

## **Role of Psychocultural Factors in the Adjustment of Soviet Jewish Refugees: Applying Kleinian Theory of Mourning**

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*The purpose of this paper is to show how failures of adjustment of Soviet refugees to America are to a great degree determined by their difficulties in mourning. The author argues that due to such difficulties, Soviet refugees may get fixated sometimes for long periods of time at different stages of the mourning process. Such fixations may be the causes for peculiar types of behavior, frequently exhibited by these refugees in America and attributed by various authors to their psychocultural characteristics. Melanie Klein's analysis of mourning and its relationship to manic depressive states is applied to understand the mourning process in this population. The author shows that difficulties in the mourning process experienced by Soviet refugees may be connected with the culturally acquired inhibitions of mourning. Such inhibitions are analyzed from a family, historical and cultural perspective.*

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“Lenin is always alive,  
Lenin is always together with you  
He is in your pain, your hope,  
your joy . . . ”

—A popular Soviet song.

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## INTRODUCTION

Many authors have focused on the adjustment difficulties of Soviet refugees in America (Belozersky, 1989, Goldstein, 1978, 1984, Galperin & Howells, 1984). Refugees' adjustment problems have been described in terms of psychosomatic illnesses, depression, paranoid and antisocial behavior, and comparatively analyzed from the point of view of cultural, social and psychological differences. Thus, Belozersky distinguishes several common psychocultural characteristics of the refugees which she feels are connected with their Soviet background. These are: 1) unrealistic expectations; 2) sense of entitlement; 3) loss of the sense of security; 4) identity by status; 5) overdependency; 6) perseverance; 7) manipulative behavior; 8) difficulty in establishing trusting relationships; 9) strong reliance on family and friends; 10) ambivalence about Jewish identity (Belozersky, 1989).

Hulewat (1981) finds that Soviet immigrants in America use traditional Soviet cultural patterns. This often creates tremendous difficulties for the resettlement workers who may "see clients who present demanding and aggressive behavior, who have great difficulty learning to keep appointments rather than walk in, and who view manipulation as an acceptable method for getting needs met" (Hulewat, 1981, p. 60). Being a refugee from the Soviet Union myself, I remember how shocked I was when I first started working with Soviet immigrants at the Jewish Board of Family and Children's Services. I saw the phenomena described by Hulewat and Belozersky and I could not believe my eyes. It almost seemed that the people whom I saw at the Jewish Board had undergone a miraculous change and bore in themselves condensed images of "Homo Sovieticus" (cf. Goldstein, 1984) which showed in their behavior. At the same time those were the people who, to a certain degree, chose to renounce their Soviet identity to become refugees. Many of them had been dreaming of becoming Americans long before they obtained exit visas.

One might assume that having come to America, Soviet Jews would not have an easy adjustment, but this is not what happens to most. However, there is another factor which may contribute to the strange characteristics one may observe in Soviet immigrants; namely, immigration. As I wrote elsewhere (Yaglom, 1991) Russian immigrants tend to deny the losses they go through because of immigration. Those are the losses of significant relationships, status, identity, financial security and many others.

Many authors have noted that Soviet refugees are very resistant to mourn their losses (Galperin & Howells, 1984, Hulewat, 1981). Yet, as it is known, there are many stages in uncomplicated as well as in complicated mourning (Klein, 1940, Volkan, 1981). Thus, I will show further how various types of behavior which we see in Soviet refugee clients may in fact

be characteristic of the stages of mourning in which they get fixated for certain reasons. However, before I can do so, I need to describe the psychological and cultural reasons which make mourning such a difficult task for the Soviet refugees.

Historically, mourning was banned in the Soviet Union. It was considered a sign of bourgeois weakness to grieve. The Bolshevik regime erased almost all cultural and religious customs of mourning. As Melanie Klein would have put it, the regime engaged in scotomization or denial of psychic and forms of reality—the slogan of the Communist rulers. Thousand of citizens were killed in the Second World War, but the country proceeded marching on with songs to build Communism. During the Lenin's and Stalin's regime people were arrested at night and were never seen or heard of again while members of their families, if they were lucky to stay alive, would glorify their rulers and thank them for their happy lives.

