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Understanding and Fostering Family Resilience

Robert G. Blair

This paper examines a model of resilience and provides a fictional case example from the classical musical, Fiddler on the Roof, along with a discussion of how this model may be helpful in assisting families at various levels of functioning to bounce back and perhaps even experience growth through facing difficult challenges.

Resilience

Resilience, the ability to bounce back from adversity or challenge, occurs at multiple levels, including the individual, the family, and the community, each of which is distinct yet interdependent (Hawley & DeHaan, 1996). The examination and description of resilience has focused primarily on the individual and his or her traits, often dismissing the family as irrelevant or dysfunctional; yet, more recently various researchers have come to view the family as a key environment from where resilience emerges (Walsh, 1996; Collins, Jordan, & Coleman, 1999; Carter & McGoldrick, 1999). A resilience perspective provides a positive view of the family, addressing its strengths and how it copes effectively with various challenges, rather than how it fails or is overcome by challenge.

Providing a definition of family resilience, Hawley & DeHaan (1996) state that it is the "path a family follows as it adapts and prospers in the face of stress, both in the present and over time" (p. 295). Walsh (1996) concurs by noting that resilience should be examined as a process that occurs over time, rather than at one point in time, proposing that a resilience perspective views each family in relation to its particular challenges, constraints, and resources, and how that family copes. This resilience process supports the principle of family preservation—I that most troubled families have the potential and desire to change.

If the family therapist can better understand this process, he or she may be better able to provide services that facilitate resilience, both within the individual members, and within the family as a whole. According to Walsh (1996), it is "more important than ever to understand processes that enable families to weather and rebound from their life
challenges, strengthened as a family unit” (p. 281). In this paper the author examines a model of resilience and discusses some of its implications for the family therapist.

**Model**

Richardson, Neiger, Jensen, & Kumpher (1990) propose a model of resilience applicable to the family. According to this model, the family has both strengths or protective factors and liabilities or risk factors. As various challenges confront the family, their protective factors, if sufficient, counterbalance the challenge. Yet when the challenge exceeds the protective factors, the family is unable to counterbalance, and finds itself in a state of “disruption.” Neiger (1991) states that the family can be represented by various pieces of a puzzle. When a challenge exceeds family resources, the pieces are broken apart like a dropped puzzle. The family finds itself in a state of disorganization. Its various components either are not functioning or are out of place. Feeling stretched beyond its capacity, and finding that previous ways of coping appear inadequate, the family searches for new resources or tries to modify rules and/or roles in an attempt to cope. Once the family perceives that it has made sufficient change in order to cope, it tries to refit its various components into a unified whole. Richardson, et al., (1990) describe the family’s attempt at modifying and then refitting its various pieces as “reintegration,” and posit that it can occur at four distinct levels: (1) The family may develop rules or roles that create a level of functioning significantly below their previous level, labeled as “dysfunctional reintegration.” (2) The family may redefine itself at a level above “dysfunctional,” but still below the pre-challenge level, labeled as “maladaptive reintegration.” (3) The family may find solutions to the challenge that allow it to return to its pre-challenge level of functioning or “homeostatic reintegration.” (4) The family may create rules and/or roles that move it to a level above the pre-challenge level, labeled as “resilient reintegration.”

Although not addressed by Richardson, et al., in their model, the author would argue that families, when coping with a challenge, most often begin at lower levels of reintegration and progress to higher levels. Even families who eventually are able to cope at a resilient level have most often passed through lower levels, often getting stuck for a time, and then finding better solutions. Viewing this model as a progression from lower to higher levels also suggests that with the right resources and/or right environment, families can change and learn increasingly better ways of coping. Concurring, Walsh (2002) states that by “encouraging key processes for resilience, families can emerge stronger and more resourceful through their shared efforts” (p. 130).
Case Example

