

# Family, patient in the context of family. Family - centered services



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# Subjects of discussion

- Family, summary, definitions
- Evolution of family – historical perspectives
- Variety of families
- Types of family and family style intercommunication
- Family s functions
- Family life cycle theory, stages of family life
- Marriage, present time. Divorce, consequences.
- Beyond the "family life cycle" approach
- Family and disease, disease and family, interaction, steps of coping with stress
- Team work and family, multi-, inter-, transdisciplinary models. The collective empowering model.
- Family-oriented, family-centered services.

# Family, summary

- The institutional concept of the family is central to all societies to their biological and social reproduction
- As the fundamental tool for the **socialization and education of children**, stable familial structures contribute to the stability of the wider society of which they are part.
- One of the most important functions of family medicine is a family assistance.
- Anyone is born, grow, live, gets sick, heal or dies in family, his health is greatly influenced by family factors.

While the idea of the **nuclear family** remain pervasive (universal), important sociological changes in the late twentieth century have **challenged this model** (the **rights** now afforded **women**, **gay couples** (in some countries), and **single parents**, the increasing acceptability of **divorce and remarriage**, and developments within **reproductive medicine and technology** have all contributed to transforming traditional stereotypes).

# DEFINITIONS OF FAMILIES

- A group habitually sharing a common dwelling (**location** criterion)
- Relationship **by blood** or marriage (kinship criteria)
- Sharing of activities (**functional** criteria)
- The term **nuclear family arises from its definition as the smallest kin unit (consisting of parents and their offspring** – the nuclear form – occur apparently instinctively among many animal species, it is increasingly accepted that this form was **perhaps the first unit of human culture** – a social unit based primarily on the biologic facts of procreation).

# Evolution of family, historical perspectives

- The word "family" (from Latin famulus: domestic slave) originally referred to **a group of slaves belonging to one man**, then, by extension, to all persons ruled by one man or descended from one man, and finally to all persons living together in a man's household, such as servants, wives, children, parents, grandparents, other close and distant relatives, friends, and permanent guests. These various meanings were still very much alive in medieval English. Indeed, well through the Renaissance the word "family" was used to mean either a body of servants, or the retinue (suita) of a nobleman, **or a group of people related by blood, or a group of people living together**

- It was not until the 17th and 18th centuries that the last two of these meanings were combined to describe a new social phenomenon: **a small number of close relatives who lived by themselves under the same roof and who were also emotionally close to each other.** By the early 19th century this usage had virtually replaced the others, and since then "family" has referred mostly to an **intimate domestic group of parents and their children.** Thus, we find that today the meaning of the word is both wider and narrower than it had been before

# Family Systems Theory

- Family systems theory is an approach to understand human functioning that **focuses on interactions between people** in a family and between the family **and the context(s)** in which that family is embedded.
- According to a family systems perspective, **an individual's functioning is determined not so much by intrapsychic factors as by a person's place in the system(s)** in which he or she finds himself or herself, subject to the pushes and pulls of the system, including competing emotional demands, role definitions and expectations, boundary and hierarchy issues, coalitions and collusions, loyalty conflicts, family and institutional culture and belief systems, double binds, projective identifications, and systemic anxiety



# Systems Theory

- Systems theory is an interdisciplinary area of study that developed around the same time as family therapy, in the 1950s, with particular roots in biology.
- **Systems theory seeks to understand the dynamic behavior of complex systems**, including how components of a system interact to affect the behavior of the system in often unexpected, nonlinear ways.

# Stage of family development

Family development, in historical aspect, is related to the development of law and jurisprudence. In the simplest way we could mention several historical steps in establishing family as a modern concept:

- Primitive promiscuity
- Punaluan family and a group family
- Pairing family

# Primitive promiscuity

- In human [sexual behavior](#), promiscuity refers to the practice of having many [sexual partners](#) in the absence of any commitment and **promiscuous** is a term applied to a person who has had sex with relatively many partners. [Polygamy](#) is distinguished from promiscuity in that the former refers to numerous romantic relationships, whether sexual or not, while the latter refers simply to sexual activity, without there necessarily being any further connection between the individuals involved.

