INTERVENTIONING IN FAMILY CRISES

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Resumé
Au long de son évolution, la famille a traversée de différentes situations parmi lesquelles seulement les unes sont perçues comme situations de crise par les membres de la famille. Ces provocations dont la famille ne réussi pas les dépasser sont causées par de nouveaux événements inconnus, imprévisibles, que la famille ne peut pas les contrôler, par des événements connus, mais qui ont une grande intensité et qui affectent les mécanismes de la famille qui ne peut pas faire face aux ceux-ci ou par des événements déterminés par la transition normale du cycle de vie de la famille.

La manière où les crises familiales sont administrées en accentuant soit le stimulus de la crise qui est le facteur déclencheur, soit les interactions de la famille avec le système social de support, soit l'évolution de la crise comme processus conduit aux modèles d'intervention assez différents, individuellement ou systémique. Ce travail fait une analyse des crises familiales d'une perspective systémique, en tenant compte des éléments du système et de l'interrelation d'entre eux, et propose en même temps des modalités d'intervention dans le même esprit systémique.

Motts clé: crises de maturation, crises de situation, cycle de vie familiale, entame systémique.

Familial crisis represents „any situation which is deludes the stress[1] turning up within the family, the tension among its members, in

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[1] Term of stress was introduced by Selye Hans in 1946, the author having in attention only the stress caused by physical factors in the beginning. Afterwards this notion appears in correlation with the factors of the environment, and the stress takes also a social form (Dragomir, Zamfirescu, 2006, 1181).

threatening family's coherence or having its tear as result." (Ciofu, 1998, 110)

Often, the term crisis had as synonym the stress one, but the term stress has only negative connotations under which pressure the humans can submit themselves to it, while the term crisis has no especially this result – in remarking sometimes a development, maturation. All families vulnerable at stress have adapting difficulties, but what represents an insupportable stress for one family could be a less stressing event for another one, but all what is counting here is the significance given by the family to different events. So, the stress degree is interacting with family's capacity of exceeding the provocations of social environment, in offering the crisis potential.

Within a family crisis, the interaction patterns are into a temporary condition of lack of balance caused by introducing a new stimulus for the family. Among the stimulus which can conduce to a family crisis is also the unexpected manifest of a symptom of one family member, as tentative or threat of suicide, strange behaviors, serious and sudden illness or other events which can function as accelerator or provocative factors of the crisis, like losing his home or his workplace.

The stressing events can be perceived by family's members in three hypostases: (1) *menacing*, (2) *losing* or (3) *provocation.*

A family crisis represents a situation in which the adequate behaviors are missing for produce the resolve or the family conserves the behaviors which don't conduce to resolve them. The problems successfully resolved in the past increase the family chance of finding diverse solutions for the new problems and decrease the probability of the appearance of a new crisis. The ancient unresolved problems decrease the chance to resolve the actual ones and, as it follows, the possibility of install the crisis is greater.

Umana, Gross, McConville (1980) assert that at the family level there are three factors which are telling the crisis state from the non-crisis state: (1) an accelerator stressing event recognized by a family member at least; (2) significant and quick deterioration of the common mechanisms of the family of overtaking the new situations; (3) affective and cognitive interrupt for more time then a week.

In Caplan's opinion (1964, 40), crises are staged. So, in *Stage 1* – the initial increase of the tension provokes habitual reactions in resolving problems thanks to crisis stimulus, and the family tries to resolve the new problem as it resolved the others in the past. If these typical reactions don't conduce to resolve problems, the family enters in the *Stage 2*. This stage is characterized by success missing and by maintaining the problematic stimulus. In its turn, this fact conduces to the tension intensifying, of troubles and sentiment of inefficiency. Continuing the crisis stimulus has as result a greater intensifying of the tension that Caplan defines as the *Stage 3*. As Caplan says, this tension acts like a „powerful intern stimulus for mobilize the intern and external resources". This stage should be typically characterized by the using by the family of some new methods in problems resolving, of attempts in problem redefining, of a reexamination of the problem and maybe of a consciousness of the neglect aspects of it, or maybe of an active resignation of the fact estate, as well of using try and error. Caplan suggests that in the third stage it increases the possibility that the family takes into account a sort of assistance from the exterior as part of searching new or unidentified resources before. In *Stage 4* the crisis continues and it can not be resolved or avoided. Tension increases more and more, conducing to a major disorganization, that will be manifested either by a familial dysfunction, either by a dysfunction of one of its members.

