



PERSPECTIVE OF IMMIGRANTS ON PERSONAL AND FAMILY INTEGRATION IN BRAZILIAN SOCIETY

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ABSTRACT

Objective: to describe the experiences of immigrants and their families related to integration in Brazil.

Method: this is a descriptive study, with a qualitative approach, carried out in a municipality in southern Brazil. The informants were 13 immigrants who had lived in Brazil between six months and five years and who were able to communicate in Portuguese, English or Spanish. Data were collected between May and November 2021, through semi-structured interviews, audio-recorded and subjected to thematic content analysis.

Results: the 13 participants were aged between 27 and 65 years (mean age 36 years), nine of whom were women, seven from Venezuela and the others from countries in South, Central America and Africa. Three categories emerged which show the adversities experienced, especially in relation to jobs (low wages, labor exploitation, non-recognition of academic titles), communication difficulties and distance from family. On the other hand, they also show satisfaction with public safety, health care and the possibility of personal and professional development. To maintain family unity and their origins, people in an immigration situation financially help members who could not migrate, make typical foods and use the native language in the home environment.

Conclusion: integration into Brazilian society is permeated by challenges, namely the absence/distance from family of origin and/or constituted, lack of understanding of language, work and financial problems and social support network weakness. However, immigrants seek to maintain an adequate family functioning based on the support of institutions and the maintenance of the culture of origin.

DESCRIPTORS: Family. Immigration. Family Relationships. Family Dynamics. Family Nursing. Migrant-Receiving Society. Acculturation.

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PERSPECTIVA DE IMIGRANTES SOBRE A INTEGRAÇÃO PESSOAL E FAMILIAR NA SOCIEDADE BRASILEIRA

RESUMO

Objetivo: descrever as vivências de imigrantes e suas famílias relativas à integração no Brasil.

Método: estudo descritivo, com abordagem qualitativa, realizado em município no Sul do Brasil. Os informantes foram 13 imigrantes que residiam no Brasil entre seis meses e cinco anos e que conseguiam se comunicar em português, inglês ou espanhol. Os dados foram coletados entre maio e novembro de 2021, mediante entrevistas semiestruturadas, audiogravadas e submetidas à análise de conteúdo temática.

Resultados: os 13 participantes tinham idades entre 27 e 65 anos (média de 36 anos), sendo nove mulheres, sete provenientes da Venezuela e os demais de países da América do Sul, Central e África. Emergiram três categorias as quais mostram as adversidades experienciadas, sobretudo em relação a empregos (baixos salários, exploração de mão de obra, não reconhecimento de títulos acadêmicos), dificuldades de comunicação e distância da família. Por outro lado, mostram também a satisfação com a segurança pública, assistência à saúde e possibilidade de desenvolvimento pessoal e profissional. Para manter a união familiar e suas origens, as pessoas em situação de imigração ajudam financeiramente os membros que não puderam migrar, fazem comidas típicas e utilizam o idioma nativo no ambiente domiciliar.

Conclusão: a integração à sociedade brasileira é permeada por desafios, nomeadamente pela ausência/ distância da família de origem e/ou constituída, não compreensão do idioma, problemas laborais e financeiros e fragilidade na rede de apoio social. Contudo, os imigrantes buscam manter um adequado funcionamento familiar a partir do apoio de instituições e da manutenção da cultura de origem.

DESCRITORES: Família. Imigração. Relações familiares. Dinâmica familiar. Enfermagem familiar. Sociedade Receptora de Migrantes. Aculturação.