To illustrate this process of family resilience and its various stages, the classic musical “Fiddler on the Roof” will be used. Although this musical addresses a variety of subjects, the emphasis of this paper will limit itself to the lead character, Tevya, the father, who is faced with increasingly difficult challenges as his daughters marry men whom he considers progressively more unacceptable. Tevya initially copes effectively through his own creativity. However, when his youngest daughter announces that she is going to marry a man outside of the Jewish faith, Tevya is devastated. His faith requires that his children marry only other Jews or be cast out and disowned. Tevya believes in his religion, but he also loves his daughter. This news disrupts him, creating “disorganization.” Tevya struggles to reconcile the conflict as he has previous ones, reasoning with himself:

“How can I accept them? Can I deny everything I believe in? On the other hand, can I deny my own daughter? On the other hand, how can I turn my back on my faith, my people? If I try and bend that far, I will break.”

Unable to find an adequate solution for this particular challenge, he proclaims: “There is no other hand.” In his attempt at reintegration, he decides to sacrifice his daughter, announcing to her and the family that she will be considered as if dead and that her name will no longer be spoken.

Levels of Reintegration

Tevya’s solution could be labeled as “maladaptive reintegration.” It allows him to maintain his remaining family as well as his religious beliefs. Yet in disowning his daughter, he has created disorganization in the family. They are grieving the daughter’s loss and functioning below their pre-challenge level. The entire family also has been affected as Tevya has ruled that no family member is to have contact with this daughter.

Dysfunctional Reintegration

Had Tevya made the choice to cope with this challenge by physically abandoning his family or by becoming and remaining intoxicated, he would have effected “dysfunctional reintegration,” significantly reducing the family member’s access to their father. The remaining family would have been forced to reorganize in major ways in order to meet
their needs, or they would have faced increased chaos or even the breakup of the family (Collins et al., 1999).

In working with a family functioning at “dysfunctional reintegration,” it is helpful to first listen to and then acknowledge the reality of the situation and the current problems the family is experiencing. Kilpatrick & Holland (1999) note that families at this level “lack a leadership and a control structure that is needed in order to meet basic nurturing and protection needs of members” (p. 4). Given a lack of leadership, it is helpful to discuss with the family how they hope to acquire needed resources, and who amongst the family and/or outside the family seems capable and willing to help provide these resources. Family members also can be asked what they want. Do they want to maintain their current family structure, or to reorganize or even to disband? By asking questions about the desired family structure, the members better recognize the choices they have and that maintaining the current family structure is merely one of the options.

If the family members choose to maintain a similar family structure, the therapist can then brainstorm with them about how they will obtain resources previously provided by the absent or ineffective parental system. Concurring, Weltner (1985) suggests that the therapist assist the family in identifying and mobilizing external support to compensate for the lacking parental system. In contrast, Kilpatrick & Holland (1999) suggest that the therapist mobilize internal support by assisting the family in identifying and building on its strengths and resources. Sexton & Alexander (2000) also state that the first step to helping a family in crisis is to enhance their inner strengths and to build their confidence, instilling hope that they can improve their situation.

Maladaptive Reintegration

A step up from the previous level is “maladaptive reintegration,” the level reflected in Tevya’s response to his dilemma. At this level, the family generally remains mostly or fully intact. Nonetheless, members often find themselves in conflict with one another, feeling individually justified in their personal perceptions and/or behaviors, yet blaming and resenting other family members for their chosen behaviors and/or beliefs. For example, Tevya’s family grows angry with him, believing that he has been too harsh. From Tevya’s perspective, however, he has made a reasoned solution, the best one he could posit given his cultural and religious beliefs.

For the therapist, this conflict presents an opportunity to better understand the individual perspectives of the members and to build rapport with the family. Guttmann (1996) notes that if adequate time is not given to developing rapport and mutual understanding, “the
client will refrain from bringing up and revealing his real problem, feelings, and real attitude" (p.139). Similarly, Jennings & Gunther (2000) note that taking the time to develop trust among the family members encourages them to reveal more of themselves and to participate proactively in the therapeutic process. Developing this understanding and trust, the therapist can allow each person to tell how the challenge has affected him or her. By listening to each family member, the therapist builds trust, ideally creating an atmosphere where each member feels that their individual perceptions have been heard, and that their actions will not be readily dismissed as unreasonable.

