Resolving Family of Origin Issues in Clinical Practice

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Abstract: If one is be to an effective social worker in clinical practice, family of origin issues are very critical to resolve. Being in the clinical practice since 1976 has meant facing a strenuous effort to come to terms with my own family and family of origin to help clients. Traveling extensively in Latin America for the last eight years has greatly enhanced this process.

Keywords: family of origin, Guatemala, transference, self-care

Practicing social work since 1976 has been an amazing journey. By understanding my family of origin and transference issues, effective relationships with various clients have been established. Also, self-care and secondary trauma are important issues for me as a social worker. Learning to cope with negative and positive experiences in my life has helped me to grow as a social worker and to be effective with clients.

When I was growing up with my family of origin, there was significant conflict between my mother, father and sister. My father was the dominant individual in the family, which resulted in constant conflict between members of the family. He was the powerful authority figure and he would not yield to negotiate any differences. My sister was triangulated into the conflict between my mother and father; my position in the family resulted in an emotional cutoff.

Growing up with strains in my family of origin, I was fortunate to have a healthy environment; I received adequate nutrition, good schooling, and a safe environment. Work did not start for me until I was 18 years old, and then there was excellent recreation, vacations and health care. Life overall was positive, without experiencing violence growing up, and Judaism from a secular perspective formed the basis of my spirituality as a child.

My first job as a social worker in 1976 was far away from home. I had successfully left my family of origin and could be on my own. I had the responsibility to travel to five counties, serving five health departments. My supervisor reminded me of my father and was very authoritarian, resulting in a very strong, negative countertransference. This supervisor stirred very negative feelings within me, and I left after a year. I had erected elaborate defenses in order to defuse painful experiences with my father and needed to work out these issues. Gedo (2013) states, "One powerful manner in which the therapist can come to know these effects is by experiencing them personally as counter transference" (p. 162). In my first job as a social worker, I did not effectively resolve issues with my father, and I could not be an effective therapist.

For years, I staying away from clinical practice because I was searching for my own identity away from my family of origin. I was involved in an enmeshed relationship with my family of origin, especially with my mother. Traveling away from the United States began in 1984 with a trip to Costa Rica for three months, followed by living for a year in Spain from 1985 to 1986.

I returned to clinical practice in 1987 and began to train as a family therapist. I was able to examine issues within my family of origin. Through an exploration of my family genogram, I recognized various relationships, cutoffs, triangles and multigenerational processes. For me, understanding the enmeshment with my mother helped me to work on my differentiation of self, so that I would not be so emotionally reactive with clients. Understanding triangles assisted me with understanding any countertransference based on my family. Recognizing an emotional cutoff from my family of origin helped me to understand that this method of resolving anxiety was unhealthy.

I was married in 1989 and became the stepfather of four children. As a stepfather, I learned more about family systems and issues of loyalty, boundaries hierarchies, accommodation, and subsystems. Launching a career in working with adolescent substance abuse gave me a new perspective on family systems. For ten years, I directed an adolescent day treatment program where I encountered a diverse group of youth with varying substance abuse and mental health issues. During this time honing my skills as a family therapist, I received a license in marriage and family therapy in 1997. Through my training as a family therapist I began the process of acknowledging many of the issues surrounding my family of origin. I can vividly recall presenting my family genogram to other therapists and being very nervous to reveal the issues that bothered me. The response of the group was very supportive and universalizing; they found my family issues to be similar to their family of origin issues which was very comforting.

Felberbaum (2009) explained the importance of memory of grief in working with clients and sees Tibetan mandalas made by monks as reflecting the transitory nature of life. My father passed away in a nursing home in 1992, and I did not have the opportunity to say goodbye to him, although I attended his funeral. From 1995 to 2005, I had the opportunity to spend more time with my mother because she came to live near me at an assisted living residence. She was very independent until a year before her death in 2005. After my mother's death, I needed to engage in short-term counseling to resolve the loss of a very significant person in my life. I was a member of a critical incident stress debriefing team, and it was very hard right after my mother's death to effectively work with clients who were experiencing losses. Going to counseling resolved these feelings of loss.