Families don't experiment these stages obligatory into the presented order in existing here the possibility for a stage to be experimented much more times in remaining within these stages, and this block can conduce to serious troubles.

Family crises can be classified in depending on the stimulus nature in intern crises of maturation, and external crises, and depending on gravity in acute and chronic crises.

Crises of maturation or maturational those are well-known also as intern (Burgess & Lazare, 1976), normative (Lazarus, 1976), of development or endogen (Caplan, 1974) crises. Crises of maturation are described by Burgess şi Lazare (1976, 61) as „waited events which appear normally" at the majority of individuals during their lives. Among these events, it can be mentioned adolescence, marriage, maternity/paternity

and ageing. Because these crises are normative and predictable, they offer us the occasion of making plans on what it concerns them. Maturational crises, those of development which come into sight within moments of normal transition in family life cycle are predictable and, consequently, liable to be submitted to an anterior planned intervention. Intervention guides the family during the critic period of readapting and serves as a primary measure of intervention when the family is vulnerable (Umana, Gross, McConville, 1980)

Situational crises are put in by unpredictable events and the family has none control on them: accidents, natural disaster, infractions, unexpected demises s.o. Situational crises affect the mechanisms of family resistance and conduce to a more intense sentiment of awkwardness than within the crises of development, as well to behavior disorganization.

Burgess and Lazare (1976, 64-65) suggest a little different classification of the extern crises: (1) *un-advanced events from life* – unpredictable incidents in the viewpoint of the family that lives them (for example, a family member is in hospital, born of a child with disabilities); (2) *victimizing crises* - include the involving in a „overwhelming situation, full of where a family member could be affect physically of psychically, traumatized, destroyed or sacrificed. Such an event involves a forced act of physical aggression, realized by another person, group of persons or of environment". Among the examples, it finds the war, revolts, racial discrimination, viol and attack; (3) *advanced events from life* – refer to the predictable changes which involve a certain degree of participate of the individual. As examples, it count a child adoption, divorce of separation, etc. (Umana, Gross, McConville, 1980)

Caplan (1970, 201) suggest three reasons of the appearance of an extern crisis: (1) losing one or more source of satisfying the fundamental needs; (2) possibility of such a losing; (3) a provocation with overpasses its own capacities.

Acute crises are those situations in which the family experiences the shock and begins to find solution for resolve them after 6 weeks while within the *chronic crises* the family has no solutions or the appeared those were refused by the family, after 4-6 weeks. We can talk about chronicizing also when the family rests blocked in a phase of crisis.

But exist also families that pass from a chaos state to another one and who seem to live into a continuous state of crisis. This chronicized state can be part of the style life and it must not be confounded with the family crisis.

A crisis does not mean necessarily a tragic or unusual event, but it can be a normal component of a family development and maturation. In such moments, the common modalities of reaction, the used resources are not efficient, and the homeostasis is lost. In crisis situations, the family reacts depending on the proper possibilities of resolving the problem, trying to come back to the ancient equilibrium. After such a situation, the family can find again the ancient equilibrium or to obtain a new superior one, inferior one or of the same level with the initial one (fig. 1).