PERSPECTIVA DE LOS INMIGRANTES SOBRE LA INTEGRACIÓN PERSONAL Y FAMILIAR EN LA SOCIEDAD BRASILEÑA

RESUMEN

Objetivo: describir las experiencias de los inmigrantes y sus familias con respecto a la integración en Brasil. **Método:** estudio descriptivo, con abordaje cualitativo, realizado en un municipio del sur de Brasil. Los informantes fueron 13 inmigrantes que habían vivido en Brasil entre seis meses y cinco años y que podían comunicarse en portugués, inglés o español. Los datos fueron recolectados entre mayo y noviembre de 2021, a través de entrevistas semiestructuradas, grabadas en audio y sometidas a análisis de contenido temático. **Resultados:** los 13 participantes tenían entre 27 y 65 años (edad media 36 años), nueve de los cuales eran mujeres, siete de Venezuela y los demás de países de América del Sur, Central y África. Emergieron tres categorías que muestran las adversidades vividas, especialmente en relación al trabajo (bajos salarios, explotación laboral, no reconocimiento de títulos académicos), dificultades de comunicación y distanciamiento familiar. Por otro lado, también muestran satisfacción con la seguridad pública, la atención de la salud y la posibilidad de desarrollo personal y profesional. Para mantener la unidad familiar y sus orígenes, las personas en situación de inmigración ayudan económicamente a los miembros que no pudieron migrar, elaboran comidas típicas y utilizan la lengua materna en el ámbito familiar.

Conclusión: la integración en la sociedad brasileña está permeada por desafíos, a saber, la ausencia/lejanía de la familia de origen y/o constituida, la falta de comprensión del idioma, los problemas laborales y financieros y la debilidad en la red de apoyo social. Sin embargo, los inmigrantes buscan mantener un adecuado funcionamiento familiar basado en el apoyo de las instituciones y el mantenimiento de la cultura de origen.

DESCRIPTORES: Familia. Inmigración. Relaciones Familiares. Dinámica Familiar. Enfermería Familiar. Sociedad Receptora de Migrantes. Aculturación.

INTRODUCTION

An immigrant is a person who leaves their place of origin and settles in a new country. This change can occur spontaneously or forced by reasons that go beyond individual will, including wars, persecutions and conflicts. In 2020, it was estimated that one in every 30 people in the world was an immigrant, which corresponds to 281 million people displaced from their country of origin¹. In the Brazilian context, the scenario is no different, since, in 2021, about 1.3 million immigrants resided in the country, with the largest migratory flows originating from Venezuela, Haiti, Bolivia and Colombia².

The migration process has been characterized as an unprecedented global phenomenon, with important repercussions in the macro and micro social spheres, which affects family life in different ways³. As the first social institution and main pattern maker, the family exerts a great behavioral and psychological influence on individuals, in addition to shaping their attitudes⁴. It is configured, therefore, as a complex system whose functions are to guarantee the subsistence of its members, care in health and illness, in addition to offering affection, support and promoting resilience in crisis situations³. According to the theory of family systems, the family constitutes a whole, which is subdivided into dyads and open subsystems, and each of its members also constitutes a whole individually⁵.

Negative interactions, such as separations, losses and physical distancing, promote important changes in the family system as a whole, reverberating in each of its members³. Family functioning is impaired when a family experiences an adverse situation, which can lead to conflicts, financial difficulties, separation from the family nucleus, changes in its structure and development, among others⁶. However, interactions with each other and with extrafamilial systems allow the family to find a balance between change and stability⁵.

The feeling of loss is a very common emotional aspect in immigrant families, and can even be compared to mourning. This is because it involves, in addition to physical displacement and family separation, the loss of their land, their home, their belongings, their language, their professional career and their connections with the community⁷.

How immigrants experience stressful situations that can lead to a certain degree of psychic suffering, marked by isolation and social, economic and affective vulnerability⁸, they require integration into the new environment. Some factors with the potential to promote the resilience of this population and favor their integration into the new society involve culture, familism, religiosity, biculturalism, empathy and community support.

In turn, family resilience refers to the changes that occur in its functioning in the face of adverse situations, which involves positive adaptation and allows its members to regain the ability to thrive despite suffering and struggle, emerging stronger in the face of future challenges⁹.

Thus, by considering the family as a system in constant adaptation and that can achieve resilience by experiencing situations that modify its functioning, especially knowing that there is a large contingent of immigrants in Brazil and that no studies were located on the integration of these families into the Brazilian context, it was defined as the objective of this research to describe the experiences of immigrants and their families related to integration in Brazil.