The deaths of my uncle, father and mother were traumatic for me, resulting in feelings of depression and grief after my mother died. Cox and Steiner (2013) find it important that social workers manage stress when trying to help clients who have experienced trauma. Kanter (2007) discusses compassion fatigue as a secondary traumatic stress occurring over time. Social workers have more difficulty with self-care when they are experiencing trauma themselves. Response to secondary trauma is determined by one's countertransference reactions.

The next stage of my life was to work on family and family of origin issues and occurred in 2008 when I traveled with other university faculty to Zacatecas, Mexico. This trip made me realize that traveling would enhance my abilities as a social worker and help me to resolve many issues based on my family of origin.

Traveling and Confronting Family of Origin Issues

Over the last eight years, I have traveled throughout the Caribbean, Mexico and Central America. This travel has helped me to confront and resolve many family and family of origin issues. This traveling has brought me closer to the Mayan spirituality and culture, the plight of immigrants, and the diversity of Central America and Mexico. It has brought meaning and focus to my life on a connection to social work with Latinos in the United States, Mexico and Central America. It has also helped me to expand my ability to work with people from other cultures. I present five case examples of social work practice while traveling abroad, where family of origin issues came to the forefront and helped me to learn about myself and others.

During my travels, I participated in doing research at social agencies, performed journalistic work with an NGO, took students to Guatemala, and volunteered as a social worker with social work agencies. These experiences have strengthened me as a person and have made me aware of the family and family of origin issues which are reflected in my social work practice.

The following five case examples will address spirituality, poverty, the plight of children, violence and immigration. I will address each problem, review literature, talk about my experiences with a case example, self-reflect on the experience, and finally discuss what I learned to help my clients.

Mayan Spirituality and Culture: Finding a Strong Connection

Spirituality issues are problems among many of our clients in the United States; Alcoholics Anonymous and Narcotics Anonymous fulfill a spiritual void for many of our clients. This need for spiritual fulfillment is evident in global social work practice (Chirico, 2014).

Spirituality is prevalent within the Mayan culture. Molesky-Poz (2006) discusses the cultural and spiritual background of the Mayans. Among the Mayans, there is no theological doctrine but rather practices based on encounters with the cosmos. Mayans gather around an altar offering various natural objects to recall their ancestors and history. They interpret life in cycles and folds of darkness and light, and there is a commitment to the 260-day Mayan calendar and respect for the forces of creation in the world. In order to celebrate the Mayan past, women wear traditional clothing, which depicts Mayan images and objects, reflective of astronomy, math and mythology. In the Mayan tradition, shamans perform consultation and healing, and Mayans find sacred places.

Growing up in a secular Jewish family I was only marginally spiritual, and rarely participated in Jewish rituals or going to synagogue. My parents were not very religious. I feel that this reinforced a disconnection from my family of origin. As stated previously, I used emotional cutoff as a way to cope with anxiety in my family. This is not an effective tool to deal with family of origin issues. In my training as a family therapist, I learned more about what it was to be a member of a family. Through the loss of my uncle, father, and mother, I experienced the loss of significant others, grief and pain. Searching for a spiritual connection was very important on my journey.

My father was in a nursing home when he passed away. From what I heard, it was very difficult for my father to be away from his family; there was only my mother there to visit him every day. I had the opportunity in January 2015 to visit a nursing home in northern Guatemala which brought back memories of my father, my spirituality and my family of origin.