Stimulus which
conduce to the crisis

Family
(in
homeostasis)

Homeostasis
losing/ Lack of
balance/ Crisis

Intervention
in crisis

1. Crisis resolving successfully
(family rebalances at a higher level)

2. Crisis resolving successfully
(family rebalances at an equal level)

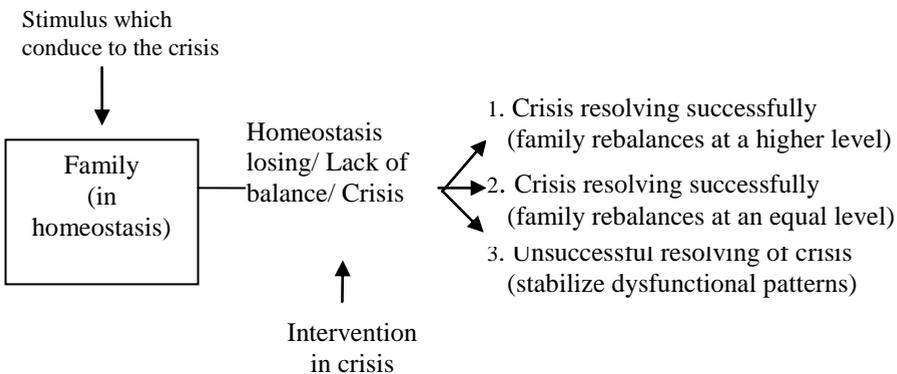3. Unsuccessful resolving of crisis
(stabilize dysfunctional patterns)

fig. 1

If the family succeeds to face some anterior situations of crisis and to resolve them satisfactory, it will pass easily an ulterior similar situation than if doesn't succeed to resolve the anterior one satisfactory.

Intervention goal in family crises is to help the family to recover less the level of efficient functioning in which it were before crisis blowing up by re-equilibration and coming back to a homeostasis situation.

Families that are experiencing a crisis enter in the attention of those who intervene in different ways: (1) searching new modalities of

crisis resolve (see, Caplan's Stage 3); (2) after they have failed in crisis resolve (Caplan's Stage 4) and they began consequently to be stabilized on a dysfunctional level; (3) family crisis develops publicly or family arrives to pay attention from specialized institutions (for example, a family quarrel for which the neighbors ask the police, a suicide tentative of a family member where the medical personal is involved in, or the observation of a scholar counselor or professor, according to it a child has behavior troubles); (4) by specialists contact, into a preventive goal, when it attends a child born or the child enters within the educational system, and this event is perceived as difficult, not to be over by the family.

Systemic intervention

The systemic model[1] lays stress on social context importance for produce and maintain family crises and is adequate both in crises of maturation and in the extern those, in having as fundament the social network members involvement in crisis resolve.

Systemic intervention goal is to develop a helper context of developing, so that the future stress events could be controlled more efficiently. Into the systemic intervention the accent is stressing on the social context in which the family and crisis stimulus are meeting together, well-known being the fact that family members perception on

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[1] Systems theory search to describe the principles on which are functioning, developing the systems and they interact with others. These principles are applied both to diagnose the social systems behavior and for formulate strategies of change the system. A symbiosis relationship exists among the parts of a system. Each component is affected by all other parts of the system at a such level and in a such measure. A changing of one part will affect all others. For this reason, the social worker must anticipate how an intervention will affect those from the immediate entourage and from the environment of the client. For example, social workers who are working habitually both with husband and his wife when they center on a problem of marriage are recognizing that a change of one of them will affect also the other too. All systems tend to function in manners that are preserving a dynamic equilibrium or a stable state. Even if the systems are developing and increasing naturally, they resist at radical changes in trying to maintain a sufficient degree of similarities. When it produces a significant change, the system tends to guide quickly to a more stable level of functioning in establishing by this a new equilibrium stage. So, a stage change model tends to be a stage one more than the progress in a constant rhythm. It is useful for each social worker to recognize the resistance inherent to any system for a fast or extensive change (Miftode, V., 2004, 31-37)

stressing events depends on social context where they take place, and family ability of resolve successfully the crises depends on the existence of a helper social context.