METHOD

This is a descriptive-exploratory study with a qualitative approach, which integrates a multicenter study carried out in Brazil, Portugal and Spain. In this section, data from immigrants residing in a municipality in the state of Paraná, southern Brazil, will be presented. The Consolidated criteria for Reporting Qualitative research (COREQ) was used to guide the writing of this study.

Among the three states in southern Brazil, between 2010 and 2019, Paraná received the highest number of immigrants (48,826, with Santa Catarina receiving 47,413 and Rio Grande do Sul,45,967)². The municipality under study is the third in the state of Paraná in terms of population (estimated 436,472 inhabitants)¹⁰ and constitutes an important economic and educational hub, which justifies its choice as a place of residence for many immigrants.

Immigrants aged 18 years or older, residing in Brazil for at least six months and who understood/spoke Portuguese, English or Spanish were eligible to participate in the multicenter study. In turn, those with fixed residence for more than five years were excluded, as they understood that, theoretically, they would already be integrated into the country's culture. They were located when they looked for a non-governmental organization (NGO) that provides support to immigrants, with a view to facilitating the initial integration, upon arrival in the country/municipality, and also through the snowball technique use¹¹.

Immigrants participating in the present study were selected among the matrix study participants, taking into account their interest in the subject, availability of time and willingness to collaborate. An invitation to include new participants was held until the data became repetitive and the objective of the study had already been achieved. Data collection took place between May and November 2021, through in-depth interviews carried out in person in Portuguese, English or Spanish, depending on participants' capacity. The interviews were conducted by the same researcher (nurse, master's student in nursing, with experience in collecting qualitative data), who did not maintain any relationship with participants, in addition to being welcomed in the institution. However, touched by the reported needs and knowing the work that was carried out there, she began to act voluntarily after the matrix study began.

The face-to-face interviews lasted about 50 minutes, were audio-recorded after consent and were held in a location, day and time defined by participants, six of which were carried out through home visits and another seven at the NGO's premises. The interviews were conducted through the application of a sociodemographic questionnaire and the use of some guiding questions, constructed based on the objective of the study and the current literature on the subject, namely: What is it like for you to live outside your home country? Under what conditions did you come to Brazil? Talk about it. How has your integration and that of your family been in Brazil? Talk about it. What are the main challenges faced in the immigration process? What is your support network here in Brazil? How is your relationship with the family members who stayed in the country of origin? Tell me more about this experience.

The interviews were transcribed in full, preferably on the same day they were held, translated into Portuguese when necessary and subsequently submitted to content analysis, thematic modality following the three pre-defined steps¹². In pre-analysis, speeches were organized by systematizing the initial ideas through text skimming of the analysis corpus. In the material exploration step, recording units were coded, identifying 374 initial codes, later grouped into 10 preliminary categories according to identified semantic similarities and differences, which culminated in three thematic categories, as described in Figure 1.

In the next step, treatment and interpretation of results, categorization took place, followed by interpretation and discussion with current literature, considering the Family Systems Theory⁵ principles, which understands the family as an organism that constitutes a whole. This theory sees the family as a unit of care and not just as a provider of information and for this reason has been used as a theoretical reference in nursing when an approach beyond the disease and/or individuals is sought. The concept of family resilience⁹ values the way the family system faces adverse and challenging experiences, reorganizes itself and overcomes them, also used as a framework. It should be noted that, for transcription and data analysis, software was not used.

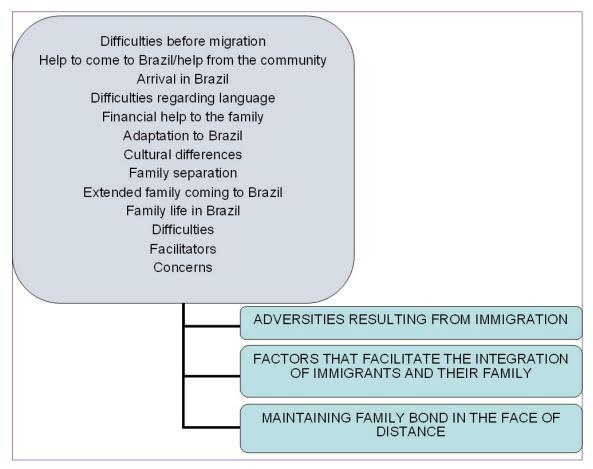


Figure 1 - Results categorization process.