Many songs, just as the one in the epigraph to this paper, proclaimed total denial of any possible losses. Mourning, in general, involves struggle against chaos inside (Klein, 1940). Thus, chaos emerged during *Perestroika* in the Soviet Union when the country started openly acknowledging the losses of the 70 years of the Soviet Regime for the first time. Soviet immigrants acquired cultural inhibitions to mourn which may protect them against internal chaos. As Goldstein put it, the "Soviet immigrant carries within himself a totalitarian state of 'inner dictates' reinforced by all his experiences in a totalitarian society" (Goldstein, 1978, p. 3).

Closely related to the issue of mourning are the issues of autonomy, separation and individuation. These issues are connected because the ability to mourn depends upon sufficient internalization of the internal objects which in its turn determines achievement of *autonomy*, and *separation* and *individuation* (Klein, 1940; Mahler, 1972). Soviet ideology disapproved of differences. As Goldstein noted, a Soviet citizen could achieve the feeling of being a productive worthwhile individual *only through collective work* (Goldstein, 1984). Being separate in the Soviet Union meant being different, which was equal to being an enemy. However, Soviet Jews were viewed as different due to anti-Semitism and many grew up conflicted around the issues of autonomy and individuation. Partly that was the reason and it gave impetus to emigration. Partly it contributed to the inner turmoil in which they developed. There is yet another level which it is important to consider if one is trying to find reasons for the difficulties Soviet immigrants may have with mourning.

In her analysis of the dynamics of the Soviet Jewish family, Phyllis Hulewat (1981) showed that the Soviet "family system is not structured to deal with the loss and anxiety of immigration." She analyzed development

of self and object relations in the Soviet immigrant family and showed that Soviet parents have tremendous difficulties seeing their children as separate and stay enmeshed with them throughout their whole life.

From my own memories about the child rearing customs in the Soviet Union, I know that a "good enough mother" (Winnicott, 1960) according to the Soviet standards was supposed to follow the rigid schedule of feeding prescribed by a medical authority. The emphasis on feeding was enormous. As Hulewat describes it, children were often picked up and fed in response to their crying. "Feeding then continues throughout life to be the primary method for the expression of caring" (*ibid.*, p. 54). Further Hulewat describes how throughout all the stages of separation and individuation parents reinforce dependency needs, support unrealistic grandiosity and omnipotence by being oversolicitous, and thus inhibit the mourning process at the very early stages. She also noted that Soviet parents usually do not accept assertiveness, and use discipline as a way of coercing compliance in children.

A child is usually punished not because the behavior was wrong, but because it was a sign of betrayal. (In the same way being different was punished in the Soviet society.) Thus Hulewat states that a child brought up in a Soviet family cannot securely internalize his inner objects. One must take into consideration, however, that Hulewat bases her analysis on the observation of immigrant Soviet families who, since they are unable to mourn their losses, treat their children as containers of their losses. Thus parenting is affected, on one hand, by maladaptive patterns which they acquired in the Soviet Union during childhood and through the norms of the society, and, on the other hand, it is affected by their adjustment process in which they very often get stuck because they deny their losses.

Consequently, the refugees are more prone to inhibit separation attempts in their children than are those parents who did not go through immigration. This is because immigrants experience more intense feelings of abandonment and fear of separation themselves. This tendency has serious implications for practice: If Soviet immigrants could be helped with mourning of their losses, they could become better adjusted as parents also. In my clinical work I have seen parents who were unable to even help their children assert themselves after they resolved their own mourning. Thus, Engel (1961) noted, that maintenance or replacement of the lost objects must be considered important variable in sustained health and adjustment.