The system of interaction is defined as a set of triadic transactions; the crisis can be frequently induced by the system of interaction of the family. We don't act simply as a reaction to the others but in the other *context*; behavior can't be explained in terms of dyadic interactions, the triadic transactions are considered primary localization of crisis, and their change becomes a major preoccupation of that who realizes the intervention. Crisis is frequently presented by the family as in identifying at the level of only one member, and its' trouble amelioration is considered a secondary effect of change from the triadic system. Systemic intervention in family crisis follows to produce the changing in those sequences of behavior from the family interior that are maintaining the crisis. Evaluation in systemic intervention has as goal to clarify the current transactional patterns being clinical firstly. In the context of this model is realized by that who makes the intervention and it does not constitute a distinct stage of intervention. Systemic intervention has as basis common meetings with family as an unity and the specific methods used for influence the changing, like as: symptom re-labeling, communication modeling, and paradoxical prescriptions. (Umana, Gross, McConville, 1980)

Intervention centered on the process

The model centered on the process is applicable each time when an individual or a family action was dramatic affected by a personal losing or by a tragedy and is used for 4-6 weeks after the event that provoked the crisis.

The model emphasizes the importance of an intervention focalized and limited in time. Efforts of intervention have two principal aims: (1) to soothe or to abate the events and (2) to sustain the person and to help her by immediate therapeutic clarifying and orientation during crisis period.

This method is different from the others and it supposes: (1) to joint immediately with the family that is passing a crisis and they respond rapidly to whom offers his help; (2) intervention during a limited period; (3) attention focalized on crisis configuration (event' producing nature and subjective sense of it for family members); (4) stressing the decisions

settled for offering help to the family and; (5) mobilize the help resources in the frame of family' social network.

Malcolm Payne (1997, 95) defines the intervention in crisis as "an action destined to interrupt the development of a series of events which would conduce to perturbations in its normal functioning".

Naomi Golan (1986, 296-329) presents the intervention levels in crisis as it follows: (1) the first level is that in which the person who realizes the intervention is emphasizing the symptoms, brings back the family at the functional stage anterior to the crisis or tries to ameliorate its actual situation, and helps the family and community to assure the necessary support; (2) the second level supposes a much more complex intervention, namely: the specialist helps family to understand the link between the present situation of crisis and those in the past, helps to develop new efficient modalities of resolving the problem.

Maybe if it is very difficult to delimitate and treat each phase of the intervention process in part, the specialty literature proves that the intervention in crisis can be shared in three phases: initial, middle and final phases.

A condensed schema of the intervention phases in crisis could be:

- *Initial phase* has as under-stages: (1) focalizing on the crisis situation, concentrated on "*hic et nunc*" – now and here, on the emotional state, on the events which conduced to crisis apparition; (2) evaluating troubles determined by the crisis and priorities (what's the problem to be tackled in the first); (3) contract, aim defining, objectives and work tasks);
- *Middle phase* has other three under-stages: (1) data gathering and information obtaining which miss, clarify some information, select more important discussion subjects; (2) behavior changes and verify the mechanisms of learning new behaviors in the interest area, goal establishing, specific objectives establishing, combination between cognitive tasks and behavioral those;
- *Final phase* has as under-stages: (1) verify the period passed from the first interview and establish /or remind the date of the last séance, proposal for rarely meetings for client prepare in the view to conclude the assistance contract; (2) evaluation, summarize made progresses, review the most subjects obtained, review the tasks, established objectives and the way in which they were carried up or not; (3) plan for the future and discuss the actual problems, discuss future client'

plan, help the client to accommodate with the idea of interrupt the assistance situation/ of contract, help the client to accept the idea of coming back to the agency or to the organization with other problems – if it will be the case. In case in.

Intervention centered on the process supposes to understand the familial crisis in systemic sense. Each stage has to be over pass by the family as an whole. In the situations of thorough the stages only by some of some family members the change will be felt both in the individual level and familial. Modifications made on one system element attract exchanges into the familial system dynamic. The lack of balance provoked by crisis is felt individually by each family member, but with an echo at the family level, and the individual re-equilibrations will be felt at the family level as an whole, too, by each member because the family system is an whole identifiable by a series of interdependent parts and processes founded into interrelationship.