To guarantee the methodological rigor of this research, we respect the principles of credibility, transferability, suitability and confirmability, by presenting participants' sociodemographic data. Thus, the study was guided by detailed description of the method following the COREQ criteria as well as the use of primary strategies such as data collection over an extended period, inclusion of participants from different countries, dense description in a field diary, and maintenance of an audit trail of key methodological and analytical decisions throughout the research¹³.

In study development, we followed all ethical precepts disciplined by Resolution 466/2012 of the Brazilian National Health Council, and the project was approved by the signatory institution's Research Ethics Committee. Participants were informed about the desired form of participation and the free option of involvement with the study, moment when the Informed Consent Form was read and signed, available in Portuguese, English and Spanish to facilitate the understanding of the interviewees. In order to preserve anonymity, when presenting the results, the lines are identified only with a number indicating the order in which the interview was carried out, followed by the name of the country of origin (e.g., I11 – Haiti).

RESULTS

The 13 participants in the study were between 27 and 65 years old, nine were female, seven had completed higher education, three had completed high school and the others had only completed elementary school. All had been in the country for more than two years, seven from Venezuela, two from Colombia and one from the following countries: Haiti, Dominican Republic, Paraguay and Angola. The search for better financial conditions was mentioned as the main reason for migration by

nine participants, two of them referred to fleeing wars and conflicts, the other two, consecutively, for personal reasons: accompanying their Brazilian husband and interest in studying in the country. Eight immigrants lived in Brazil with their nuclear families, another five with extended family members. Three men (all with higher education) were unemployed at the time of the interview; four people declared to be housewives; another three were self-employed (Spanish teacher, seamstress and artisan); one declared himself a student, another a trade worker, but without a formal contract, and only one had formal employment with registration.

From the data analysis, three thematic categories emerged, which will be described below:

Adversities resulting from immigration

For the participants in this study, immigration represents a difficult process, especially due to family separation, whether temporary or permanent, as can be seen. *It's hard because the whole family stayed there... the whole family...* (I1 – Venezuela). He said there was no way to bring the three of us together (wife and two daughters), because he had no money... he was alone [...] when I managed to come, we had to unite and work to bring them (I8 – Dominican Republic). I decided to leave my two children, so I could come to work and study (I6 – Haiti). I left my mother there... I left her there because I knew for sure that it would be better for me and my daughters, for the family, but it was hard to get here, without a family member close by... (I10 – Colombia).

Physical distancing from the family awakens feelings of sadness and loneliness, as evidenced by participants' statements: Sometimes I would lie down and my tears would wet all over my pillow, because of those five years away from him (husband) (I6 – Haiti). We miss the family a lot, they are all separated and I understand that my family is now my wife and my daughters, but you know? Staying away from mom, dad, brothers, it's really hard... (I9 – Venezuela).

Leaving part of the family in the country of origin, knowing that they will possibly not see them again is a difficult decision. The awareness that they will no longer have the facility to see their older relatives again, whether because they do not have physical and/or financial conditions, or even because they do not want to leave the country of origin and its customs, is a reason for sadness and suffering for family members: Our reality is that it will never be the same as we used to live with all our family, cousins, uncles, and now they are all dispersed all over the world, so, it is something that we will never meet again, all together... (I3 – Venezuela). She (mother) sometimes gets so sad, she even gets depressed, she says she's going to die and won't see us again, it's so sad... I miss her a lot too (I6 – Haiti). My mother actually said she doesn't want to migrate, because she's getting old, she likes her little corner, she said, she comes from a foreign country, she's going to be weird, it's better for her to stay in her little corner (I7 – Venezuela).

