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FAMILY THERAPY WITH MIDLIFE PARENTS: PERCEIVED BRIEF THERAPEUTIC INTERVENTION

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Abstract

In view of prolonging life span and changing patterns of "child launching", midlife phase of parenthood is extending. The long middle phase of parenting is neither sufficiently understood nor studied enough, by comparison to the phases of entering parenthood and parenting young children. The study examines a brief therapeutic intervention, in which the midlife parents' perspectives are explored by three factors: self-efficacy, parental role, and parental well-being. Few researches have studied the correlation between parental role, well-being, and intergenerational ambivalence among midlife parents. This study aims to take the research on parental experience one step forward, aiming to shed light on the possible influence of solution focused therapy on parental role. In addition, parents' perspectives on their self-efficacy are being examined. Hence four conceptions are being introduced: parental self-efficacy, parental role, parental well-being, and solution focused brief therapy. This research fills a gap by focusing on the continuous midlife parental experience before and after brief family therapy intervention. The further understanding of midlife parenthood will permit us to offer focused brief therapy adapted to this growing population. This article is a part of the requirements for doctoral studies in the Doctoral School of the Faculty of Psychology and Educational Sciences at "Alexandru Ioan Cuza" University of Iași.

Keywords: Parental role, parental self-efficacy, parental well-being, solution focused brief therapy.

1. Introduction

In view of prolonging life span and changing family life cycle, midlife phase in parenthood is extending. Due to the late giving birth and the delayed entering into matrimony midlife parenting becomes more frequently a common occurrence. The long middle phase of parenting is neither sufficiently understood nor explored enough by comparison to the phases of entering parenthood or parenting young children (Levitski, 2009). Levitski (2009) and Trainin (2015) were among the few researchers who studied midlife parenthood from of view of the parents' themselves. In Trainin's (2015) words, "Those are the years in the parental experience when parents watch as their children grow from adolescent to adulthood and are actually seen as the most interesting period in the parental experience" (p. 139). Kenrick, Griskevicius, Neuberg, and Schaller (2010) pointed out the major role parenthood plays in human life and positioned it at the top of the human needs pyramid.

Midlife parents oftentimes must face dual contradicting needs: the need to simultaneously negotiate a family life cycle transition with an individual life cycle transition (Carter & McGoldrick, 1989). This stage of ongoing negotiation presents the parents with continuous demand for adjustment of their parental roles (Levitski, 2009). Omer (2000) sheds light on the midlife parental experience in Israel. He portrays a challenging, diverse parenthood characterized by destroying balances. Parental traditional authoritative roles fail to provide the desired result of stability, and therefore are neglected while new roles are difficult to reconstruct. The Israeli experience reflects the contemporary global situation. Situation in which the midlife parents are faced with loss of authority and feelings of incompetence in their own house. This loss is intensified by the young adults' ongoing demand for increase in privileges versus decrease in their active participation in expected familial tasks (Omer, 2000).

That gap bridging can become an impossible, unbearable task for the parents, affecting their sense of well-being and self-efficacy. The midlife parents exhaust other remedies and come to the therapist feeling incompetent, looking for immediate solutions.

An effective short-term therapy together with the parents is needed. Therapy which targets the subjective perceptions of midlife parents regarding their parental role and self-efficacy.

2. Literature Review

A few main conceptual frameworks taken from different research fields, are part of the theoretical cornerstones in this sphere. Research fields including the changing family life cycle, the life course perspective, the therapy's characteristics and concepts such as psychological well-being and self-efficacy.

2.1. The changing family cycle: psychological aspect of family life (Carter & McGoldrick, 1989)

Throughout the past several years the modern family has been forced to face instability and various challenges in its family life cycle. Carter and McGoldrick (1989) proposed a model of family life cycle which relates to the changing family dynamics. First goal is to provide a view of the family life cycle via the intergenerational unity between parents and children. Second goal is to add another dimension the clinicians' view of family problems and strengths through time, by introducing family life cycle framework (Carter & McGoldrick, 1989).

The model refers to the family life cycle via three main aspects:

1. The contemporary predictable stages of family development in traditional middle-class family and typical clinical fallout when the family faces troubles in negotiating these transitions.

2. The changing patterns of the family life cycle including change of perspective in what is considered "normal".

3. Additional clinical perspective on therapy, adapted to each developmental life cycle stage. The therapist's main role is to assist the family members to reconstruct their roles so that they can develop onwards. Stress is considered maximal at transition points between the stages. Consequently, the symptoms are most likely to occur when there is interference in the evolving family life cycle.

