health professionals also need to be mindful that this value orientation sets the pattern of family life in a way that may be quite different from the Western culture. Family system theory helps practitioners understand family relationship dynamics in Muslim families to assess what the "functional" family structure is within the Islamic

culture. It is important to note that the way in which a family problem is understood and the desired directions for change are colored strongly by religious ideology and the cultural belief system. It is important to note that Muslim families place high value on the process of integration and pay less attention to the process of differentiation (Daneshpour, 1988). Further, basic rules about gender relationships, family life, marriage, and divorce within Islamic ideology need to be taken into consideration. The goal is to respect Muslim immigrant families' sense of religious identity and interactional patterns while challenging their dysfunctional family dynamics. For this purpose, family systems theory and postmodernist perspectives are likely appropriate models to help family therapists engage with Muslim families without making them feel misunderstood and oppressed by the misrepresentation of their values and belief systems.

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