# Punaluan “family” and a group marriage

## Modern definition of *PUNALUA*

- a group marriage formerly practiced in Hawaii in which **a group of brothers is married to a group of sisters** or in which the husbands are of the same kinship group (grup de rudenie) and the wives are members of another kinship group
- the **two or more husbands of a wife** or the **two or more wives of a husband** in such a group marriage

- In “The Origin of the family, private property and state (1884), **Morgan** concurred in the belief that matriarchy and originated in the era when sexual behavior made the determination of paternity impossible, and he **imagined the early existence of both promiscuous and incestuous intercourse (the consanguine family) and a group marriage.**

# The consanguine family

- The consanguine family, as he (Morgan) emarginated it, had developed from an early stage of generalized promiscuity to one in witch **intercourse was incestuous, but restricted to member of the same generation.**

# Punaluan marriage

- *Punaluan* marriage, the next stage, was a **group marriage** between two or more brothers from one kin group and one or two sisters from another
- The existence of morality, even among savages, must be recognized, although low in type; for there never could have been a time in human experience when the principles of moralities did not exist (Morgan 1963:424)

# The pairing family

## The Pairing Family

The first indications of pairing are found in families where **the husband has one primary wife**. Inbreeding (endogamy) is practically eradicated by the prevention of a marriage between two family members who were even just remotely related, while relationships also start to approach **monogamy**. Property and economics begin to play a larger part in the family, as a pairing family had responsibility for the ownership of specific goods and property. Polygamy is still common amongst men, but no longer amongst women since their fidelity would ensure the child's legitimacy.



## The Pairing Family

Women have a superior role in the family as keepers of the household and guardians of legitimacy. **The pairing family is the form characteristic of barbarism, as group marriage is characteristic of savagery and monogamy of civilization.** However, at this point, when the man died his inheritance was still given to his gens (ginta), rather than to his offspring.

- In most human societies, the family is the fundamental unit of sexual and social organization – largely through selected mating (imperechere) on the pattern of monogamy.
- Situation of **polygamy** – one man, usually powerful within the group, mating with several women – and, more rarely, **polyandry** – one women mating with several men – have been recorded through history.

- **In ancient times** in the majority of cultures, males held most of the power. **In Roman times, the head of the family even had the authority to kill his own sons.**
- Over the centuries, a woman's right to have influence in the family home has often depended upon her ownership of goods and property.
- Through time, whatever the **power relations** within families, laws and traditions relating to **land distribution**, inheritance, and succession have played a significant part in the structure and organization of household groups, particularly among the rich and powerful.

# Family at the twentieth century

- As the **twentieth century** has progressed, and more particularly since the 1960s, **family structures** and systems have become increasingly **more complex and fluid**.
- **Sexual proclivities** (inclinatiile sessuale) plus flexibility and **informality** in the establishing and maintenance of relationships through the expression of individual preference have led to this situation, as has the changing aspiration of women
- Additionally, **economic and structural** pressures within the wider society over which individuals have little or no control have the potential to disrupt family life to no small degree. In particular, unemployment, residential mobility, and homelessness are worthy of note.

# VARIETY OF FAMILIES

- Traditional nuclear (biologic parents, married or cohabiting)
- Reconstituted family (two families together following divorce/separation)
- Complex (stepparent (parinte vitreg) with natural parent and his/her children or with mix or stepchildren and shared children from relationship)
- Widowed parent and children
- Divorced/separated lone parent plus her/his children
- Gay/lesbian parent (with or without partner, plus children – naturally or artificially conceived)

## VARIETY OF FAMILIES (2)

- The “living together/living apart” model (unmarried parents sharing parenthood from two separate residences – sometimes the case with teenage parents)
- Single/lone parent (partner deserted or not acknowledged)
- Extended/three generation family (more usual in families of Asian or Afro-Caribbean origin)
- Commune (or mixed kith and kin – cuno tinte i rude)
- Household (two or more unrelated adults, with or without children).

# Definitions of family

There are a variety of definitions of family.

- The family is a social group made up of individuals achieved through marriage who live together, have joint household, are bound by certain natural relationship-biological, psychological, moral and legal, and responsible for one another in the society.
- According to the WHO definition, a person or family is a group of people living together and related by blood, marriage or adoption.

# Conjugal (nuclear) family

- The term "nuclear family" is commonly used, especially in the United States, to refer to conjugal families. A "conjugal" family includes only the husband, the wife, and unmarried children who are not of age.
- Sociologists distinguish between conjugal families (relatively independent of the kindred of the parents and of other families in general) and nuclear families (which maintain relatively close ties with their kindred).