The family life cycle model consists of 6 stages (Carter & McGoldrick, 1989). Starting with single young adults leaving home, then the joining of families through marriages, continuing to the stage of families with young children, families with adolescents, launching children and moving on, finally arriving at families in later life. Midlife parenthood is dominant during the stages of parenting adolescents and launching children and moving on. The key principles allocated to those stages are increasing flexibility of family boundaries towards the adolescents and accepting many exits from and entries into the family during the launching phase. Special emphasis is given to the need of the parents to reconstruct their roles during the transformation process that is required during parenting adolescents. Parents of adolescents have to establish flexible different boundaries, a process which is challenging in view of the lack of built-in rituals to assist them (Quinn, Newfield, & Protinsky, 1985). Findings presents strong support for the hypothesis that adolescents whose social environment responds to their changing needs are more likely to experience positive outcomes (Eccles et al., 1993; Eccles, Lord, & Roeser, 1996).

2.2. The life course perspective (Macmillan & Copher, 2005)

The theory basis is the theme which claims that human development involves the order and timing of social roles over one's life course. The theory consists of three major concepts: roles, role configurations, and pathways. Each concept by comparison to the traditional usage of roles, introduces an innovative dimension of time dynamics. The concept of roles relates to the temporal social expectations a person has, in given social positions concerning his own conduct or the conduct of others. Role configuration refers to age specific array of multiple social roles, which assigns separate meaning to each role, for instance a working parent. The concept of trajectories relates to the temporal continued existence of roles which occurs during an extended period of time and refers to the participation in social institutions throughout parenthood or marriage. The life course perspective delineates multiple social roles in certain contexts based on the recognition of the meaning assigned to each role is depended upon the presence of other roles (Macmillan & Eliason, 2003b).

Cohler and Altergott (1995) define parenthood as an ongoing developmental task. Task continuing throughout the parent's life. The life course theory is especially applicable to parenthood phase which occurs during midlife, since time plays a major factor in this longest period in parents' life. The parents who face quite a few challenges put by their adolescents and later by their young adults, have to adapt their roles accordingly.

2.3. Parental self-efficacy

The concept of parental self-efficacy is rooted in the general theory of self-efficacy that was originally developed by Bandura (1989). Self-efficacy refers to an individual's evaluation of his/her ability to successfully accomplish a desired task in a given situation (Bandura & Schunk, 1981). Self-efficacy has been found to be significant in performing or acquiring multiple human behaviours. When a person enters parenthood, he adapts a new role identity. As parenthood continues, parent's role identities become cardinal to their core identity and self-concept (Emery, 1994). According to Bandura (1989) people who perceive themselves as being efficacious have confidence in their ability to accomplish a given task. Similarly to the parent's belief in his own self-efficacy, he has the perception of his ability to fulfil the role and confidence in accomplishing the parental roles. Self-efficacy is the idea in which a person who has power and feels competent in his role as a parent. Midlife parenthood and self-efficacy are related in the sense that parenting adolescents or young adults can alter a person's perception and confidence in his present role identity. Midlife parenting can lead to an inadequate feeling of power and control as a parent. Therefore, the previous role identity may be damaged. The perception of self-efficacy is important for midlife parents due to the effect that it has on the effort they need to put into work on establishing. Among other things, appropriate boundaries and an overall positive co-parental relationship. This process might be further hindered by a parent's perception of his inability to perform the task.

2.4. Ryff's model of well-being

The subjective evaluation of life is what defines a person's well-being (Shmotkin, 2005). Many distinct aspects are included in this broad concept both positive and negative (Kunzmann, Little, & Smith, 2000).

Ryff's (1989) comprehensive multidimensional model of well-being includes both overall negative and positive aspects of the psychological functioning. The model presents six distinct components of positive psychological functioning: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth (Ryff, 1989).

Ryff's measure of psychological well-being has been relevant in studying the accumulation of experiences over time, such as midlife evaluations of grown children and of self (Ryff et al., 1994). Ryff (2014) suggested that since well-being adjusts through life and includes numerous psychological factors, a developmental perspective should be applied in order to study it. Consequently, Ryff's Scales of Psychological Well-being seem to be particularly appropriate for the assessment of midlife well-being. Since in this life phase, Eudaimonia is the most noticeable while the midlife parents have to face the challenges of adulthood and changing family life cycle (Trainin, 2015).

2.5. Solution focused brief therapy

Solution focused brief therapy (SFBT) is an evidence based, future oriented, goal directed and joint approach to therapy. It was initially developed by De Shazer et al. (2007) in the early 1980s. The approach was developed inductively rather than deductively and as such is more a pragmatic approach rather than a theoretical one (Lipchik et al., 2012). SFBT has continued to flourish for both its usefulness and brevity and is currently one of the world's leading schools of psychotherapy. SFBT has been applied to varied

contemporary problems and clinical populations. The therapy's principles are now being applied to areas outside psychotherapy, including intervention in social services agencies (Pichot & Dolan, 2003).