**Gaining Insight**

Sexton and Alexander (2000) state that in order to gain sufficient insight and rapport with the family, each family member needs to be understood on his or her terms. They suggest that by trying to understand the culture of each member and his or her unique view of the world, eliciting options each considered, and the process of how choices were made, the therapist develops insight as to why and how specific decisions were made. This insight can be reflected back to each individual as a way of indicating that he or she has been heard and understood.

Imagine that Tevya and his family are receiving counseling. After listening to Tevya’s story, the therapist might reflect his/her insight by stating the following:

“Tevya, what a difficult dilemma. It appears that you believed you had to choose between your daughter, whom you obviously love, and your religious beliefs that have sustained you throughout your life. I appreciate that this was a difficult decision with hard consequences. Yet you made the decision and made it to the best of your ability. Still, your choice has affected the other members of your family. Before we can adequately address this issue, I need to understand each of them and how they perceive it.”

By eliciting individual perceptions and having the family present to hear these perceptions, the family gains an understanding that each member had reasons for thinking or behaving the way he or she did. Although members likely will have conflicting views, this insight helps create an atmosphere where each becomes more willing to consider options that may better serve the family as a whole.

Sexton and Alexander (2000) also note that as the therapist develops an understanding of the unique world view of individual family members, he/she can assist them to better
understand one another. Facilitating this understanding, the therapist can reframe those perceptions and/or behaviors in terms that are meaningful to the parties in conflict (Sexton & Alexander, 2000). For example, if one of Tevya’s daughters were to say: “My father is heartless. How could he disown my sister and then just go on with his life as if nothing happened?” The therapist might say:

“It appears that you value all members of your family and believe that nothing should be allowed to break it up. On the other hand, Tevya says that he loves his family, but also believes strongly in his faith. From your perspective, casting off his own flesh and blood and then acting as if nothing had happened, appears heartless; yet, from Tevya’s point of view, he seemed to be trying to reconcile the love of his daughter with his religious beliefs. This was likely a very difficult decision for him. Imagine how you might feel and respond if you had to choose between two things you dearly loved. On the other hand, Tevya, imagine what it might be like for the other members of your family to be told, without warning or consultation, that their sister or daughter is to be considered as if dead.”

As family members are assisted in gaining insight into one another’s perceptions, they most often become less critical and more united in trying to find a mutually acceptable solution.

**Encouraging Collaboration**

In order to solicit cooperation, the therapist also can emphasize that the challenge being faced is shared, and that the best chance for a satisfactory resolution is for the family to work together, utilizing the unique talents of each member, and brainstorming possible solutions that acknowledge and account for the key variables in the challenge. In support, Compton & Galaway (1999) state that the therapist should help the family to recognize the legitimacy of one another’s interests, work towards common goals, and pursue a mutually acceptable solution. Walsh (1996) further notes that identifying common interests among the family members and working towards those interests helps the family to externalize their challenge, rather than blaming one or more members. Therefore, helping the family to identify and to work toward common interests regularly serves to reduce conflict and to enhance their ability to work collectively.

Promoting collaboration, the therapist might say:
“This is obviously a difficult dilemma. It seems your religious beliefs are incompatible with the marriage of your daughter outside of the family’s faith. You all have expressed the love you have for this daughter or sibling, yet you also recognize and share your father’s religious beliefs and have at least a partial understanding of why he made the decision he did. His decision may or may not be the best resolution to this dilemma. Nonetheless, I recognize that you are a very intelligent and capable family, and as such, I desire your assistance in resolving this. I want you to work collaboratively in brainstorming possible solutions, but I especially want solutions that acknowledge the key variables of the challenge—in this case, solutions that value both the religious beliefs of your family, and the love for the disowned daughter.”