Intervention centered on problem resolve[1]

Family crisis can be resolved also by events nature modifying, in changing family' members behaviors. Crisis stimulus is the major variable which must be examined into the intervention oriented on the problem in family crisis (duration, intensity, hardness, magnitude, stimulus proximity are important elements in analyze and intervention), and the family constitute the major source of support of the person, in influencing the environment aspects which serve to consolidate or diminish person's specific behaviors. In the intervention centered on problem solving family members are trained to use behavior principles for produce the change.

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[1] Helen Harris Perlman (1986, 248) takes the expression „problem solving" from Dewey for express the intervention on a social case, intervention seen as a process and which produce some questions: What you must do for the process developing? How you can engage actively the applicant from the beginning into an aspect of his problem, beyond reconsideration, beyond his feelings, beyond the vague hope for an unexpected solution? How to involve the applicant to feel himself as a participant in his own problem treating from the start?

* To remark the term 'applicant' used by Perlman and not the term 'beneficiary', as it is used in our literature, important and grasp differences into the reporting type at social services.

Intervention goals into the orientation centered on problem solving in family crisis are: (1) family must get into the habit of necessary abilities for crisis solving; (2) exchange behavior which is in relation with the stimulus which provoked the crisis; (3) family can come back to its normal functioning; (4) generalized skill to resolve problems so the family can be able to resolve successfully future crises without external intervention. (Umana, Gross, McConville, 1980)

Intervention centered on problem solving is applicable especially in the family who have a child identified with behavior troubles or who committed offences.

The first preoccupation of that who makes the intervention is to identify crisis stimulus, perceptions and reactions of family members at stimulus blowing up, as well family trying to solve it.

That who intervenes will search answers to some questions:
- Which particular event from the interior or out of nuclear family has provoked the crisis (for example, which is the accelerator event, crisis stimulus)?
- How did crisis appear?
- When did it appear?
- What the family namely made till now for solve it?
- What characteristic of family or of event is limiting solving it?
- What is hindering the family to resolve the problem?

As well the other models, passing over successfully the crisis by the family together with a specialist supposes some steps: (1) attentive evaluation[1] of the factors that accelerate the crisis and specification of

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[1] Gottman, Gonso and Markman (1976, 178-181) propose to use the „Problems Inventory" as a help for select an aspect on which the two partners want to insist. „Problems Inventory" enumerates a zone of disaccord existent in numerous couples: money, communication, parents-in-law, sex, religion, relax/ free time, friends, alcohol and drugs, children, jealousy, letting space for analysis of other unspecified problems too. Each partner is asked to reveal the gravity of any problem enumerated on scale from 0 to 100, zero indicating the fact that the problem is not difficult, and the 100 in revealing a maximum of gravity. Also, it is asked to each partner to write from how many time this aspect constitutes a problem (years, months or days). After each partner completes a formulary, they can compare the answers and select an aspect for debates. After the problem was noted, it will be analyzed I detail. The problems are definite then by unities observable and measurable of behavior, specific behaviors that follows to be: eliminate, diminished, increased, modified or maybe developed.

some tasks where family members must involve in for crisis solving. Evaluation supposes to observe and register some relevant current behaviors of family members, their actual behaviors of un-adapting and behaviors in antecedent face to crisis stimulus and/or face to present stimuli which are maintaining the crisis; and (2) behavior changing and changing monitoring.

As a conclusion, I can say that family functioning supposes to maintain a homeostasis not only within the system, but also in relation with the environment. Interrupting this equilibrium is followed by family's trying to reinstall it or to arrive to another one. Sometimes during certain equilibrium interrupting periods while the families are vulnerable, these breaks are associated to crisis states. Indifferently of the used approach, the intervention in family crisis situations is an active process, limited in time, which is acting during a period of lack of balance with the aim of settling the immediate impact of some stressing, unpleasant events, in contributing to mobilize social capacities and resources of all family members affected by the crisis.

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