

Family and crisis: contributions of the systemic thinking for family care

Ana Lúcia de Moraes Horta^I, Hugo Fernandes^{II}

^I Associate professor, Department of Collective Health, Paulista Nursing School, Universidade Federal de São Paulo. São Paulo, Brazil.

^{II} Adjunct professor, Department of Collective Health, Paulista Nursing School, Universidade Federal de São Paulo. São Paulo, Brazil.

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The noun *crisis* comes from the Greek etymology, which means a dramatic change in a person's or group's life, as the familiar. It can also be perceived as a biological, social, psychological or spiritual disturbing tension that requires additional effort in order to maintain the balance⁽¹⁻²⁾.

Families at different life cycle stages, from different configurations, and societies, may go through many crisis situations that may affect the family system and its members⁽¹⁻²⁾. When thinking about this term, aspects related to financial difficulties arise in mind. Indeed, familiar crisis can be triggered due to economic factors⁽³⁾. Many other ways of tension, however, can be experienced by the family. Moral issues, secrets, fears, legacies, aspects related to sexuality, gender relations, diseases, losses, bereavement, and many others, compose part of humanity daily life that can trigger crises. So, crisis can be constituted by internal or external factors and can be considered according to the context, the parts involved, and its development process.

The consequence of crisis may be the causative agent. It is the problem manifested in something or in someone, symbolizing the loss of homeostasis of the familiar nucleus. This disharmony, or instability, whether acute or chronic, causes discomfort in the members at different levels. Therefore, what is reported by a member as something damaging, is not necessarily, what the other member views⁽¹⁻³⁾. Thus, it is worthwhile for the nurses to apply the systemic thinking for understanding the phenomenon in the family, and to believe in the family's ability to seek solutions for their problems and in their strengths and potentialities.

One of the main concepts of systemic thinking is the nonsummativity, which states that the family as whole is greater than the sum of its parts. In other words, if we only look at one individual, we may not understand the whole system and then build wrong intervention. In this way, the respect for the family's "integrity" allows nurses to understand how crisis affect people, causing them stress, response mechanisms and adjustments at different degrees. Behaviors and attitudes of some members can be better understood, for example, when nurses interview the bulk of family members instead of only one, since each individual may have a different understanding of experiences from a different perspective. Another important point states that families are institutions with high capacity for morphogenesis in the face of crises, so they are enabled to search for the best wellbeing possible⁽¹⁻³⁾. Therefore, the term "dysfunctional family" may be mistaken, whereas functions, roles, structures, and dynamics can be often rebuilt. What must be clear is that every family works in its own way and time.

Currently, nurses already recognize that one's behavior influence another person, so the person influences and is also influenced by the other. We call it "circularity". Regarding the stressors, nurses must formulate the hypothesis that members of the family can contribute positively or negatively to solve the crisis, depending on how the interaction between events and individuals occurs. Among the elements, there are healthy or conflicting relationships influencing on the family system, as well as on their subsystems as the marital, patriarchal, and fraternal, among others⁽¹⁻⁴⁾.

All families have equifinality, so it allows nurses to see that in the face of stress, there is no single way to the family deal with adversities, but countless choices constructed according to each case and moment⁽²⁻⁵⁾. From a

perspective of a new paradigm, nurses must reflect that crisis in the family is something complex, and it is necessary to broaden their view and actions considering the instability of the system, the certainty that healthcare professionals do not control actions and thoughts of individuals, and their participation in the family system is collaborative for joint search for options to solve the problems.

Far from limiting the systemic thinking to the characteristics or concepts presented, this editorial aims to reflect that crisis in the family is not only negative, that destroys its homeostasis at a given moment, but it is also positive, because it creates changes that foster new ways of living, living together, and acting. Inspired by the various bodies of Hecate (Greek goddess of change), families, and nurses are invited to leave what is comfortable and secure behind to explore new paths, even if they are, a priori, threatening.

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