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The Parent Child Relationship on New Family Scenario

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Abstract:

In the last two decades, the modern family has been going through significant changes in several aspects of its configuration and structure, requiring a complex and multidisciplinary perspective essential to its understanding. The children subsystem is not immune to these changes, and the parent-child relationship must be reformulated in the light of these wider transformations. Today the modern family, therefore, can appear to be deeply different from the traditional one in terms of structure and roles.

This paper is a reflection on some of the alternatives to the traditional family forms in order to highlight critical and resilience factors.

Keywords: parenting, family, prejudices, resilience

1. Introduction

The contemporary family, in recent decades, has experienced structural and relational transformations that have involved both the marital and the parental axis; changes that have challenged the traditional family model which consists of a married, heterosexual couple and biological children.

These new family configurations require, therefore, an understanding based on cultural differences, an indispensable resource for success in changing social phenomena, and an escape from situations that may create any prejudice.

Differences that can be seen as an enrichment for the basic functions of care, inherent in the same family concept, and not necessarily as a risk factor for the individual components. Studies in different disciplinary sectors, therefore, should not act as the key issue as it could or should be one family, rather, that which it is (Garro, & Salerno, 2014).

2. Critical Events and Resilience Factors

Many of the new family structures arising from regulatory, non-critical events that for decades have been shown as a source of destabilization and family "crisis", today often represent the driving force for the movement of adaptation in which the elements of resource outweigh those of fragility, resulting in structured and solid, relational configurations.

The formation models of households, which have transformed over time and are ever more popular on the social scene, indeed suggest that it is necessary "to normalize" the difference and that it is possible for each individual to choose the type of family that they want to create, also different from that which adheres to the norm and tradition (Bastianoni, & Fruggeri, 2005).

Among more challenging, critical events is that of pregnancy, even more so if it happens during a complex or challenging period in adolescence (Tosto, 2014). As well as family life, adolescent parenting has important repercussions on the psychosocial adaptation of young mothers. Early motherhood is configured, in fact, as a possible interruption of their regulatory development, since it implies an overlap of incoherent, developmental challenges in which the tasks of developing central adolescence (the corporeal transformation of identity; personal, cognitive and emotional development; and the reworking of relations with the peer group and family) are intertwined with the psychological and relational transformations triggered by motherhood, reducing the chances that each process is being adequately addressed (Trad, 1995).

Mothers' difficulties intersect with those of their children, who experience different evolutionary complications that appear precociously, persisting into adulthood and affecting all domains of development (Whitman et al., 2001). In particular, as reported in more significant research (Manlove et al., 2008; Gueorguieva et al., 2001; Williams, & Decouflè, 1999), sons of teen mothers are highlighted as a high risk population for the emergence of intellectual disabilities, and this has implications in terms of social, behavioural and academic adjustment, which requires special educational intervention.

Beyond the usually worrisome aspects of such data, researchers highlight the evolutionary variability that characterises the population in question, confirming overall that it does not necessarily translate unfavourably. Rhule et al. (2006), specifically identify with the

absence of behavioural disorders in appropriate language development, both in the successful adaptation of the mother and in the quality of her parenting, as well as with factors that promote child development by predicting the formation of a positive adaptation in social and academic domains.

Even the most dysfunctional forms of family relationships can, therefore, contain some level of resilience and areas of intervention. For several years now, the subject of Intimate Partner Violence (IPV) has been included among possible symptomatic manifestations that affect the entire family unit with consequences on all subsystems (Salerno, & Giuliano, 2012; Salerno, 2014). As amply demonstrated (Luberti, & Pedrocco Biancardi, 2005; Holt, Buckley, & Whelan, 2008; Hungerford et al., 2012), exposure to domestic violence comes in many variations. Holden (2003) elaborates on a real taxonomy relating to different situations that see the child being involved in the violence between parents as early as the intra-uterine life, with particular attention to the presence of the child during the disputes as an eyewitness or auditory, or forced to take part directly in the role of victim or co-aggressor (Salerno, & Merenda, 2013).