SFBT has been applied to family problems since its inception, due to the fact that many of its initial clients were families. It did not deductively flow from theory, instead De Shazer et al. (2007) viewed hundreds of hours of clinical sessions, while paying particular attention to what was working well during a session and replicating it. What that emerged was an inductively based pragmatic approach to counselling (Lipchik et al., 2012). A brand-new way of viewing therapy process, from problem focused view to solution focused view emerged (Trepper, 2012). De Shazer et al. (2007) and Trepper (2012) describe the philosophical background of SFBT which reflect the following hallmarks: Intervention is irrelevant or should be irrelevant if the client perceives that he has found a way to solve his problem. The two main aims of the therapist are to detect former successful problem-solving behaviours, and then to encourage them to do more of that. The therapist encourages the family to let go of former behaviours which didn't provide the desired results and change their attitude. SFBT is a minimalist approach to therapy. The belief is that even minor changes, may lead to substantial structural changes. The path to finding solutions does not require continued scrutiny on the problem itself. For this reason, SFBT addresses almost exclusively the present and future. The belief is that there are always exceptions to the family's problematic way of functioning which can be applied. Also, that the person is in charge for his own future and can take responsibility to change it.

3. Research Method

Based on the literature, this research fills a gap by shedding light on midlife parenthood. The research takes a step forward by concentrating on midlife parenting from the point of view of the parents themselves via their perceptions on three factors: self-efficacy, parental well-being and parental role. The factors are examined via a mixed method approach. The collection of the data and its analysis will be based on both quantitative and qualitative strategies of research. Each method of data collection contributes to the other method and thus serve to promote the whole research. The mixture of research methods enables significant point of encounter between the deductive reasoning raised by the quantitative research and the inductive reasoning raised by the qualitative research, enabling a wide two-sided perspective of the theory and data from the field (Coolican, 2017; Creswell, 2014).

The design will be appropriate for the purpose of a thorough examination of brief therapeutic intervention. Examination on well-being of midlife parents in the context of their parenthood and with relation to their perceptions of parental role and their existing level of self-efficacy.

3.1. Quantitative research method

The study advances the research of the parental experience during midlife by examining the parents' perception of their parental role, parental well-being and parental self-efficacy. In addition, the study is among the few exploring the relationships between those major variables. The variables in this study will be examined by administering questionnaire for each variable respectively. The present study aims to examine the self-perception of the parental role; therefore, it will adopt the self-perception of the parental role scale (SPPR) introduced by MacPhee, Benson, and Bullock (1986). The study adapts Bandura's

perception of self-efficacy. Therefore, self-efficacy will be measured using the general self-efficacy (GSE) scale, introduced by Jerusalem and Schwarzer (1995). The present study adopts Ryff's (1989) model of well-being. Consequently, the concept will be measured using the psychological well-being (PWB) introduced by Ryff (1989).

3.2. Qualitative research method

The study aims to understand one's subjective meaning based on the phenomenological approach. The researcher's goal is to reach as close as possible to the participant's world, as perceived and experienced by the participants themselves (Shkedi, 2005). The qualitative interview has been chosen in order to investigate the subjective perceptions of midlife parents, regarding their parental role and their sense of self-efficacy involved in their experience of parenthood. In order to perform the interview the author will use an in-depth semi-structured guide. Data collected will enable us to perform content analysis based on the themes and categories that will arise from the data. The variables that are related to parents' perception of their role as midlife parents will be identified.

4. Conclusion

The family life cycle dynamics presents unavoidable changes. Midlife parents have to face multiple and oftentimes contradicting challenges. Those personal and familial challenges, during a prolonged period of parenthood may contradict one another. Families goes through developmental changes. Any developmental stage in the life of the family entails additional roles or abandonment of roles (Galinsky, 1981). Stress may reach peak point during transition between the stages. Hence, the symptoms are most likely to occur when there is interference in the evolving family life cycle (Carter & McGoldrick, 1989). The therapist main responsibility is to assist the family members to reconstruct their roles so that they can develop onwards. Nowadays, more than ever midlife parenthood becomes a common occurrence and midlife parents need assistance. Family therapists have encountered a frequent reason for seeking therapy, difficulties in family's adjustment to life cycle transitions (Anderson, 1988). This phenomenon proposes a fertile ground for continuous research either on the parental or therapeutically levels. Thus, this study aims not only to advance the research on the midlife's parents' perceptions, but also to suggest an appropriate therapy. The further understanding of midlife parenthood will allow us to offer focused brief family therapy intervention adapted to this growing population. Therapy which can either be applied independently or included in a prolonged psychological intervention. Further understanding of this population will assist us to develop other programs for those midlife parents worldwide.

Acknowledgments

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