Emotional Expression

In addition to the perceptions expressed by the family members, the therapist, after considering cultural and ethnic values, also may encourage them to express the emotional impact of the challenge they are facing. Although a resilience perspective targets how a family succeeds rather than how it fails, allowing the family to share some of its pain helps to acknowledge and augment the members understanding of one another. According to Lantz & Gregoire (2000), it is important to honor the pain of each family member by helping him or her to “hold, and express the pain that he or she has endured” (p. 23). By viewing the negative impact of the challenge primarily, seeing the cup as “half empty,” the family members are able to release some of their pent-up emotions, and often, down the road in this process, become more willing and able to view the positive aspects of their challenge, seeing the cup as “half full.” Through emotional expressions of what it has lost, the family also frequently becomes more aware of what it still has and how those remaining resources can be used.

Moreover, as members reveal their emotions, they often fortify an emotional connection with other family members who are feeling the same or similar emotions. For example, if Tevya’s wife were to say: “I miss our daughter, the joy she brought to our home, and I just want to cry.” The therapist might then ask: “Does anyone else feel that way, or have similar emotions?” As members express their emotions to each other, they often realize that at least a part of their pain is shared.

Burns (1986) suggests that as the family grieves together, bonds are strengthened and old wounds begin to heal. Shared grieving also may help to separate the challenge from the family unit. As the family comes together through its shared pain, members often see that
they are all affected by the challenge, and begin working more collaboratively toward resolution.

Acknowledging Strengths

Jennings & Gunther (2000) state that one of the most effective ways of strengthening a family is to identify and build upon its capabilities. Therefore, once the family members have been heard and understood, and that understanding has been reflected back to them, the therapist can ask questions about how the family successfully managed past difficulties, probing for family strengths as well as the roles and resources various members provided. As the family discusses its past successes, it often becomes more aware of both its strengths as a family unit, and the individual strengths and talents of its members.

Facilitating this process, the therapist can encourage the family to note the individual contributions and/or talents of its members, highlighting the importance and necessity of each member. Through a discussion of past successes, the therapist also can ask about lessons the family learned when it was able to achieve a successful resolution to a challenge. Furthermore, when the family was unsuccessful in resolving a conflict, the therapist can still guide them to identify lessons it learned. The therapist thus helps the family see that every challenge offers the possibility of learning something and becoming better prepared to meet future difficulties, noting for them that “resilience is forged through adversity, not despite it” (Walsh, 1996, p. 3).

In encouraging Tevya’s family to move towards resilience, the therapist might say:

“Tevya, as difficult as it is to disown a daughter that you love, and then to have other members of your family act as if they think you are heartless, your decision is also an opportunity to demonstrate the value and importance of your religious beliefs, and the difficulty of balancing these beliefs along with the love of each individual family member. Clearly your religion is a top priority to you, and your decision indicates that you do not take these beliefs lightly. Yet this challenge also may provide an opportunity for you and the remaining family members to come closer together as you collectively grieve the loss of your daughter, and try to determine your next step.”

Once perceptions are affirmed and the challenge is reframed, the individual members often become more willing to take responsibility for their choices. In Tevya’s case, by
the therapist’s suggesting that disowning his daughter may demonstrate his devotion to his faith, he may be more willing to take greater responsibility for that choice, recognizing that it was freely made. And in taking greater responsibility, he will likely become more willing to allow other family members to make choices and/or propose solutions they deem appropriate, albeit they will likely be in conflict with his previous solution.

For example, if his wife were to say: “I understand why you made the choice you did. However, your choice has denied me the opportunity to choose. If you choose not to see our daughter, that is fine. But I want contact with her.” Following reframing for Tevya, this proposed solution, a compromise that values both his beliefs and the love of the daughter, would more likely be given serious consideration.