Case 1: Visit to a nursing home in northern Guatemala

In January 2015, I visited a nursing home in northern Guatemala with about 90 "abuelitos" (grandparents). There are very few nursing homes in Guatemala, but they play a very important role in caring for those in need. The purpose of my visit was to explore how the elderly were cared for in Guatemala. In the nursing home, there were very few women, and most residents were men. There was an atmosphere of caring, but their resources were stretched. The charts for the residents were paper copies with no computerization, and there was a limited supply of medication. Churches would visit the facility to have religious services. There were mosquito nets covering beds because the nursing home was in an area with vegetation. Seeing this area brought a sad feeling of countertransference; my parents had been so well cared for when they were old. The caregivers for the elderly had very warm hearts; I remember one person who did all the laundry for the "abuelitos"; she had performed this task daily for eight years now. In a developing country like Guatemala, despite scarce social resources, there was still an effort to care for their elderly. There were many Bible verses written on the wall which gave strength to those providing services to the elderly.

On a trip to Chiapas, Mexico during the summer of 2014, I was very tired after a full day of travel to various sites in this area. As evening approached, the mist closed in on the mountains of the highlands in green grandeur. The mountains brought to me a comfort and spiritual closeness, reflected in the strength of the Mayan religion and culture. It was a strong feeling of healing that reinforced the power of a multigenerational connection. Understanding this strong connection of spirituality, family and culture within the Mayan tradition gave me help in working with all families, and resolving my own issues with my family of origin.

Through the strengthening of my spirituality, I have been better able to help my clients. Once, I was called to help a first responder who had watched a woman burn alive. He had no choice to help her because the building was already in flames. I went to the site where the woman had been burned to death, and we went to the window where she last was alive. The first responder prayed and asked this woman for forgiveness. After releasing this guilt, he was able to return to his job as a fire fighter. Within the Mayan tradition, letting go through ritual offerings is an important part of freeing one's spirit from guilt. As a Mayan shaman asks for forgiveness from the Gods, this responder also relied on forgiveness to make him whole.

Poverty at Home and Poverty in Central America

Poverty is a problem that is endemic in Latin America; there is extreme poverty where people make no more than a dollar a day and have few amenities. It affects the spirit and resilience of people throughout the world (Cox & Pawar, 2013).

Marini and Graganolati (2003) detail the problems

with poverty and health in Guatemala. "Compared with other countries with a similar per capita GDP level, Guatemala stands out as having an inordinately high rate of poverty" (p. 5). Health problems in Guatemala include high rates of infant mortality and malnutrition, fragmentation of health care, lack of health services in rural areas, and lack of health insurance. "A national shame" (2009) reports that according to UNICEF, half of the children of Guatemala are malnourished; in the rural areas, the number is as high as 80 percent, with some children eating only tortillas. The chronic problem has become acute because of the economic crisis, drought in eastern Guatemala, and Guatemalans abroad not sending remittances.

Leonard (2011) reports that Honduras also has extensive poverty. The poor have mainly lived in rural areas and have lacked basic education. 60% of the workforce is unemployed or underemployed with high levels of illiteracy. El Salvador is also dealing with social issues of poverty, such as a high rate of teen pregnancy; every half hour, a teenager gives birth (Gonzalez, 2014). Alcoholism is also an epidemic, with a rate of 27.4 deaths annually for each 100,000 inhabitants (Sermeno, 2014).

Poverty in El Salvador and Honduras can be very extreme. I had the opportunity to accompany church members to a rural area in Honduras in 2012, where men, women and children, had been expelled from their land and were living in the street in makeshift houses of poles and plastic, with no basic necessities such as electricity, bathrooms, or running water. The homes of the people in Honduras were bulldozed and they were now living on the street. The church members brought food and clothing to these people.

When I began to first experience extreme poverty in Mexico and Central America, it made me realize how lucky I was to grow up in the United States. My father and mother had experienced the Great Depression in the U.S., which probably altered their perspective on life. Growing up, they saved every penny that they could in order to prepare for another economic demise. During my experiences as a social worker in the Southern part of the United States, I saw people living in trailers without running water and indoor plumbing. In South Carolina in 1976, I visited the home of a child who was malnourished. While working in Georgia in 2006, I visited many homes with insects crawling throughout the house or that were without air conditioning during the summer. Children did not have shoes, wore dirty clothes, and lacked books for their education. Traveling to poor areas in Latin American gave me perspective on what my parents and I had experienced.