# Matrifocal family

- A "matrifocal" family consists of a mother and her children. Generally, these children are her biological offspring, although adoption of children is a practice in nearly every society. This kind of family is common where women have the resources to rear their children by themselves, or where men are more mobile than women.

# Extended family

- The term "extended family" is also common, especially in United States. This term has two distinct meanings. First, it serves as a synonym of "consanguinal family" (consanguine means "of the same blood"). Second, in societies dominated by the conjugal family, it refers to "kindred" (an egocentric network of relatives that extends beyond the domestic group) who do not belong to the conjugal family. These types refer to ideal or normative structures found in particular societies. Any society will exhibit some variation in the actual composition and conception of families

# Blended family

- The term *blended family* or *stepfamily* describes families with mixed parents: one or both parents remarried, bringing children of the former family into the new family.

# Traditional, non-traditional families

- Also in sociology, particularly in the works of social psychologist [Michael Lamb](#), traditional *family* refers to "a middleclass family with a bread-winning father and a stay-at-home mother, married to each other and raising their biological children," and *nontraditional* to exceptions from this rule. Most of the US households are now non-traditional under this definition.

# Definitions of family

- The definition will vary depending on the context and purpose ([Bogenschneider, 2006](#)). Existing definitions can be categorized in several ways, two of the more prominent that we cover here:
  - **structural definitions** that specify family membership according to certain characteristics such as blood relationship, legal ties, or residence and
  - **functional definitions** organized around core functions that family members perform, such as sharing economic resources and caring for the young, elderly, ill, and disabled.

# Functions of family

The family has an important role in society, fulfilling several functions.

The main functions of the family are:

- economic,
- socializing
- solidarity and
- sexual and reproductive

**Economic function** plays an important role by providing material, financial, family needs.

# Function of socialization

- Socialization functions is translated as the level of education in order to uptake by children but also by other family members, attitudes, values, principles, patterns of behavior characteristic of a particular social group.
- The role of social function is to integrate into society person (child) by education taught at all levels such as: material, physical, psychological, moral and spiritual.
- This function has different levels of manifestation, from family to family depending of concern to a great or less extent on educating its members.

# Solidarity function

- Solidarity function is to ensure family unity and stability, involving the feelings of affection, respect, belonging to the family group, the members trust each other, the development of intimacy, of helping and supporting each over time.
- This function has a degree in increasingly poor showing today, as evidenced by increasing divorce rates, cohabitation relationships multiplication, the unmarried and single parents.



# Sexual and reproductive functions

- Sexual and reproductive functions contribute to mutual sexual satisfaction to both spouses and bringing up children.
- The two components of this function are treated differently depending on the family focusing either on sexual fulfillment in some families, while other families attaches great importance to bringing up children.
- Achieving this function depends on factors such as the degree of culture, had two partners, degree and type of education received by religious influences, desire and physical and psychological characteristics of both spouses.
- It was found that nowadays, in economically advanced societies, couples and families tend to focus increasingly more on affective sexual fulfillment at the expense of reproductive.

# Social functions of family

Whatever form it takes, the family performs some basic functions in society. The nature of the relationships between family members, it appears and functions that it performs.

- They may be more, but is limited to the following:
- emotional commitment, social and economic relations between spouses;
- childcare, elderly and relatives with disabilities;
- education and socialization of children and even parents;
- protection of family members;
- achieve basic individual needs, of each family member.

## Types of family and family style intercommunication (L. Kuznetsov, Moldova)

1. **Despotic type of family**. During her relationship stability is maintained by externalizing negative emotions, there prevails distance communication style, prescription. Usually, the "lead" father, demanding unquestioning obedience from everyone else. Relations conflicts of despair that went into the inner, latent and can be frustrating or reactions followed by isolation of the adolescents. Family goals are established only according to the requirements and regulations "leader".

2. **Family-bastion (stronghold)**. At the core of this family are negative representations of aggression and dangerous intentions of all (or most) people outside. This negative emotion sweeps over outsiders.

Both spouses shows egocentric behavior toward those outside their family, very united and coordinated acting "against" external social environment. Meet families where a parent this is very authoritarian, and another, on the contrary, is too indulgent or excessive protects children. Family atmosphere too severe learning from a parent, combined with safeguarding the other, causing the child confidence in themselves, lack of initiative.