As perceptions, emotions, and strengths are discussed, the therapist also can point out commonalities among members, probing for common themes and values (Alexander, 1982). As common themes are expressed, the therapist can emphasize them and note that although conflict exists, there are many shared desires. He may probe deeper by asking questions about future family desires, common values, traditions, beliefs, and experiences that bind them together, thus gaining greater insight into the family’s core belief system (Hawley & DeHaan, 1996, p. 286; Hawley, 2000).

In observing the family the therapist should understand that no two families are resilient in the same way; each has its own idiosyncratic process (Hawley, 2000). Therefore, the therapist needs to assess the distinct capabilities of the family as well as their culture and beliefs, noting their impact on the family’s patterns of communication. With this insight, the therapist can better recognize the family’s current level of reintegration, and then assist them in identifying and implementing solutions that correspond to their distinct capabilities and beliefs, and which also match their current level of functioning (Dehaan, Hawley, & Deal, 1996).

At this stage of the process, the therapist also can help the family understand a resilience perspective that “views family members as intending to do their best for one another, albeit in misguided ways, and struggling as best they know how with an overwhelming set of challenges” (Walsh 2002, p. 133). As they understand this perspective, the family often becomes more united and more willing to consider a solution that is mutually acceptable. Moreover, once the family begins working collaboratively, they become less likely to make decisions reflecting lower levels of coping. And, as members work collaboratively, they frequently become more aware and appreciative of the talents
and/or perspectives of other members, recognizing that these add to rather than subtract from the capabilities of the family.

**Homeostatic and Resilient Reintegration**

Without further intervention, however, the family is likely to get stuck at their pre-challenge level of functioning or "homeostatic reintegration," resolving their current challenge, and then returning to old ways of coping, but achieving no additional growth. Facilitating "resilient reintegration" requires a reframing of the entire challenge in order to reflect something positive for the individual members and for the family as a whole.

As this reframing occurs, the family often becomes more aware of its potential, and more willing to persist through their collective pain until a suitable resolution can be identified. In support of this concept, Joseph (1994) states that individuals and families who were able to attach a positive meaning to their challenges were better able to persevere and function against all odds.

Returning to Tevya’s family, the therapist might state:

"Tevya, your family is faced with a dilemma that has no apparent resolution which is mutually acceptable. Nonetheless, the best opportunity for finding an acceptable resolution is for your family to work as a collective unit in brainstorming a resolution. Since you’ve had a chance to listen to one another’s perspectives on this dilemma, and because each of you has a unique perspective and/or resources that will help in the resolution, I suggest that you discuss these things as a family, allowing each member to share his or her ideas. As you work together toward a mutually acceptable resolution, you will have the opportunity to see and to better understand one another’s strengths and perspectives as well as your overall strength as a family. Therefore, consider that in addition to being a difficult time for your family, this also is an opportunity to become more united and to develop a greater understanding of one another and of the capabilities your family has while searching for the best resolution."

Through reframing, the dilemma being faced is labeled as an opportunity for obtaining greater family unity. The family is thus encouraged to work together to discover a shared vision that incorporates the desires of all family members, and one that provides a reasonable resolution. According to Jennings & Gunther (2000), in addition to having the
family work together as a unit, the therapist should regard families as the experts on their own solutions, and encourage them to develop creative solutions that address their unique needs.

If the family is able to work reasonably well as a collective unit, it often begins coping above its pre-challenge level or moves to “resilient reintegration.” Concurring, Frankl (1978), notes that as individuals or family members become united in a cause, previous conflicts lessen, and movement toward that shared vision is greatly enhanced because the talents and resources of the members are united and focused toward that destination. Walsh (1996) also notes that in pulling together through a crisis, “members experience a deepening of their bonds and confidence that they can weather future challenges” (p. 3).