Case 2: Poverty in central Guatemala

I had the opportunity in the summer of 2015 to assist a social service organization with surveys of a community with extreme poverty. Spending the whole day in this community brought out many issues from my family of origin. Growing up, I had very adequate food, clothing, shelter and medical care; the air was clean and pure to breathe. In this community, there were children in desperate need of basic necessities. In this environment I encountered the inability to breathe while smoke was coming from wood burning stoves. This visit to an isolated mountain community brought feelings of pain from seeing the children in such conditions. The coordinator of the trip, on our final visit to a home, kissed the mother of the family and then shed tears. Continuing to work with these people would have brought me secondary trauma. Since I currently have 5 children and 3 grandchildren, it brought me personal pain to see children in these conditions of extreme poverty.

Other experiences of extreme poverty were equally striking, like witnessing children running around without adequate shoes. A child was Deaf and knew no sign language at 9 years old; this child had no training in sign language, because the school was too far away. There was no furniture in the buildings, only beds, and there might have been only one bed for 6 family members. There was no clean source of water; the water was collected in depositories or obtained from a well. When there was cold weather on top of the mountain, there was no source of heat except for clothing. The predominant language spoken in the canton was Quiche (indigenous language), not Spanish. When there was severe weather, there could be mud slides, and the road approaching the community was filled with rocks and holes. Most children did not go beyond primary school, and latrines were used as a toilet for the whole family. Each family had small plots of land where they grew maize. There was fear of a drought with people having malnutrition, and there was no government aid. Some adults could not read or write Spanish. There was a

health clinic miles away; if there was an emergency there would be a lack of facilities. No one had indoor plumbing or effective water systems, and most housing was made from corrugated metal. Some men earned money by selling fruit or videos in Guatemala City while others were agricultural workers, who might earn about 100 dollars per month. Large families lived in these communities, and the women dressed in traditional clothing. There was a lack of electricity and refrigeration in the community.

Reflecting on this poverty from a family of origin perspective makes me think about the struggle of my clients and the loss of significant family members. Working in an environment like this can either create secondary trauma or move one to a higher level of human consciousness. The greatest loss in my life was my mother, who was a very kind and caring person. What I experienced in these areas of extreme poverty was a sense of hope and connection to the land and culture, not a sense of loss and hopelessness. To a certain extent, there is always hope despite tremendous loss or hardship.

As a social worker in the United States, I have worked with families who have lost everything in a state of crisis by fire, tornado, or other natural disasters. Basic crisis intervention techniques normalize the anxiety in these situations. Instilling hope in people who have lost everything is an important skill as a social worker. Being able to handle secondary trauma is very important to being an effective social worker in these situations.

Child Labor in Central America

Viewing the conditions of children in Latin America is difficult; it is tragic to see children without a bright future. Because I am a father of 5 children, I have sensitivity to the needs of children who are growing up. It is hard to watch children growing up in these conditions, and seeing the consequences of lack of education, poverty and the presence of violence. In my own clinical experience, I have seen the damage that poverty has on adolescent development, from violence to drug abuse.

Tuttle (2006) explains that child labor is a key issue in Latin America. Children work in factories, prostitution, armed groups, and the service industry. Based on 2003 statistics in Guatemala, 23 percent of the work force was between the ages of 5 and 17. Putman et al. (2008) see child maltreatment as a problem in Guatemala: "Rates of violence, including family violence and child maltreatment, are high in post-civil war Guatemala and child sexual abuse is an area of particular concern" (p. 349). Offitt (2008) sees street child labor as a major problem in Guatemala. Street children labor for the survival of their families. Children street laborers normally sell foodstuffs and dry goods and provide basic services.