3. **Volcano family**. Relationships in this family are very unstable: the most permissive, the guardianship of endearment - those with a high degree of stringency, predominantly spontaneity and affection. At first glance, this family seems positive, but "rash" of anger, hatred, although tensions weaken, greatly complicates the overall condition of the family climate. Children bear the emotional high, become vulnerable, fearful, anxious and nervous, the relationships observed all kinds of conflicts, but intensity and power clashes ranges from the trivial to the outbreak really "volcanic".

4. **Family "Third is unnecessary."** In this type of family attachment style mutual communication between husbands and they have a special significance for them, parents are regarded bonds as an obstacle to their personal happiness.

Relationships between parents and children are cold, distant.

Parents always observes and highlights mistakes and shortcomings children. Disregarding their personality causes inferiority complex formation in children who later in adolescence, it creates difficulties in self-determination and social integration.

Sometimes it can be "superfluous" Mother, father and daughter forming a coalition, sometimes it is "useless" father, mother forming a coalition with children. Conflicts prevailing relations of despair, fear and attraction.

5. **Family with "idol"**. This teen is central person. Both parents behaving alterocentric exaggerated. Prevailing relations of guardianship and approval, often sacrifice from parents. Baby develops in an atmosphere of "greenhouse" is selfish, can not be independent, self-critical and active. Conflicts prevailing relations of despair.

This kind of family is about 4%.

**6. Family "asylum".** Here prevailing style of communication open approval. Relations are uneven: the collaboration combines with the tutorial, indifference, domination and confrontation.

Educational moments differ by intensity, duration, manner, form and content as coming from a lot of people of different age and expertise (from parents, grandparents, distant relatives or acquaintances), which is in the family for a while .

You meet all kinds of conflicts. Children without consistency requirements are contradictory, learn to maneuver, lying or, on the contrary, become childish.

This kind of family is about 2%.



**7. Family "theater".** Such families keep their stability through theatrical lifestyle. Family members play certain roles or "mount" a "show" together, which allows them "staged" welfare family relationships.

In fact the education of children is left solely to the respective institutions - kindergarten school. Contact with children is replaced by excessive purchasing of material goods (toys, clothes and so on). Family members meet their formal obligations, interpersonal relationships varies from friendly to indifferent, the desire to dominate the indifference.

In dealing with children, approvals and disapprovals are fast and everything looks fast, missing unique requirements, so children develop, usually with certain character traits emphasized (labile, hipertimic, touch and so on). This kind of family is 8%.

8. **Liberal family** meets rarely. This prevailing indifference relations style clearances, lack of cordiality and attachment. Decisions are taken in disagreement prevails egocentrism. Family actions are scattered, uncoordinated. Each family member has his life, not interested in the family atmosphere, the atmosphere of uncertainty persists relations. Children become introverted, isolated, often selfish, indifferent to other family members.  
This kind of family is 1%

9. Family "equality" is characterized by psychological balance, morally and materially.

Spouses have about the same intellectual level, obligations and duties shall be balanced: both involved in the education of children and household management. Decisions are taken to "counsel" family prevails harmonious relations, cooperation, a style focused on engaging all members in family matters. The climate is warm, gracious. Frequent conflicts are constructive. Children develop normally have independence, creative spirit possesses, will.

Adolescents from such families, in general, are prepared for family life, have difficulties in professional and social empowerment.

10. **Patriarchal family.** Here dominating, usually the father (91%). This family is found mainly in rural areas, the traditional Moldova, where the head of household is male dominant but not aggressive and despotic, but rational and practical. Decisions are taken unipersonal are not discussed, but are explained and justified. Relations are stable, calm dominance prevails rigorous style routing. Behavior, order and strictness, once established in the family, respected by all its members. Husband and wife are one? Whole, showing a sociocentric behavior focused on psychological subject "we" that is transmitted from the head of the family and does not contradict the view partner. In such families, wives means of half-word or no words are compatible psychophysiological and moral. Strict principles and unique children's education contributes to the formation of volitional personality, balanced and socially valuable. This type of families is 33% in Moldova.