Although the relationship between domestic violence and psychological problems in children is confirmed, a range of manifestations of this malaise appears particularly extensive (Olaya et al., 2010); in general, there is talk of externalising and internalising problems, referring to different symptoms that vary in their severity and mode of expression. Besides having identified frequent disturbances in behaviour, low self-esteem, poor social skills and anxiety disorders, some studies have focused on specific psychopathological syndromes: for example, Russell, Springer and Greenfield (2010) found a risk factor in assisted violence for the development of depressive symptoms in adolescence and in the age of the young adult; Kilpatrick and Williams (1998) have, instead, identified the presence of symptoms of posttraumatic stress disorder with a regression to previous stages of development, nightmares, games in which the traumatic event is played and separation anxiety. Even in terms of physical health, it seems that witnessing violence increases the risk of diseases, especially relating to growth retardation, speech disorders, diseases due to low immunity, gastritis and headaches (Howell, 2011).

Despite the evidence of such data, research on exposure to IPV often has conflicting results. Just as there are studies that discuss particularly affected and damaged children, there are, in fact, studies whose results describe the proper functioning and a positive adaptation of minors who are, for this reason, defined as resilient (Hungerford et al., 2012; Miller, Howell, & Graham-Bermann, 2012). In a study by Graham-Bermann et al. (2009) which found that resilient children have less depressed mothers with a somewhat higher self-esteem in the realm of parenting skills and a greater sense of self-efficacy; this group of subjects, despite being subjected to assisted episodes of violence at the same rate of children who express greater suffering, shows a better adaptation than the authors correlate primarily with the quality of parenting. It also seems that a style of secure attachment towards the non abusive parent is a protective factor of particular relevance: resilient children have the ability to rely on an adult (at times, a member of the extended family or a teacher) whom they trust and whom they are certain to find caring, protective and empathic responses (Levendosky et al., 2002). Additional factors that enhance resilience are pro-social skills. Specifically, the relationship with the peer group is fundamental, whether they are siblings, classmates or friends, as they can not only provide protection and emotional support but they are often sources of useful information on how to deal with the situation, who to contact for help, how to interact with parents, especially in the case of couples with a conflict of low intensity (Guille, 2004; Howell, 2011).

In general, it appears that the negative impact of couple violence on children is frequently underestimated; the parents themselves often appear unaware of how their children are suffering, convinced that they do not understand or that, by not being directly involved, the violence does not affect them that much. Such an attitude can be defined as a further act of neglect towards children and is part of the dysfunctional reactions that belong to this type of family. As shown in some studies (Dixon, Browne & Hamilton-Giachritsis, 2009), identifying early signs of impaired parenting skills or serious difficulties in the parent-child relationship can help prevent cases of ill-treatment; therefore, it becomes essential to include, in preventive programs, measures to support parenting and the marital relationship.

The subject of parenting acquires new meaning even in the case of mixed couples, as well as very current and widespread family forms; the peculiarity of these unions allows one to explore the practicality of integrating different cultural experiences in terms of couple, family and societal relationships (Scabini, Regalia, & Giuliani, 2007), by expressing the deepest level of meeting between different cultures and identities that seem, by now, to form the basis of modern society.

For many mixed couples, the transition to parenthood coincides with the acquisition of a greater awareness of the complexity of intercultural relations (Gozzoli, & Regalia, 2005) soliciting issues that go beyond couple dynamics, such as fears or contests between families of origin regarding the experience of the belonging of the child who can pass down their cultural baggage. It is from the choice of name to give to the child that the couple addresses explicitly what it means to safeguard the culture of origin; such a choice is an expression of cultural compromise that spouses have reached. This phase also involves their families of origin: grandparents, for example, see in the grandson a guarantee of the continuity of identity (Tognetti Bordogna, 2004). To overcome conflict, sometimes one opts for a universal and recognized name in both cultures; a name that may have nothing to do with the cultures of origin of the parents, or one for each culture; other issues regard the linguistic and religious choice, which, in many cultures, is of great symbolic value.