Case 3: Garbage Dump in Guatemala City

Visiting the garbage dump in Guatemala City in 2012 was shocking. The garbage dump is below the city cemetery in the city, and about 30,000 to 40,000 people recycle various items around the garbage dump. Men and women go into the large garbage dump to sort out various items for recycling. Families live around the garbage dump in order to survive, and they sell these items. It is a daily existence of duress. Frequently, the children of these families receive no education and lack basic necessities such as health, dental care, and clean water. These families face violence and crime in the area surrounding the garbage dump; they live in a red zone.

As a founding member of a juvenile drug court in an American city, I have seen the ravages of drugs on the youth of America. Even with treatment, some of the adolescents continued into adulthood using drugs and engaging in a criminal career. There is an international program called Safe Passages to address the issues of the young people in the garbage dump; they have set up schools and places for parents to work in Guatemala City. This program has a profound impact on the lives of the young people working with garbage. There is a strong counter-transference toward the young people working in the garbage dump, and adolescents in drug court in the United States.

Violence in Central America

Growing up in my family, I never experienced a high level of violence; violence was something strange to me. As a social worker, I have seen violence with child abuse, domestic violence, and people with homicidal thoughts. Violence was dissonant to my way of seeing the world. In my clinical work with adolescent substance abuse, I saw the trauma of both gun violence and senseless violence; I had witnessed the aftermath of gun violence at a high school during the debriefing of students.

Guatemalans experience insecurity with both drug cartels and gangs (Brands, 2011). There is a history in Guatemala of an authoritarian state government, low tax collection, and inequality. Guatemala has become a center of the drug trade. Drug traffickers move drugs through Guatemala by various means and use corruption to obtain influence on local governments. Organized crime has penetrated Guatemalan institutions. In addition, "padillas" (neighborhood gangs) and "maras" (national gangs) create unstable conditions. Pandillas specialize in extortion, robbery, and small-scale drug distribution. Maras participate in drug and arms smuggling, human trafficking, racketeering, and other organized crime. Cruz (2009) sees the development of maras stemming from migration and networking in the communities and prisons. Gang violence, kidnapping for extortion, and attacking bus systems for money are prevalent. The state is not strong enough to raise revenue and administer justice. Corruption and locking up gang members with gang loyalty exacerbates the problem. Guatemalans have turned to their own security guards and vigilante violence.

Machismo and feminicide are problems in Guatemala. Bellino (2010) and Ogrodnick & Borzutsky (2011) report that killing of women in Guatemala is a serious problem. With femicide, there is sexual abuse and torture, and there is not careful investigation of cases of female killings. Most of the time, the case does not go to trial and the criminals are almost never brought to justice. Bellino (2010) explains that males have higher-paying jobs, a higher rate of literacy, and hold positions of authority. The 2008 Law against Feminicide and Other Forms of Violence is inadequate due to an ineffective police and judicial system which does not give women access to justice. Ogrodnick and Borzutsky (2011) report that in Guatemala poverty is linked to violence against women.

Poverty in Guatemala has not been alleviated and is still a pressing problem causing lack of education, malnutrition, health problems, and death in pregnancy among women. Guatemala has a lack of democratic stability, a prevalence of repression, and constant violence. Violence against women exists for many reasons, but predominantly because of social exclusion, and the lack of application of existing laws. Women did not obtain the right to vote until 1966. Perpetrators of violence are not being prosecuted by the criminal justice system. Many non-governmental organizations have been formed to combat violence against women with limited success.

El Salvador suffered through a civil war similar to that of Guatemala. According to Villiers-Negroponte (2012), "El Salvador's war lasted approximately twelve years, took approximately 70,000 lives, displaced one quarter of a million people, and destroyed \$2 billion worth of property" (p. 15). The Salvadoran military was very oppressive of the population during the civil war and people feared death squads. El Salvador, even after the Peace Accords of 1992, has transitioned back to being a violent society. El Salvador has high rates of homicide, kidnappings and extortion. Villiers-Negroponte (2012) discusses the maras (international gangs) that extort money from businesses, assault people for valuable objects, assassinate rival gang members, and work with drug traffickers.