**11. Romantic family.** It's the kind of family where its members maintain relationships tender love and attachment to old age. It is characterized by collaboration and harmoniously combined umbrella, style, centered on the joint work of family members. Have a constructive conflict behavior is based on representations socio-centric. Children develop harmoniously. Families of this type is about 2%.

**12. Spiritual family.** This kind of family is focused on the orientation of its members to spiritual values, Christian morality. They increased demands from self, family predominates collaborative relationships based on mutual respect and understanding. Sometimes family members observed a dose of fanaticism in action. Children develop harmoniously, are oriented towards spiritual values, are independent, creative, intelligent, but can be physically weaker. Families of this type is about 7%.

## Evolution of family and its consequences

- Some of these structures challenge the traditional, biological understanding of family by equating it with “household” or “group”, so denying its traditional kinship associations. The overall picture is more fluid and in some cases less secure and less permanent arrangements for individuals.
- Primarily this situation has arisen from choices and changes concerning the couple relationship. For example, **more non married couples are rejecting marriage, and about one third off all children are born out of wedlock.** More people are divorcing, and more than half of all divorces involve children. Almost three-quarters of all divorce petitions are filed by the women of the partnership.

## Consequences

Since about 1970, it is recorded that throughout the Western world, more marriages have ended in divorce than through the death of the spouse. One outcome of this is an **increasing number of single-parent families**.

- 33% - married/cohabiting couple with no children or non-dependent children
- 28% - one person only
- 25% - married/cohabiting couple with dependent children
- 7% - single parent with dependent children
- 7% - other.



## Single-parent families

- Aside from divorce, single parenthood can arise from other sources, including desertion of a partner, or by never-married individuals choosing “go-it-alone” parenthood. Unmarried teenagers, by opting for motherhood, in some ways challenge norms relating to life stages accepted as practical through time.

## Influences of law on personal lifestyle choice (Could we change the situation?)

- **The law can influence people** in the choices they make in relation to family structure and in management of personal relationships.
  - no more distinction between legitimate and illegitimate children by deleting from registration all reference to the marital status of the parents.
  - tax/benefit system (in some way favored the single-parent family)
- **Traditional nuclear family currently is in danger** of becoming marginalized (lacking funds from governments, lack of other support).

## Marriage (present time)

- Traditionally, marriage has been linked with particular rights concerning sexuality and procreation;
- It has been instrumental in ensuring economic and social stability within the family, and
- It has provided a legal basis for the control and transmission of property.
- From the XIXth century, the modern marriage in Western culture has become a conjugal affair, with love and compatibility seen as primarily important and as part of an overall quest for individual self-fulfillment.

- Almost half of all marriages are expected to end in **divorce**, and as part of growing fluidity in relational structures
- An **increasing number of couples are opting to cohabit outside marriage** ( NB! a lower level of commitment within cohabiting relationship compared with marriage)
- “Prenuptial contracts” mark out expectations of personal behavior within the relationship
- It appears that the optimism, **confidence, and trust** usually expected of those contemplating marriage are **missing** here.

# Divorce

- Divorce is more common among those who **marry early** or who **cohabit prior to marriage**, among those with **lower educational** qualifications, **lower income** and lower status occupations.
- Divorce **in all group is rising**.

Factors facilitating the divorce:

- a liberalizing of **the law**
- the pressure – environmental and economic (**stress of unemployment**)
- growing personal **aspiration of women** and their material independence (ideological).

## Children s experience of divorce

- Divorce affects all family members, but most – the children
- Aside from **separation from a loved parent**, in practical ways the parents divorce can mean **many unwelcome changes** for children (change of house, new school, friends, activities...)
- **The impact of divorce is compared with the daily experience of tensions**, perhaps violence – not enough research), but is clear that there are some disturbing aspects on children.

# Consequences of divorce

- For the single parent life after divorce may be hard, more time spent in paid employment
- In addition, the custodial parent may be required to be the sole source of both authority and affection for their emotionally traumatized children
- Socially, **most divorced parent take up a “single-person” lifestyle**, resulting in disruption and incoherent routines for their children
- Youngsters of single parents are taking additional responsibilities in the home (becoming more independent)
- On average, **children of divorced parents are more likely to be sexually active at younger age, and more likely to become divorced themselves.**

# Educating for parenting

- It appears that natural parenting skills are no longer a “taken as read” resource
- The idea of **parenting skills** as requiring to be “learned” has grown in credibility
- **Research is strong regarding as essential correlation between social and antisocial behavior in children and young people, and the quality of input and care that parents have provided in their early years.**



# The concept of life course

**Life course** as a concept originates at least from the 1960s, encapsulating aspects of similar concepts such as **life cycles** and **life stages**, which describe the expected stages of development through maturity to decline.