The process of integration into the country becomes much more difficult when there are no known people or a support network during this period, especially in the early stages: The place I arrived in Brazil, in Roraima, had thirteen people in the apartment, most were young people who were alone, I was the oldest, along with someone else. Almost all of them worked on the street, in prostitution, but in Venezuela their family didn't know, they said they were working (I7 – Venezuela).

In some cases, when members arrive in Brazil, they may be referred to different shelters: *I* was in a refuge, *I* managed to enter as a single woman, but my children stayed out and managed to sleep in the church, because of my brother-in-law who got there, so they were allowed to sleep at night, only after the service ended did they enter, it was like something hidden (I7 – Venezuela).

During the integration of families to the host country, which takes some time, several challenges arise, including those related to work. For instance, it is difficult to find a job, especially in the field of work in the country of origin. It is not easy to obtain diploma revalidation and the need to submit to informal jobs with a view to exploiting the workforce grows: For me, work was... it's still a process,

because I graduated there, and I can't work in the same thing here, because my diploma is worthless (I4 – Venezuela). I was working and the boss said, "I'm going to give a thousand reais", and when the day came, he would pay 700, 750 and keep the rest with him and rip us off, it was very hard (I8 – Dominican Republic).

Overcoming language barriers and communication problems is another challenge that impacts the lives of immigrants, in addition to difficulties in everyday life and at work, parents with student children also had difficulties in helping them with schoolwork. The boss said, "I don't understand what you're saying, I can't work". So, they fired him... (I1 – Venezuela). It was hard to be able to work, it's a shock, but as the months go by, you manage to speak a little better, one person recommends it to the other and little by little you are given the opportunity to do something to support the family (I13 – Venezuela). The only difficult thing is language, you want to help with schoolwork and you have to learn it first (I2 – Venezuela).

The reports included in this category show that the adversities experienced with immigration involve installation difficulties, language barriers and distancing from the family of origin, all this ends up harming immigrants' adaptation in the new country. The family system needs to exercise resilience on a daily basis, in order to overcome all the adversities faced and turn them into strengths.

Factors that facilitate the integration of immigrants and their families

When they make the decision to leave their homeland, the support and welcome of friends, family, social and religious institutions are essential for immigrants to have a positive experience: We arrived at a Church shelter. When we arrived, we already had people from the church, brothers from the church at the airport, waiting for us, we didn't know anything, but when they looked, wow! we were very blessed (I1 – Venezuela). They provided support (NGO), they gave food, they gave clothes, because when you travel, you travel with your suitcase and nothing else, with your projects, with your dreams, you leave with the little you have, and then you need help (I7 – Venezuela). A lot of support from the church, they supported us to arrive, they managed to help us rent the house, they helped us in the first months to get a job (I5 – Venezuela). I've always been calm because I know I'm with my family, now if I was alone, it would be different... (I8 – Dominican Republic).

Immigrating with other family members facilitates the integration process, as it enables family members to overcome adversities, carry out life projects and maintain family functioning. This can be seen in participants' words: *In our experience it was different... thanks to the fact that we all came together, he can study, I can work, my mother can watch the girls with my father...* (I1 – Venezuela). *It helped a lot, it always helps, because when it's time to work we don't have to leave the children with anyone, they stay with my in-laws, it was very good, having brought them with us* (I3 – Venezuela). *Not that I consider myself better than others, but I consider myself privileged. Because I have family here in Brazil, so in a way it is different from other people who have the issue of adapting without anyone* (I11 – Angola).

With immigration, all family members undergo changes in their roles, in order to allow family functioning: The routine of life, there we had a lifestyle, I woke up early, prepared girls for school, my husband picked them up and took them, here as we are not in the same conditions, each one has to help in different ways (I2 – Venezuela). Now, as I'm at home with my wife, we help each other, if I have to do something, she supports me, we decide together what to do. I can also spend more time with the daughters, teach them, help with their chores, organize ourselves to do the chores around the house, do the cleaning, do the shopping, so I don't think this time was bad, I think it was good (I3 – Venezuela).