Case 4: Home Visit to Young Adult Victim of Violence in Guatemala

In 2013, I had the opportunity to volunteer for a week at a Catholic school that assisted children and youth in a very impoverished area of Guatemala. One day I went with a teacher to visit a home in the community. The house had no foundation, only a roof of metal, and no furniture besides one dresser and a bed. There was no running water, and smoke filled the house from cooking with wood. In the house with the mother was a young man in his early 20's who had brain damage from sniffing glue (Al-Hajri & Del Bigio, 2010). He had scores of cuts on his body from fights he had experienced. Spending two and a half hours with this family was heart-breaking. I had a difficult time trying to listen to this young man's story, being somewhat overwhelmed by the gravity of his hurts. However, I was able to make it through the interview.

In the Guatemalan newspapers, there are always articles about people being executed, taxis being extorted, gang killings, and robberies. The focus of violence is mostly on Guatemala City, where there are red zones which are very dangerous to be in, because they are controlled by gangs. I had the opportunity to travel in a van in a red zone, which was gang controlled. I was warned not to take pictures but took pictures anyway; we traveled with a person who provided security.

In El Salvador there is a great fear of violence by the gangs. They will run drugs, extort people in neighborhoods, and kill for territory. Houses in El Salvador have barbed wire and are within gated communities. In Honduras, the influence of the gangs is very strong. I had the opportunity to visit a rehabilitation facility for drugs and alcohol, where the youth were guarded by security with automatic weapons to protect them from other gangs. At night, one could not depart from the bus station in the capitol of Honduras because there was too great of a threat of being robbed. Instead, there was an alternative place of departure from the bus at night.

Violence is difficult to understand and cope with on a regular basis; it brings out a steady stream traumatic feelings. Fortunately, I never experienced this level of violence within my family of origin. Being scared of violence is not a very pleasant experience. Working with clients who have experienced violence can create feelings of secondary trauma. In all social work settings, one must be effective in helping both clients who are violent and who are victims of violence. Having been in Latin America, I have a better understanding of how violence can impact societies.

When I was flying home from El Salvador, a young man was talking with me about my experiences of anxiety in San Salvador. On the plane we were talking about the gangs, extortion, and the fear of the gang members. As we were getting off the plane, this young man said to his father, referring to me, "El hombre es muy valiente," (This man is very valiant). I thought to myself that I am not very valiant but humbled by this experience. I am humbled to understand more about violence and how to help the victims and perpetrators who are my clients.

Immigration Issues: Then and Now

My ancestors came to the United States through Ellis Island for similar reasons that Central Americans are fleeing their countries. Eastern European Jews were subjects to pogroms and other forms of violence in Eastern Europe. Jews fled due to the violence and poverty in the 19th and 20th centuries, and this common bond allowed me to greater understand the people fleeing violence.

According to Chumil (2009) Guatemalans have no other option except to immigrate. Immigrants to the United States experience great anxiety when the transit is illegal. In the U.S., immigrants find low-paying work, and lack the support of their families. There is a challenge to repay the debt to their smugglers. Family members are left behind with remittances of being sent to Guatemala. Illegal immigrants feel unsafe in employment in the U.S.

There are trauma issues related to immigration (Perez-Foster 2001), which include loss of family networks, lack of fluency, children having to conform to norms of a new culture, and major adjustment stressors linked to migration. There may be pre-migration trauma where immigrants experience negative events prior to leaving their country. Migrants often experience adjustment stress symptoms such as depression and anxiety. The first wave of migrants to the U.S. from Guatemala came for political reasons; however, immigration from Guatemala is now for economic reasons. There are an increasing number of women that are immigrating to the U.S. from Guatemala.