**Life cycle** conceptualizes these stages as being fairly fixed and linear, with predictable transition phases.

The concept of **life courses** is more dynamic, recognizing both cultural and situational differences.

The changes over time may produce different normative assumptions between cohorts and generations.

# Human life stages

It is here proposed that the stages of human life history between birth and adulthood are: **infancy, childhood, juvenile and adolescent**. Reproduction is best suited to take place during **adulthood**. Human women who live long enough universally experience **menopause**, an event that ends the reproductive capacity of the women but may mark the passage to a new stage of adult life that includes assisting the reproduction of younger women.

# The juvenile stage

**The juvenile stage** is characterized by a deceleration in rate of growth in height and the slowest rate of growth since birth. The human juvenile stage begins at about 7 years old. In girls, the juvenile period ends, on average, at about the age of 10, 2 years before it usually ends in boys, the difference reflecting the earlier onset of adolescence in girls.

# Human adolescence

- **Human adolescence** is the stage of life when social and sexual maturation takes place.
- Adolescence begins with **puberty**, or more technically with gonadarche, which is the final “on” of the on– off – on pattern of the gonadotrophin-releasing hormone (GnRH) pulse generator of the hypothalamus . The transition from the juvenile to the adolescent stage requires not only the renewed production of GnRH, but also its secretion from the hypothalamus in a specific frequency and amplitude of pulses.

# Adulthood

- **Prime adulthood and transition** – from 20 years old to end of child-bearing years: homeostasis in physiology, behavior and cognition; menopause for women by age 50.
- **Old age and senescence** – from end of child-bearing years to death: decline in the function of many body tissues or systems.

According other authors,

- After the cycle of growth and development in the first 20 years of life, the **Step or adult cycle**, prolonging the psychological development of man, extends to 65 years. This cycle includes several stages: youth and sub stages (25 to 35), early adult (from 35 to 44 years), average adult phase (45 to 54 years) and extended or delayed adult step (55 to 64 years).

# FAMILY LIFE CYCLE THEORY

- It has been proposed that family groups passed through phases, whose characteristics are determined by changes within family members, the impact of external events on family members and the influence of socio-cultural norms and requirements.
- The family system is seen to move through time, expanding and contracting its membership as individuals join and leave the system
- The family is usually a multigenerational system at any time, so that each generation can be influenced by previous and later generation.

Special challenges to the family's organization, membership, and belief systems, which may be experienced as **stressful, are said to arise at transitional points in family development**, such as:

- the birth of children, or
- young adults establishing their own households, where there is a confluence of external and internal demands for change, understood and interpreted by family members within the context of trans-generational influences, that is, the handing down of family cultural beliefs, expectations and practices.



# Stages of family development

Carter and others delineate a typical set of stages in development as follows:

- Courting couples,
- Couples without children,
- Childbearing families with children in the preschool years,
- Families with school-age children,
- Families with adolescent at home, families with adolescents beginning to evolve separate lives,
- Families with adult children and
- Families in retirement.

Family members face different challenges at different phases of the **life cycle**, with different expectations of self and others according to external demands and maturational and social demands for change and adaptation.

# Life cycle stage model and “modern” family

- **The life cycle stage model** has been criticated as applying to Western, middle-class, nuclear families with less relevance for different family forms, some ethnic grouping, poor families etc.
- **Certainly, if we accept the concept that family is made up of different individuals at different stages of growth, the concept of family is difficult to grasp within this model.**
- Definition of the family presents considerable difficulties for many researchers and therapists (a heterosexual marital couple without children, a lone parent and child...etc.)

## Beyond the family life cycle: Understanding family development in the twenty-first century through complexity theories [1]

- Perspectives on family development have been organized, mainly, around the idea of the family life cycle.
- However, a family life cycle approach is probably **too simplistic** and **norm-oriented** to understand family development, particularly in face of the diversity of family forms and challenges in the twenty-first century
- It seems insufficient to grasp the diversity of family forms and the complexity of the family's life circumstances of our times. It has also been criticized for not reflecting the relational family processes unfolding from earlier constructions (Wynne, 1984).