In general, this second generation, as the result of bi-cultural families, has an opportunity to reflect within a multiracial view to possess the best, relational skills, and also to demonstrate sensitivity and vulnerability before the various attitudes of parents, to the reactions of the participants and to ambivalent attention received at school or within the wider community. The same generation also has the ability to decide which of the two ethnic parental groups they are to identify themselves with, even if the choice for a specific ethnic category can be difficult because of the influence of expectations and social norms, partly transmitted to the child by the parents; yet, these children can opt for self-identification directed towards behaviours and cultural traditions away from the

background of the family (Bratter & Eschbach, 2006).

3. More Uxorio and Homosexual Families

The various forms of "being a family" are thus represented by nuclei, each one different and with a specificity that distinguishes them from the traditional ones; they act as an example, in this sense, through the absence of a bond of consanguinity, characteristic of adoptive families that require the social and cultural support of the social and cultural context of belonging, often full of prejudice and distorted representations. The idealised vision of the adoptive parents, in fact, known as heroes and "perfect", struggles to be resized, as well as the taboos regarding the adoption that requires special expertise on the part of all operators (educational, social etc), in order to ensure the welfare of its protagonists, so not only the child but also the parents, and a satisfactory social cohesion (Novara, Garro, Serious, & Vitrano, in press).

Another type of household which is the subject of strong prejudices and resistance is the de facto family (husband and wife) who, because of their rejection of social and legal norms, are known as less stable than the traditional one based on marriage. More prevalent among younger generations in big cities - probably in areas where there is less social control and family who, otherwise, would hinder diversified experiences and who are far from traditional models - is the 'more uxorio family', which is formed by partners who, for education and employment status, manage to go beyond gender roles, to negotiate equal roles and economic independence (Zanatta, 1997). Inside, there can also be children whose procreation until the Sixties was considered deviant, highly stigmatised, and born out of "living in sin" relationships (Rindfuss, & Vandenhevel, 1990; Oropesa, 1996). And it is the addition of more uxorio couples with children that has raised concerns in relation to the potential impact on the well-being of children, mainly due to the fragility that common sense confers. In fact, the assumption of many social, psychological or sociological theories is that two married biological parents provide the environment for optimal child development. Deviations from this family structure would be, therefore, problematic for children who experience greater difficulties than the children of legitimate couples, expressed through academic performance, behavioural or emotional problems, depression and deviance (Hofferth, 2006). Data that, in reality, does not consider the significant influence exercised not only through the individual characteristics of the parents, which existed before the formation of the family, but also through their approach to parenthood, the behaviour of children, the new triad (mother-father-son), and to the level of support and parental involvement. Features that appear to be independent of the type of bond - legitimate or not - and that unite parents (Thomson, Hanson, & McLanahan, 1994). It is good, then, to not concentrate on the dichotomy of marriage versus cohabitation, a comparison often based on cross-sectional research that does not report the participants' life stories in the investigation or for which it resorts to inadequate, investigative tools, but rather the subjective variables and psychologies of the parents, unable to determine the moral and material welfare of their children, as well as the quality of the parental bond (Osborne, McLanahan, & Brooks-Gunn, 2003). Therefore significant to the well-being of the offspring, it would not only be the variables related to family processes such as conflict or the happiness of the married couple who, although not directly involving the child, have a considerable effect on his behaviour, but also, and especially, the variables directly related to the parent-child dyad such as the level of disagreement, interaction, supervision and emotional and instrumental support.