As an example of creative solutions and working collaboratively, we see Tevya’s family dealing with their expulsion from their small village and what will be their last sight of the daughter Tevya has disowned. As the family members are saying their goodbyes and preparing to go their separate ways, the youngest daughter, from a distance, tearfully bids the family farewell. Tevya glances at this daughter and whispers, “may God be with you.” His older daughter hears this whisper and shouts it to the youngest daughter. This acknowledgement of the youngest daughter represents a creative solution to the family’s dilemma. Further, it denotes Tevya’s and his family’s movement to a higher level of reintegration. Tevya may not have found another hand, but he has found his heart. And even though the family will not be together physically, there is a sense of reintegration and growth—even resilience.

Nonetheless, although families can learn and grow, the therapist should recognize that the skills needed by the family to act resiliently change over different stages of life. What works for a child likely will not work for a teenager, and what works for a teenager will most likely not work effectively for an adult. According to Rutter (1989), today’s protective factor often becomes tomorrow’s risk factor, suggesting that the family must learn and incorporate a variety of new skills as children mature and/or challenges change. Therefore, family resilience is not a one-time process; rather, it is a life-long endeavor with a variety of milestones or levels of functioning along the way. However, these levels are hierarchical and build on each other.

**Gifts at Each Level of Reintegration**

The successful resolution of each level of reintegration rewards the family with a specific gift; and this gift builds on previous resources, facilitating the attainment of the next higher level of reintegration. For example, at the dysfunctional level, a family in
crisis is forced to restructure the family hierarchy and/or rules in order to endure. If the family is able to do this, it often obtains the gift of learning that it is stronger and more capable than it had imagined, and more confident that even very difficult obstacles can be overcome.

With this renewed confidence and structure, the family becomes better prepared to move to the next higher level of reintegration. However, the more difficult the challenge, the longer it will likely take for the family to move through the various levels, and the deeper within itself the family likely will be forced to search for the strengths and resources necessary to cope. Nonetheless, the more profound and enduring the search, if the family endures, the more strengths and resources it will find, and the better prepared it will be to cope with future challenges.

At the next level of coping, maladaptive reintegration, the family often remains mostly or fully intact, yet decisions frequently have been made that create conflict between two or more family members. To work through this level, the family members most often need to gain an understanding of the perceptions and desires of the others, and then to come to a mutually acceptable resolution. If the family is able to do this, it often gains the gift of more fully appreciating the talents and perceptions of other family members, trusting that these members are better defined as colleagues rather than as rivals.

Still, in order to obtain the highest level, resilient reintegration, besides functioning as a collective unit, the family needs to assign a positive meaning to the overall challenge being faced, and to identify and pursue a collective vision of what the family desires.

As the family is able to assign a positive meaning to the challenge, it gains the gift of learning that even difficult obstacles include a silver lining. In support of this concept, Silver, Boon, & Stones (1983) note that those capable of perceiving positive aspects to the challenges being faced were the least distressed by those challenges. Young-Eisendrath (1996) further states that thriving under difficult circumstances first and foremost depends on the meaning we make of our challenges.

The second task, identifying and pursuing a collective vision, provides the family with a mutual purpose and a forward-looking view. According to Frankl (1978), nothing helps man survive so much as a task or goal that is yet to be completed. Identifying and pursuing a mutual purpose helps the family survive and perhaps even thrive despite various obstacles. As this purpose is pursued, the family often becomes more united and begins focusing its collective strengths and resources in obtaining its desired purpose. As
the family is able to do this it gains the gift of understanding that through collaboration, it can cope effectively with even difficult challenges and experience growth.

Conclusion

In summary, a primary focus of family resilience is to gain a better understanding of how resilient families bounce back from difficult challenges, and to use that understanding to help families facing challenges move through various stages of reintegration, assisting them initially to get back on track, and then to move to higher levels of functioning (Walsh, 1996). Thus, it views the family as a “work in progress,” yet one with the capability of learning from its past, and the means of developing better and more effective ways of coping. As the therapist better understands this process, he or she can better assess the family’s unique culture and beliefs as well as their current level of reintegration. Determining this level, the therapist can then tailor interventions that match their current capabilities and beliefs, and which also encourage the family to move to a higher level of reintegration.

References


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