## Beyond the family life cycle: Understanding family development in the twenty-first century through complexity theories

- These theories lack a coherent process-focused model of what emerges and is renegotiated, through time, both continuously and discontinuously, as a function of the family members' interactions (Fogel, 1993).
- We are left with the feeling that something is missing in our models to capture the coherent, organized, patterned and continuous nature of human development along with the qualitative transformations associated with the emergence of novelty, through time (Lerner, 2002; Thelen, 2005; Van Geert, 1998, 2003).

# Team working and family

## Multi- inter- and transdisciplinarity

These classifications are based on 2 features

- a) the collaboration between specialists and
- b) the degree of collaboration between specialists and family

**Multi-disciplinary team collaboration** – a model of service delivery in which team members from various disciplines work independently and decision-making is directed independently by each member via the pertinent discipline approach. (“elephant” consultation model).

# Interdisciplinary team collaboration

**Interdisciplinary team collaboration** – a model of service delivery in which team members from various disciplines work together, in their roles as direct service providers, to coordinate services and in which they have equal and shared input into decision-making. The implication of family in decision-making here is not enough good.

# Transdisciplinary team collaboration

- **Trandisciplinary** team collaboration – a model of service delivery in which team members from various disciplines work together in both **direct\*** and **indirect\*** service roles, thereby requiring that some individuals change roles.
- Services are provided in a coordinated manner with equal and shared input into decision making from all involved team members.

# The collective empowering model

- **The collective empowering model** means that all participants, family and specialists, strengthening its capabilities and professionalism to get the best desired results and it requires the presence of three elements of the collective consolidation:
  - a) family b) specialists and c) the environment or context in which it operates specialists and family.
  - This power is not monopolized, is based on partnership, which, too, has an enhanced role.
  - In this model family has the central role, basic choice belongs interventions are focused on Strengths family and its capabilities; Other features of this model: access to resources, participation, community ecology change



# FAMILY AND FAMILY-CENTERED SERVICES

- The starting point of family-centered theory can be traced to when Carl Rogers began practicing **client-centered therapy** in psychiatry almost 70 years ago.
- The therapist treats the individual as a person of worth and significance and respects the client's capacity and rights to self-direction.
- **Rogers diagrammatically presented the implication of a therapeutic relation on family life and society.** The key idea was mutual influence of the treatment process, family dynamics and individual function and participation in social life.

## Family and family system theory

- According article 16/3 of the Declaration (1948) “The family is the natural and fundamental group unit of society and is entitled to protection by society and the state ”.
- This systemic view of the family initiated the development of family system theory, derived from general system theory.
- The main principle of general system theory, that is appreciable for system in general, is the importance of **seeing any system as a whole.**

- Von Bertalanffy stated that a system and the behavior of its elements can only be explained when addressing all the parts in their mutual interaction and influence.
- The sum of parts independently described is not equal to the general picture of the system they form.
- Thus, in the health care field, the family represents one of the most valuable sources of support and important insights on behavior and coping strategies of the individual.

# Family and disease, disease and family

## The impact of disease on family

- Serious illness or injury brings with it an inevitable distortion of family dynamics and fine equilibrium.
- The ability of the family to reorganize and reduce the stress, to provide a healthy environment for all members of the family and initiate the healing process, differs from one family to another.
- This unique pattern has to be respected and addressed appropriately.

# Family impact on disease, the role of the family physician

Each member of the family, but especially family system entirely may influence the disease, the symptoms gradation, adaptation of the person suffering the disease and increase the degree of physical and psychological support.

Patient can not be blamed for illness and family members needed to attend family taking its tasks and waive any physical or mental effort during medical care.

## Family impact on disease course is influenced by a number of factors:

- **Social factor** is not negligible and it is generally accepted that certain diseases are predominantly social, and other important social component. Family status in the social hierarchy may have an impact on disease and social facilities as provided by some health systems can assist the family in trouble.