According to Abrego (2009), twenty to thirty five percent of the Salvadoran population emigrates. Migration to the U.S. is a critical factor for the survival of Salvadoran families, which results in a transnational approach to living–coming back and forth between the United States and El Salvador. About 40 percent of Salvadoran children grow up without both parents. Abrego (2009) discusses the lives of Salvadoran immigrants to the United States. "The exorbitant smuggling fees, the treacherous journey through Mexico, the terrible treatment in detention centers, and the vulnerability of being unprotected by any legal system–all of these realities plague the lives of unauthorized Salvadoran migrants to the United States" (p. 30).

Case 5: Helping Guatemalan Family in the United States.

In the summer of 2015, I assisted a Guatemalan mother and her children at a social service agency in the southern U.S. This mother was a legal resident and had a job washing bottles for a pharmacy company. She entered the social service complex, and no one could help her due to their lack of Spanish-speaking skills. She was very distraught because her husband was a hundred miles away in a hospital recuperating from a brain tumor operation, and he did not have insurance to pay for further care. I helped her with the Medicaid application, and we connected her to a local church for resources for her four children. I can write and speak in Spanish, and I could understand the pain that she was going through. Knowing the conditions in Guatemala and where she emigrated from was an important connection of trust.

I met one man who spent three years earning money in the same region. It was very difficult for him living in the U.S. without his family, and so he returned to Guatemala. Another man had lived in the U.S. for 8 years and is now having a hard adjustment back in Guatemala. He lost everything when he left the U.S. He felt that he was a victim of being exploited by low wages and lived in very difficult conditions. He recollected that there was no heat in his house, and that one Guatemalan friend probably died of exposure. Guatemalan newspapers reflect on the difficulty of immigrating to the United States through Mexico with financial and sexual exploitation being common practice.

In El Salvador and Honduras, there is a concerted effort to leave the poverty and violence in the country. Whole villages have been decimated by immigration to the United States. Young men and young women either turn to the gangs or decide to immigrate to the United States. On the plane coming and going from El Salvador, there were mostly Salvadorans and very few tourists. There is transnational movement between the U.S. and El Salvador.

Central Americans leaving their countries, like my ancestors leaving Eastern Europe, experienced extreme stress and sometimes trauma. For me, traveling back and forth to Central America gives me the feeling of what my ancestors must have experienced. It also makes me a better social worker by understanding historically what immigrants have experienced in coming to the United States.

Conclusion

Social work practice is a life-enriching experience; to be effective in practice one must understand their own family of origin. I have been fortunate enough to practice social work since 1976 after graduating from the University of Georgia. I have grown and transitioned from a cutoff within my family of origin to establishing my own family and becoming a family therapist. I have experienced stress as a social worker but have managed it through self-care so that I have not been overwhelmed by secondary trauma from working with clients.

In the last eight years, I have experienced a transformation in my practice by confronting family of origin and family issues through travel. The five case studies reflect this transformation: 1. My visit to the nursing home in northern Guatemala reflects my spiritual journey in life. 2. The visit to a poor community in Guatemala puts poverty in perspective based on my family of origin. 3. My visit to the garbage dump in Guatemala City in the summer of 2012 brought feelings of countertransference from my family. 4. My visit to a family in an impoverished area of Guatemala helped me to understand more about the consequences of violence and its toll on the human spirit. 5. Helping a Guatemalan mother reinforced the importance of immigration among all ethnic groups and the struggle that it entails.

As social workers, recognizing the importance of family of origin issues is critical in practice. Understanding how transference and countertransference affect social work practice is also important. In addition, practicing self-care and not being overwhelmed by secondary trauma is an important element of practice.

References

A national shame. (2009). Economist, 392(8646), 33.

Al-Hajri, Z. & Del Bigio, M. (2010). Brain damage in a large cohort of solvent users. *Acta Neuropathol*, *119*, 435-445.