Faced with the absence and the difficulty of creating new bonds, the family system is strengthened: We do a lot to preserve the family, that it stays together, that it stays close, it is one of our priorities, the family (I3 – Venezuela). The only difference is that in Venezuela we lived with other family members, here we are alone, there we had many friends, here we know few people, so as for social life, that has changed a lot, but family life here with us remains the same or even stronger (I1 – Venezuela). Family life for us is very important, we live together, we make decisions together, my older children, they participate in decisions [...] my older children, they supplement that part of support from the family members who stayed there (I4 – Venezuela).

Even in the face of conflicts and adversities, respect and appreciation of the family prevail: For us, family is very important... we don't always have the same way of thinking about seeing things, we have different opinions, we have fights, but always together, always... it's important (I4 – Venezuela). We say that having a relationship with a person involves conflicts. However, regardless of the conflict you are going to have with a family member, we need to face difficulties in a certain way (I11 – Angola). We're getting along well, one can understand the other... he does things, he apologizes, and you know, "Oh love, I'm sorry", and we try to take the line that does not cross the line, especially me, I know that we live together, we have to respect and love each other (I7 – Dominican Republic).

Employment opportunities, personal/financial growth, public safety and free access to the health system were highlighted as factors that favor the adaptation process in the face of immigration: *The things we were looking for: security, and mainly that, a city that was safe and with opportunities to work and grow* (I4 – Venezuela). *It's very different, I think there are more opportunities here. The truth is that our goal is always: to stay in a place where we feel like home* (I9 – Colombia). *It's really... a paradise here, because thank God we can find a hospital, we can find food, in Brazil It is much better, people studying have the possibility of learning, here it's much easier* (I3 – Venezuela). *Unfortunately, I don't miss my country... I feel calm here, I think Brazil is my country now* (I10 – Colombia).

With the experience of immigrants and their families in Brazil, some potentialities arising from immigration stand out, especially when it occurs together with other family members. In these cases, processes become less painful and opportunities for personal and professional growth are facilitated, with the possibility of being more successful in carrying out life projects and exercising resilience.

Maintaining family bond in the face of distance

Having distant family members leads to nostalgic feelings and, in an attempt to minimize them, reunification with the extended family is a desire of many immigrants. In other words, maintaining proximity and bringing the family together becomes a goal, although sometimes it is a distant possibility given the current circumstances: Our goal now is to at least meet my parents, my sisters somewhere, and stay together until my parents pass away (I3 – Venezuela). We are in the process of renovating, and staying... bringing our family members, my mother, my stepfather, and that's the plan, that's the idea is to stay, for me the idea is to stay (I4 – Venezuela). I proposed to bring my family and I came here alone, thank God my family is here, now we are better (I7 – Venezuela).

Immigrants reiterate the lack of places and culture they had in the country of origin, but also claim that children have an easier time integrating into the new culture and, therefore, lose many elements of the previous one: We always miss our land, our culture, people (I3 – Venezuela). The eldest (daughter) said that she wanted to go back there to see, to visit, to see my mother, but the youngest, she says she is Brazilian, she told me that she never wants to go back there, she said, "No, I want to stay here in Brazil" (I8 – Dominican Republic). She (daughter) does not speak in our language, Creole, she only speaks Portuguese, the oldest one too, but the oldest one can speak and converse in Creole, a little better than her (I6 – Haiti).

It should be noted, on the other hand, that immigrants use some strategies to value the original culture, bring affective memories and help maintain and pass on family traditions: We speak Spanish, we went from the door to the inside, we have to speak Spanish at home, because my children will forget it... my youngest son will forget it, and it's part of his education (I4 – Venezuela). The language, I speak a little Portuguese and a little Creole, I always try to keep everything I had there (I8 – Dominican Republic). I try to reproduce in my family the good things I experienced, with my mother, with my grandmother, they made soup on Sunday, on Saturday, with my sisters, we were attached (I7 – Venezuela). Even though my aunt is here in Brazil, she cooks typical Angolan foods that if I were here alone, I don't think I would (I11 – Angola). We keep talking in our language so we don't miss it, we make lunch our way, so we don't lose our culture (I6 – Haiti).