- **Cultural factors** may influence its attitude to family members toward his family doctor and health services. Addressing these cultural factors can influence the family doctor prescribed treatment compliance and willingness to get involved in the granting of recommended care.
- **Traditional factors** (ethnic, religious, etc..) can influence positively or negatively impact on disease on family. Thus, we find the refusal of families to address family doctor or to accept the proposed care resorting to folk, empirical treatment or waiting for miraculous cures

# Impact of disease on families

Every practitioner knows that a disease of a family member has an impact on the whole family, and the disease is influenced by how family members are mobilized and adapts stress of illness and suffering in the world needs the assistance primary care by family doctors and community

In a judiciously organized health system outpatient try to solve over 85% of acute and chronic illnesses.

**Financial impact:** family can cover material involving patient care in their own home. Health insurance minimizing these costs for family



**Usual impact** - family need to be able to organize so that they can provide separate space of the suffering, providing basic needs of the patient during care needs: heat, light, proper ventilation etc.

- **Psychological impact** on family members is triggered once the doctor gives verdict disease. Stress related to disease severity, the probability of evolution, the prognosis chronic illnesses or infirmities dependencies that can lead to rupture leading to balance family and real crisis. Often the impact of the disease on family members can reflect on the family doctor. Psychological stress can create difficulties in perception and reality causes illness and grief of family members may result in accusations against other family members
- **Structural impact** of the disease on the family's natural for shorter periods (in acute) or long time (chronic diseases, disabilities). The tasks of the suffering is taken by another member. If the patient is the sole breadwinner with children, they must retrieve extended family members.

# Coping with stress, the 5 stages of grief

Below is an outline of the stages of grief

- Stage 1: Shock, denial
- Stage 2: Anger
- Stage 3: Bargaining
- Stage 4: Depression
- Stage 5: Acceptance

# Could be diminished the negative impact of disease?

- Impact of the disease on the family can be diminished by the actions of other family members, the family doctor can also help families identify deadlock situations and to focus its activities through knowledge of the rebalance familiar family.
- Methods used are: **good communication** - GP-patient-family-physician family members - family members, patient and family-members between them, a **compensatory adaptation** to the needs of the family with a sick person, making the necessary adjustments when the plan: **financial, organizational, structural and emotional**, family cohesion solid balance preexisting disease or disease won by a member to families in need. **Family cohesion** decreases the impact of the disease on the family, making it valid in dealing with the disease

# Definition and main principles of family-centered policies and practice

As diverse as they may be, all family-centered policies and practices share the following 5 important features:

1. Families are considered experts in what helps and hurts them
2. Families are indispensable, invaluable partners for policy makers, helping professionals and advocates
3. Families are not called, or treated as, dependent clients. Helping professionals and policy makers view families as equals, as citizens, with whom they collaborate and whom they empower
4. Family-centered policies and practices promote family-to-family and community-based systems of care and mutual support
5. Family-centered policies and practices promote democratization and gender equity.

Definition of family-centeredness might differ:

- from country to country and from one setting to another
- from study-specific to age-specific or
- diagnosis-specific to comprehensive definitions, introduced in recent years.

# Family-centeredness in children with disabilities practice

In services for children with special needs

family-centered services is a philosophy and method of service delivery that:

- 1) recognizes parents as the experts on their child's needs
- 2) promotes partnership between parents and service providers and
- 3) supports family's role in decision-making about services for their child.

## Family-centered care (according to the Institute for FCC)

- Patient-centered and family-centered care is an innovative approach to the planning, delivery and evaluation of health care that is grounded in mutual beneficial partnership among patients, families and providers
- It applies to patients of all age and it may be practiced in any health care setting.



## Main concepts of family-centered care in the child health (MacKean et al.)

1. Recognizing the family as central to and/or the constant in the child's life and the child's primary source of strength and support
2. Acknowledging that parents bring expertise to both the individual care-giving level and the systems level
3. Recognizing that family-centered care is competency enhancing rather than weakness focused
4. Encouraging the development of true collaborative relations between families and health-care providers, and partnership
5. Facilitating family-to-family support and networking and providing services that provide emotional and financial support to meet the need of families.

# Conclusions

- Family-centered theory forms that the foundation for delivery of health care services in a manner alternative to that provided by the existing biomedical model
- The ideas of family-centeredness were introduced more than 40 years ago and have been widely implemented in the field of child health
- Many concepts and principles of family-centered theory have been transferred from child health to adult care practice.

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**THANKS FOR YOUR ATTENTION !**