The number of sociological, psychological and medical considerations, relating to the different ways of making a family, however, has promoted a significant increase of information possessed by not only the family members concerned but also the operators of helping relationships who, gradually, are moving away from negative readings on the theme in question. It acts, in that sense, by example as it is caused by beliefs about socially stigmatised groups, such as LGBT (Lesbian, Gay, Bisexual, Transgender), which are often not governed by personal experience, but instead culturally handed down, creating unreasonable prejudice (Gillis, 1998; Herek, 2000; Garro, Novara, & Di Rienzo, 2013).

Among fears governed by common sense, there is the future sexual orientation of children of same-sex partners, who would be educated to homosexuality, yet are hypothesised with mental disorders and poor social skills. In reality, what the results of some research show is that the main cause of impairment of healthy development in minor children of gay and lesbians is the discrimination and psychological violence stirred by peers and by society, in general, of which they may be victims (Amato, 2012).

Although there is no scientific evidence on the 'negative' influence of parents' sexual orientation on personality development in children, homoparentality continues to face social and legal obstacles that call on the aforementioned ostracism. Continuing investigations into the elements that characterise the LGBT community, and homoparental families in particular, should instead encourage us to consider them no longer present in the juxtaposition of homosexuality and procreation. The dominance of the traditional, heterosexual family, however, stands out as the "natural" and "normal" type (Bernini, 2010), able to determine a clear division of characters culturally attributed to femininity and masculinity. Heterosexual people continue to act, therefore, as "normal" and as "standard" by posing as the "natural" family and as the result of a deposit of identity that does not require the presence of new subjectifications (LGBT population), new practices (e.g. contraception or artificial insemination techniques), and new forms of parenting and affiliation. In this sense, homosexuals are perceived as dysfunctional as they do not work to the same (hetero) sexual standards, conducting parenting practices separately from the biological sex of each component.

These are also the reasons for which the unveiling of the sexual orientation of the child (coming out) confuses parents (heterosexual), putting a strain on the ability to accept and welcome the entire family, provoking a crisis of identity and feelings of inadequacy and of failure of the parental role. And chain reactions in the context of family relationships also impose on the communication of transsexuality of the parent; a critical event that is not normative and that undermines the identity of the family system as a whole (White, & Ettner, 2004).

The transsexuality of a parent is a matter of identity that involves all members of the family: the radical change of one of the parents questions the identity of each. The organisational identity of the family system is put into question, in terms of the transformation of

pre-existing bonds (Youniss, 1983) and of the renegotiation of the relationship between parents and children (Grotevant, & Cooper, 1986). By overcoming the crisis, it emerges as a joint venture that involves the redefinition of the individual subsystems, an increase in the flexibility of family boundaries, as well as roles, rules and methods of communication.

To conclude on LGBT families, it is possible to point out that significant adults, peers and the social context can guide, via a cultural transmission, child development in the direction of male or female. Mirroring, offered by others, is not sufficient enough to stabilize gender identity, and once children are classified as male or female they are committed to preserving a picture of themselves in line with their sexual identities, sharing attitudes and values, and selecting information consistent with the related forms of self-awareness (Mischel, 1981). To contribute to the gradual, biographical shaping of personal identity and gender, therefore, roles are sexually attributed, agitated, observed or imagined (Salvini, 1993; Miano, 2011).

3. Discussion and Concluding Remarks

The research, therefore, must be conducted in order to pathologize family differences, given that if the relations between people are built on mutual feelings, on emotional relationships and on the well-being of different actors, then they constitute a reassuring environment for development (Fruggeri, 2005). There is a need to take care of the bonds, with a deep conviction that all forms of the contemporary family are worthy of respect as much as the traditional one is, because there is no family immune from critical risk issues in the course of their life cycle.

And it is necessary to consider the individual capabilities to withstand difficult living conditions (resilience), which can provide new access channels and the construction of behaviours that promote well-being by facilitating resilience (Thompson, et al., 2014). Nevertheless, in Italy, legal and social equality of children still appears far, beyond the household type of belonging, and able to subtract the same to any form of discrimination.

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