Every adult object loss appears to reactivate affects pertaining to childhood experiences of loss (Volkan, 1981). This which gives grieving a unique opportunity to change personal history because every resolved grieving process includes the reinstatement of internal objects (Klein, 1940).

Thus "in normal mourning, the individual reintroduces . . . his 'good' inner objects. His inner world, which he has built up from his earliest days onwards, in his phantasy was destroyed when the actual loss occurred. The rebuilding of this inner world characterizes the successful work of mourning" (ibid. p. 167). As several authors pointed out, a mourner is ill (Engel, 1961, Volkan, 1981, Klein, 1940) and in normal mourning there occurs reactivation of early psychotic anxieties. The mourner feels that his internal world is dominated by "bad" objects.

According to Melanie Klein (1940) the mourner goes "through a modified and transitory manic-depressive state and overcomes it, thus repeating, though in different circumstances and with different manifestations, the processes which the child normally goes through in his early development" (p. 157). Those processes include depressive position and defenses against it. Depressive position develops initially during weaning and is connected with the sense of failure to secure a "good" internalized object. The position consists of working through two sets of feelings: *persecutory* fears over destruction of the ego by internal persecutors, and *feelings of sorrow and concern* for the loved objects including fears of losing them and longing to regain them. Both sets of feelings are characterized by defenses used to combat them.

The defenses against persecutory fantasies are generally paranoid and destructive, and originate from the relationship of a child to part objects (Klein, 1935). The defenses against the "pining" for the loved objects (second set of feelings) are manic defenses. Characteristic paranoid defenses are aimed at annihilation of the "persecutors" whether inside the body or in the outside world by means of oral urethral and anal sadism (Klein, 1935). On the contrary, in the mania the sense of omnipotence is utilized for the purpose of controlling and mastering objects. As Melanie Klein points it out, it is being done in order to deny the fear of retaliation, of being destroyed by the internal objects, on one hand, and in order to make reparation to the object. The characteristics of mania are hunger for objects (incorporation of the object in cannibalistic way), disparagement of the object's importance and the contempt for it ("there are so many others out there to be incorporated").

Another essential part of the manic position is idealization which works together with denial. When the ego feels threatened by the depressive position at its height, it needs to deny psychic reality (partially and temporarily). Thus, the ego defends itself against its fear of internal persecutors and against its anxiety about the loss of loved objects with the help of omnipotence, denial, idealization and ambivalence. This results in splitting and eventually enables "the small child to gain more trust and belief in its real objects and thus in its internalized ones—to love them

more and to carry out in an increasing degree its phantasies of restoration of the loved object" (Klein, 1935, p. 143).

Manic defenses deny or minimize dangers from various sources in an omnipotent way. When and if such defenses fail, the ego tries (sometimes even simultaneously) to fight the fears of annihilation by attempts at reparation which are carried out in obsessional ways. Obsessional mechanisms can work as a means of modifying and defending against paranoid anxieties as well as a means of support of manic defenses. However, such close connection between the manic defenses and obsessional mechanisms gives rise to triumph which is a destructive aspect of the manic position. Triumph comes out of the desire to control the object out of sadistic gratification of overcoming it, getting the better of it. By disturbing the reparation, triumph impedes the work of mourning.

As Melanie Klein noted, triumph very often stands in the way of achievement of any kind because of the guilt which comes with triumph, guilt about possibility of damaging or humiliation of the internal objects. When the child goes through early mourning, working through the depressive position, he depends a lot upon the external reality. Constant proofs which he may get from testing external reality result in the increase in the integration and the security of his good inner world. He starts to believe in his capacity for love and in his reparative powers. This in itself leads to the diminishment of manic defenses and obsessive impulses towards reparation.

Here one may see the connection between the ability to work through depressive position which further allows for going through the uncomplicated mourning and the world around the child. "The more the child can, at this stage, develop a happy relationship to its real mother, the more it will be able to overcome the depressive position" (Klein, 1935, p. 143). Inner harmony, security and integration ensue if a child lives in a world of people predominantly at peace with each other, and with its ego (Klein, 1940).

