

July, 2004

## Culturally Sensitive Issues in Play Therapy with Islamic Arab Americans

Karla D. Carmichael, Ph. D.

carmichaelcounseling.com

The Islamic American culture is prone to the use of pharmacotherapy, as opposed to “talk” therapies. Their concept of good mental health is complete submission to the Will of Allah; whereas, disintegration and disruption of inner harmony denotes the lack of moral and spiritual fiber or “gossorrfi al nazaa’aldeeneya”(Sayed, 2003).

The teachings of Islam for Arab Americans can be conceptualized as survival-oriented as opposed to insight-oriented philosophy. Therapies that require insight may provoke a great deal of anxiety in the Islamic Arab American leading to ineffective and counterproductive interventions and techniques. The emphasis on the individual may produce conflicts, as the Arab American culture is a collective or tribal based culture(Nassar-McMillan & Hakim-Larson, 2003).

Children are likely to show somatic distress through problems with sleep, elimination, and eating. This denial of emotional conflict and anxiety can aggravate chronic medical conditions like asthma and diabetes(Wicks-Nelson & Israel, 2003). The internalizing of stress results in the children being reported as having depression and attention deficit disorder with hyperactivity.(Coffman, 2004; Nassar-McMillan & Hakim-Larson, 2003) Children with these symptoms of the underlying emotional concerns are usually referred by a pediatrician with whom the play therapist will want to work with closely. The expense of the pediatrician and the child’s related “illness,” often places additional emotional and financial stress on an already stressed family unit. In the worse case scenario, the family may react with violence toward each other or the child, if intervention or relief from the stressors are not present. The Arabic ethnic cultures are usually dominated by the male heads of the household. In recent immigrants and very traditional Arab cultures, women are not frequently seen outside the home. Many may not go into public without the company of a male family member. This tradition may make family violence very difficult to detect. Children often respond to this kind of family violence with school phobia and separation anxiety.

The children usually have a better command of the English language than the immigrant parents, which may leave children to take on responsibilities beyond what is expected of their developmental age. The children are often left to conduct business for their parents and to assist in the day-to-day activities that require language proficiency. Conflicts may arise when the children and youths learn to take advantage of their parents’ lack of experience with the dominate culture and lack of skill in reading and writing in the English language (Nassar-McMillan & Hakim-Larson, 2003).

The primary determiners of successful therapy are as follow(Coffman, 2004; Nassar-McMillan & Hakim-Larson, 2003):

1. Build a relationship between the therapist, family and child, which may include being open home visits and participating in family and social gatherings.
2. Consult with religious leaders as an important step in establishing rapport and trust as the Islamic American culture is dominated by religious devotion.
3. Establish an affordable fee, the Arab American may feel that the service is either worthless or a charitable handout without a fee. If the mental health service is to be viewed as worthwhile, the service must have at least a nominal fee attached to the service for the Arab Americans to feel empowered and in control of self.
4. Explain intake procedures and how the information is important to the therapeutic process. Because issues of confidentiality and distrust of their community exists, the parents of a child may be reluctant to share personal information during the intake unless they understand how this information is necessary to working with the child.

5. Pose professional advice in a tentative manner or stated as personal belief to be better received and less likely to be perceived as a threat or challenge to the patriarchal authority
6. Avoid confrontation or criticism in the presence of other family or community members. Silence does not mean agreement from the Arab American. Confrontation or clarification of that silence can be perceived as criticism.
7. Islamic faith forbids the drawing of human figures, but does allow geometric shapes. Structured drawing assessments that require drawing human figures might be replaced with a type of mosaic design instrument. Other problematic items might be dolls, toy soldiers, or game boards, and other items that might have human images on them. Rather than offend, ask the parents if the child is allowed to play with dolls, human figures, or game boards with human images on them. Individual families differ in how strictly they interpret this Islamic law.(Nassar-McMillan & Hakim-Larson, 2003).

References:

- Coffman, E. (2004). Lost in America., Christianity Today (Vol. 48, pp. 38-42): Christianity Today International.
- Nassar-McMillan, S. C., & Hakim-Larson, J. (2003). Counseling Considerations Among Arab Americans., Journal of Counseling & Development (Vol. 81, pp. 150): American Counseling Association.
- Sayed, M. A. (2003). Psychotherapy of Arab Patients in the West: Uniqueness, Empathy, and "Otherness". American Journal of Psychotherapy (Vol. 57, pp. 445-459): Association for the Advancement of Psychotherapy.
- Wicks-Nelson, R., & Israel, A. (2003). Behavior disorders of childhood (5 ed.). Upper Saddle River, NJ: Prentice Hall.