Interviewees reported the need to provide support and financial help to members who, for some reason, were unable to migrate, because, despite enjoying a certain stability in the new country, they do not forget the family that did not migrate and seek financial help: Because we don't forget the family, so one of the things that we are here in Brazil is to help those who stayed there, because "I migrated, I came with my family and everything is fine", but no, there are many people who they are there and they need our help (I4 – Venezuela). One of the very complicated things is that when you live outside the country, you somehow have a responsibility to your family that stayed in Venezuela, in fact, with the work they have, they are unable to meet their basic needs (I13 – Venezuela). Anything they need, we have to send money, there is nothing there for free (I8 – Dominican Republic).

When other family members are unable to immigrate together, it ends up awakening in those who immigrated a sense of responsibility towards family members and their culture, so that they feel obliged to build strategies to minimize this feeling and pass on their traditions.

DISCUSSION

The results showed that experiencing integration in a new society is permeated by challenges, since leaving a place where one is integrated to an unknown place with many differences is a difficult process. Difficulties experienced by the interviewees corroborate results that highlight the experience of negative situations and social vulnerability, such as prejudice practiced by local residents, in addition to a certain degree of dehumanization, making it difficult for these people to integrate into the new country^{14–15}.

When arriving in an unknown place, often without speaking the language, without income, without housing and without family support, individuals are subjected to feelings of stress, anguish and adaptation difficulties¹⁶. As if all this were not enough, they still have to deal with many aggressive or prejudiced behaviors on the part of the natives, as has been reported in relation to the attitude of bosses and their discriminatory practices. All of this can have negative impacts on immigrants' mental health¹⁷.

The indigenous belief that a country is owned by its first inhabitants may be the reason used by local residents to claim collective ownership of a territory and a prevailing social culture, causing negative consequences for newcomers¹⁸. Depending on the intensity and frequency of the experience with xenophobic behaviors, situations may occur that hinder family functioning, with reverberations throughout the relational network⁹.

A Canadian study found that behavioral and biological responses to stress can influence and be influenced by feelings of security that arise through relationships with other people and spiritual connections as a way to promote resilience¹⁹. When people are exposed to stressful circumstances, they need to exercise domains that will determine how they will react to these situations⁹. In this regard, a belief system becomes important as it guides them towards recovery and growth, in addition to promoting a sense of coherence, making the crisis or challenge resolvable.

Experiencing immigration and family separation, especially when parents first travel to stabilize themselves, only to bring their children or other family members later, causes substantial damage to the family system²⁰. In these cases, children experience two types of reorganization in their family: first, separation from their parents and the familiar environment to which they were used to; later, separation from their temporary caregivers, followed by the possibility of not seeing them anymore, especially since they are older and decide to remain in their country of origin, which generates conflicts and instabilities in their minds, and may even hinder their development²¹.

In such circumstances, the roles that previously worked no longer work, and it is necessary to reorganize the system. This greatly interferes with relationships and reciprocity between family members, compromising the family dynamics and the resilience of this group²².

The presence of the family and a support network favor immigrants' integration in the host country. Having someone they can count on facilitates achieving goals and connecting with the host society, in addition to providing immigrants with a sense of belonging, which helps to facilitate integration in the new country²⁰. From a study carried out with Haitian immigrants in Brazil, it was observed that those families who come to the country without a host network have a much more difficult path due to the lack of public policies for welcoming and socio-cultural insertion in the country²³. This challenges public authorities and health professionals to seek ways to help identify social inequalities resulting from a series of vulnerabilities experienced in different contexts of life for immigrants and their families, with a view to resolving them²⁴.

It should be noted that in the case of the participants in this study, free access to the health system was highlighted as one of the factors that favor the adaptation process. This result differs from that found in a study carried out with immigrant women in Chile²⁵, starting with the fact that health services are not public there. Furthermore, even though they paid, some participants reported discrimination in the treatment received and lack of personal care, resulting in late consultations due to health complications, making it difficult to adapt to the new socio-sanitary context.