## THEORETICAL RELEVANCE TO SOVIET REFUGEES

Klein's contribution to the analysis of mourning makes it easier to understand the difficulties which Soviet refugees may experience in their adjustment to the new country. As mentioned before, Soviet life in general reinforced manic defenses, did not allow for expression of aggression, fostered splitting (c.f. famous Bolshevik slogan: "Those who are not with us, are against us"). Hulewat (1981) noted analogous mechanisms at work in the life of immigrant Soviet families which as a consequence retard early mourning. On the other hand, life in the totalitarian state in general, makes it difficult to preserve peace and harmony at home which in itself may be

detrimental for the normal child's development. Immigration, which leads to the loss of objects that is experienced as a threat of the loss of internal objects, creates conditions in which on a certain level, mourning is much more difficult than in the case of losing an object to death. In case of grieving over the deceased, the mourner struggles with acceptance of the external change which in reality is retrievable. "Uncomplicated mourning leads to identification with the 'good' aspects of the deceased, and thus the enrichment of the mourner's personality structure" (Volkan, 1981).

However, when refugees flee their country of origin, no one usually dies. They become separated from their self objects, but in actuality the objects continue their own life. This makes mourning even more difficult for several reasons. Since internal work of mourning includes dealing with phantasies of killing the objects, it gives rise to greater ambivalence in case of mourning the lost objects that actually stay alive. At the same time, the work of mourning comes into contradiction with the purpose of emigration by increasing the pull back which makes adjustment more difficult.

The refugees who are coming from the former Soviet Union now are at greater disadvantage because they could go back (which was much more difficult before). They therefore need to repress their pull back by themselves (the work previously done for them by the political system) and thus their lost objects are much more alive than the lost objects behind "the iron curtain." This may impede the work of mourning even more. It is much more difficult for them to identify with the positive aspects of their lost objects and may produce greater inner turmoil. On the other hand, triumph, which as Melanie Klein pointed out retards the work of mourning plays special role in the situation of leaving the country that seems to be falling apart. Triumph may impede mourning process in those who are leaving their country now as well as in those who had left it a while ago, and have witnessed decay and chaos. They may indeed experience survivor's guilt stemming from triumph over the lost parental figures. Thus, it becomes very difficult to relinquish the past and the present; the life of an immigrant indeed becomes split up into two halves which cannot come together because bringing them together will increase the anxiety about the internal destruction of objects and internal reparation.

From my clinical experience, Soviet refugees very rarely allow themselves to debate the questions of why they came to America, whether it was a right thing to do, whether they should go back, etc. The only exception are very depressed clients who are past this conflict and have become stuck in pathological mourning (Volkan, 1981). Clinicians who work with Soviet immigrants are usually very frustrated with their inability to establish trusting relationships due in part to psychocultural characteristics of the refugees.

This difficulty especially demonstrates itself in the beginning of the resettlement process. Melanie Klein wrote that paranoid fears and suspicions are usually reinforced as a defense against the depressive position against experience of sorrow and anxiety about the security of internal objects (Klein, 1935). Resettlement workers need to feel gratified by what they do and they usually expect the clients to be grateful and cooperative in return for help provided. They try to encourage clients by telling them that now their troubles are over and that they should be happy because they are now in America. However, such attitude only impedes mourning by making it again culturally unacceptable and in its turn paranoid defenses rise and we see clients who are very mistrustful, suspicious, feel entitled, cheated, and rageful.

There is another reason to fixate on the paranoid position: an immigrant cannot afford feeling depressed because of the necessity to fight for survival. I remember a client who initially was referred to the agency because she suspected all her relatives, one after another, in cheating her out of money, and who gradually, in the course of therapy, became very depressed and only repeated saying: "I do not want to feel all this, I want to feel normal." However, only after she went through her pain and sorrow in therapy was she able to reinstate her relationships with her relatives. "The reinforcing of feelings of persecution in the state of mourning is all more painful because as a result of an increase in ambivalence and distrust, friendly relations with people, which might at that time be so helpful, become impeded" (Klein, 1940, p. 156).