Abrego, L. J. (2009). Rethinking El Salvador's transnational families. *NACLA Report on the Americas*, *42*(6), 28-32.

Bellino, M. (2010). Feminicide and silence in "Postwar" Guatemala. *Women's Policy Journal of Harvard*, 7, 5-9.

Brands, H. (2011). Crime, irregular warfare, and institutional failure in Latin America: Guatemala as a case study. *Studies in Conflict and Terrorism, 34*, 228-247. doi: 10.1080/1057610X.2011.545937

Chirico, J. (2014). *Globalization prospects and problems*. Thousand Oaks, CA: Sage.

Chumil, M. (2009). Thoughts on migration: A journey a los USA: Migration dynamics and United States policy. *Journal of Poverty, 13*, 350-358. doi: 10.1080/10875540903164032

Cox, D. & Pawar, M. (2013). *International social work: Issues, strategies, and programs.* Thousand Oaks, CA: Sage.

Cox, K. & Steiner, S. (2013). Preserving commitment to social services through the prevention of vicarious trauma. *Journal of Social Values and Ethics*, *10*(1), 60.

Cruz, J. M. (2009). Central American maras: From street gangs to transnational protection rackets. *Global Crime, 11*(4), 379-398. doi: 10.1080/17440572.2010.519518

Felbergaum, S. (2010). Memory, mourning and meaning in psychotherapy. *Journal of Clinical Social Work, 38*, 269-274. Doi 10.1007/s10615-009-0222-4.

Gedo, P. M. (2013). Transference-countertransference repetitions of traumatic affects. *Bulletin of the Menninger Foundation*, 77(2), 161-177.

Gonzalez, X. (2014, January 13). Las ninas que no quieren. *El Mundo*, p.10.

Kanter, J. (2007). Compassion fatigue and secondary traumatization: A second look. *Journal of Clinical*

Social Work, 35, 289-293.

Leonard, T. (2011). *History of Honduras*. Santa Barbara, CA: Greenwood.

Marini, A. & Graganolati, M. (2003). Malnutrition and poverty in Guatemala. Policy Research Working Paper, World Bank, Washington, D.C. Retrieved from http://wwwwds.worldbank.org/servlet/WDSContentSe rver/WDSP/IB/2003/02/22/000094946_03020704162 52/Rendered/PDF/multi0page.pdf

Molesky-Poz, J. (2006). *Contemporary Maya spirituality: The ancient ways are not lost.* Austin, TX: University of Texas Press.

Offitt, T. A. (2008). *Conquistadores de la calle: Child labor in Guatemala City*. Austin: University of Texas Press.

Ogrodnick, C. & Borzutzky, S. (2010). Women under attack: Violence and poverty in Guatemala. *Journal of International Women's Studies*, *12*(1), 55-67. Retrieved from http://vc.bridgew.edu/jiws/vol12/iss1/4

Putman, K. M., Lantz, J. I., Potts, A. A., Gallegos, A. M., Herrera, S., Eriksson, C. B., Steenwyk, M. & Foy, E. W. (2008). Cultural understandings of child sexual abuse from aid workers and parents at the Guatemala city dump community. *Journal of Child & Adolescent Trauma*, 1, 349-364.

Perez-Foster, M. (2001). When immigration is trauma: Guidelines for the individual and family clinician. *American Journal of Orthopsychiatry*, *71*(2), 153-170. doi: 10.1037/0002-9432.71.2.153

Sermeno, H. (2014, January 16). El Salvador tiene mas muertes por alcoholism. *El Diario de Hoy*, p.64.

Tuttle, C. J. (2006). History repeats itself: Child labor in Latin America. *Employee Responsibility and Rights Journal*, 18, 143-154.

Villiers-Negroponte, D. (2012). *Seeking peace in El Salvador*. New York, NY: Palgrave. McMillan.

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