Welcoming through social or religious institutions, associated with the presence of other family members, acts as a protective factor, making life projects more easily achieved. In this direction, a study carried out in the United States of America (USA) showed that religious practices provide strength, well-being and a positive perspective on life during the migration process, favoring this integration²⁶. Similarly, in Málaga (Spain), the importance of strengthening the sense of community of Latin American residents in the city for their adequate biopsychosocial adjustment was highlighted²⁷. It should be noted that the risk of acculturation is high in the migrant population and one of the measures to combat it is the construction of citizenship through cultural identity, recognition and propagation of relationships with others²⁸.

Acculturation also affects family relationships, as the greater ease of children and adolescents in learning a new language, habits and way of thinking contrasts with the difficulty experienced by older family members, which is to integrate into a new society. This can lead to communication difficulties in the subsystems¹⁷, triggering intergenerational conflicts, distancing and changes in the family system dynamics and functioning.

On the other hand, the testimonies of the immigrants in this study who, almost entirely, were heads and/or responsible for their family nucleus, showed that it is at the heart of the family that they try to maintain aspects of their culture, whether through food traditions or even speaking the native language at home, in an attempt to postpone the acculturation of the younger ones. Similarly, a study carried out with Korean immigrants in New Zealand identified that the family is configured as a key space in which members seek to retain their ethnic identity and traditional values²².

In this regard, at the same time that immigrants absorb part of the receiving society's culture, they seek their own integration in the new country, without losing their origins. It is inferred that this strategy exemplifies, in practice, the principle of equifinality, which allows system organization and family functioning guarantee⁵.

The results also showed a latent hope of family reunification, translated by the need to bring family members who were unable to migrate to the host country. In this sense, a study carried out in the USA pointed out that it is this hope that motivates immigrants to experience family relationships, even at a distance¹⁸. Also in the US, an ethnographic study that analyzed resilience strategies and mechanisms to keep transnational families functioning showed that immigrants provide care to their families who migrated, but also need to provide support to those who stayed in the country of origin, continuing their roles even in the face of new contexts²⁸⁻²⁹. Thus, while physical distance is present, in order to maintain the family bond, the immigrants in this study referred to the willingness and efforts undertaken to financially help those who stayed in their countries of origin.

The present study has limitations. The first is related to the absence of a cultural and linguistic interpreter of the same nationality as each participant during data collection. Although the main researcher mastered the languages used in the interviews, aspects inherent to cultural differences may have gone unnoticed. Another limitation is directly related to the fact that the interviews, after being transcribed, were not presented to participants. However, as a result of the Covid-19 pandemic, we chose to make only one contact with the interviewees, minimizing exposure risks. Finally, it should be noted that another possible limitation is related to participants' nationality, since most are Venezuelan immigrants and this can limit the results to the sociocultural, educational and family perceptions of this group. On the other hand, considering that the largest contingent of immigrants currently in Brazil, and even in the municipality under study, originates from that country, such a finding was expected.

CONCLUSION

The integration of immigrants into Brazilian society is permeated by challenges, which are related to the distance or absence of an original and/or constituted family that stayed in the country of origin. These mishaps are accentuated by the difficulty of integrating into the new culture, not understanding the host country's language, underemployment, low wages, change in family roles and social support network fragility. Maintaining adequate family functioning, as well as minimizing the difficulties experienced, occurs when the person does not immigrate alone or other family members are already in the host country, because, even in adverse situations, the family represents an important source of support for its members. Welcoming actions by social and religious entities and maintenance of cultural habits also play a preponderant role in the integration process.

It is necessary for host countries to pay greater attention to immigrants and their families, as well as to promote studies focused on the host community's role, in order to favor and speed up the integration of these individuals. Finally, it is important for health teams to be prepared to identify and accept the needs of these people in a comprehensive and humane way. As future research, it is suggested that interventions be carried out that consider the family system, with a view to strengthening it, favoring immigrants' resilience, as well as investigating access to health and issues involving the sociability and mental health of this population.

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NOTES

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