Thus, during immigration (accompanied by the loss of meaningful social contacts) paranoid defenses may increase because of the interpersonal void in which a person may find oneself. This explains why sometimes we see clients who stay at this stage for many years. It is very important though to distinguish between such clients and clients with paranoid personality disorders for obvious reasons, because the former may be helped through facilitated mourning. In my work with Soviet immigrants, I have also seen them use a lot of manic defenses. Actually, such people rarely seek therapy for themselves, but they could be brought to therapy by their dysfunctional children or by their spouses who may be dissatisfied with the family situation.

In part the use of manic defenses accounts for the success the Soviet refugees have accomplished in America (that is, perseverance, another psychocultural characteristic). Use of omnipotence allows them to work for sixteen hours a day, denial helps them to overcome physical exhaustion and idealization of the American dream provides one with goals in life. Very often such people seek help for their physical ailments which result from their inability to stop and rest, sometimes they seek therapy when it is obvious to them that they have finally made it here in America and



suddenly they perceive life as empty. Many people invest all their energy and time in fulfilling a fantasy of building a house which in a certain way is an attempt to recreate good objects inside. Fulfilling this fantasy very often involves the work of obsessional mechanisms used to combat the infantile depressive position.

### Case Example 2

I had treated a couple that devoted all their life to buying the house of their dreams; they sacrificed many things, never had lunch for eight years, they did not spend time together because they worked two jobs at a time, their son did not have his own room because they were saving money for the house and could not rent a better apartment. The wife, who had undergone a major operation in the beginning of their immigration, neglected herself and never went for medical check-ups. They overidealized suburban America explaining that all their son's problems (he was quite unhappy and had difficulties with his peers) stem from the fact that they lived in New York (an example of how splitting works). They also denied missing anything about their life in the Soviet Union, and at the same time, they could not accept their teenaged son's budding American identity and were constantly worried about him not reading the books they grew up with or wearing American clothes. Describing their departure from the Soviet Union, they both said that they did not want to say "good bye". The husband said that he occupied himself with different errands during the period of leaving and the wife said that she subsequently dreamed a lot about their house in the Soviet Union catching on fire and being burnt. Unfortunately, the therapy was interrupted because the couple bought a house and moved out of New York. Close to the end they started remembering the friends they left in the Soviet Union which let them realize how lonely they had been. However, their persecutory fantasies were still very strong, they were extremely alienated from the world around them, and as I found out by calling them to check how they were, it turned out that they went out of their way to sponsor their friends' coming to the U.S. They had not seen them for more than ten years and when the friends came, they could not actually stand them (which could also be linked to their inability to mourn and the work of persecutory fantasies).

What struck me in this family, as well as in many other Soviet refugee families, was that even though they were seemingly well-adjusted on the surface in that they held prestigious jobs, were well educated, and showed concern about their son's education, they nevertheless showed maladaptive patterns typically labelled as Soviet, the same behavior represented being stuck in the mourning process. Thus, a child who may have good manners, suddenly when frustrated beyond the level of tolerance, starts behaving as his hysterical mother used to. In a similar way, Soviet refugees reproduce maladaptive patterns of behavior which they brought with them in their unconscious memory from the Soviet Union, the country that prohibited mourning to its citizens and institutionalized a lot of defenses against mourning into forms of socially accepted and required behavior.

It is important to understand that even those who distanced themselves from "Soviet" behavior, carry it inside and demonstrate such forms of behavior when they are unable to cope with their losses. Failure to mourn results in failure to truly adjust to the life in America. The inability to regain trust in external objects and values impedes the ability to have confidence in the lost objects. Thus, it is common especially among the newly arrived emigres to renounce Russian culture and the values which initially helped them to make their choice and leave Russia. Such renunciation creates further impoverishment and leads to a situation in which an immigrant has nowhere to turn to because he has not developed any significant relationships yet in the new country, while already disposed of all his past.

Grief may be a disease indeed, however, it is different from many other diseases in one respect: "When it is 'healed' the healing may include creative restitution and adaptation that actually enrich the mourner in general ways" (Volkan, 1981, p. 49). This enhances the potential for growth in immigration, as well as in dealing with losses. In order to be able to grow out of their old "Soviet" clothes, and bring to life the precious seeds from their past, Soviet refugees need to be helped to feel their pain and "while grief is experienced to the full and despair is at its height, the love for the object wells up and the mourner feels more strongly that life inside and outside will go on after all, and that the lost loved object can be preserved within" (Klein, 1940, p. 163). This places very important responsibility on those who work with Russian immigrants, helping them to go through their adjustment process.

As Searles put it, there are two types of hopes: realistic and unrealistic. Unrealistic hope is unconscious and based on denial. Realistic hope is grounded in the ability to experience loss, such hope survives over despair (Searles, 1984). He states that "the determinedly optimistic therapist coerces . . . his patients into experiencing depression which he is too threatened to feel himself" (Searles, 1984, p. 48). In a similar way the environment that immigrants face coming to America, the whole environment including all interpersonal contacts coerces them to be stuck in mourning because they "should be so happy that they have come to the U.S." And thus they stay with unrealistic hope together with the deceased Lenin (as seen in the epigraph) while real hope for them could emerge only through their facing feelings of disappointment and despair.

## REFERENCES

- Belozersky, I. (1989). *Psychocultural frame of reference of refugee groups*. Presented at Conference *Making It in America*, New York, September 14.

- Engel, G. L. (1961). Is grief a disease? A challenge for medical research. *Psychosomatic Medicine*, 23, 18-22.
- Goldstein, E. (1978). *Problems of psychological adaptations of recent immigrants to the West: Adaptation to freedom*. Presented at the 7th World Congress of Social Psychiatry, New York.
- Goldstein, E. (1984). "Homo Sovieticus" in Transition: Psychoanalysis and problems of social adjustment. *Journal of the American Academy of Psychoanalysis*, 12, 115-126.
- Howells, P. & Galperin M. (1984). *Pseudo-speciation and the Soviet Jewish immigrant*. Presented at the third Annual Erik Erikson Conference on the Psychology of Soviet American Relations, Esalen Institute, Ca.
- Hulewat, P. (1981). Dynamics of the Soviet Jewish family: Its impact on clinical practice for the Jewish family agency. *Journal of Jewish Communal Service*, 48, 53-60.
- Klein, M. (1935). A contribution to the psychogenesis of manic-depressive states. In J. Mitchell (Ed.), *The Selected Melanie Klein*. The Free Press, New York, 1987.
- Klein, M. (1940). Mourning and its relation to manic-depressive states. In J. Mitchell (Ed.), *The Selected Melanie Klein*. New York: The Free Press.
- Mahler, M. (1972). On the first three phases of the separation-individuation process. *International Journal of Psychoanalysis*, 53, 333-338.
- Searles, H. F. (1984). Mature hope in patient-therapist relationship. In *Countertransference and Related Subjects*. New York: International Universities Press.
- Volkan, V. (1981). *Linking objects and linking phenomena: A study of the forms, symptoms, metapsychology, and therapy of complicated mourning*. New York: International Universities Press.
- Winnicott, D. W. (1960). The theory of the parent infant relationship. In *The Maturational Process and the Facilitating Environment*. New York: International Universities Press.
- Yaglom, M. (1991). *The impact of loss and mourning on the Soviet immigrant teenagers and their families. Some implications for clinical practice*. Presented at a National Conference on Soviet Refugee Health and Mental Health. Chicago, Illinois, December 10-12.