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A FAMILY DEVELOPMENTAL FRAMEWORK

Challenges and Resilience Across the Life Cycle

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This chapter presents an overview of a family developmental framework, with attention to the growing diversity and complexity of family systems over a lengthening life course. A family resilience framework is described, extending family stress theory to understand and facilitate core processes for positive adaptation with highly stressful life challenges. Issues that commonly arise in various family life-cycle phases and transitions are briefly considered.

The Changing Landscape of Family Life

Our understanding of family development and our clinical approaches to strengthen families must be attuned to our times and social contexts. Over recent decades, families and the world around them have been undergoing tumultuous changes and new challenges. A reshaping of contemporary life now encompasses multiple, evolving family cultures and structures. Demographic trends reveal increasingly diverse and complex patterns in family life and a more ambiguous and fluid set of categories traditionally used to define the family (Cherlin, 2010; Walsh, 2012c), including:

- varied family forms and households
- varied gender roles, identity, and relationships
- growing cultural diversity and socioeconomic disparities
- varied and expanded family life course.

Although most data reported here are based on research in the United States, these patterns are increasingly widespread, especially in developed and rapidly changing societies worldwide.

The Varying and Expanded Family Life Course

The family life course is becoming ever more lengthened and varied. The average age of first marriage in the United States has risen to over 28 for men and 26 for women (US Census Bureau, 2010). Childbearing is also increasingly delayed, especially for women with advanced education and careers. Two or three committed long-term couple relationships,

along with periods of cohabitation and single living, have become increasingly common (Cherlin, 2010). With greater longevity, four- and five-generation families add both opportunity and complexity in balancing members' needs and family resources (Bengtson, 2001).

Three decades of research have provided clear evidence that families and their children can thrive in a variety of kinship arrangements: in stable single-parent, bi-nuclear, and stepfamilies; in kinship care; and with gay as well as straight parents (Cherlin, 2010; Green, 2012). Yet, over time, adults and their children are increasingly likely to transition in and out of varied households and kinship arrangements, adding complexity to all relationships. Because multi-stress environmental conditions and repeated instability heighten risks for maladaptation and child problems, many families need to overcome socioeconomic barriers, buffer disruptive transitions, and weave together supportive kin networks for resilience in their life passage (Walsh, 2016).

A Family Developmental Perspective

The Family as a System Moving Through Time

Families comprise a complex web of kinship ties within and across households and generations. Family systems encompass the entire multigenerational network, and may be defined by blood, legal, and/or historical ties; formal and informal kinship bonds; residential patterns; and future commitments.

A family developmental systems perspective considers the functioning of the family in terms of basic transactional processes in and between human systems, dependent on an interaction of biopsychosocial variables (Bertalanffy, 1968). As recent epigenetic and socioneurobiology studies confirm (D'Onofrio & Lahey, 2010; Feder, Nestler, & Charney, 2009; Spotts, 2012), individual predispositions may be enhanced or countered by interpersonal and sociocultural influences. Family processes support the integration and maintenance of the family unit and its ability to carry out essential tasks for the growth and well-being of its members, especially the nurturance, guidance, and protection of children,

elders, and other vulnerable members. Individual and family development co-evolve over the life course and across the generations. Relationships with parents, siblings, spouses, children, and other family members grow and change, boundaries shift, roles are redefined, and new members and losses require adaptation.

Thus, this approach views family functioning in relation to the needs of members and in sociocultural and temporal contexts. Through multilevel dynamic processes over time, families forge varied coping styles and adaptational pathways, fitting individual and family values, priorities, challenges, and resources.

Views of Normality: Chronological Time, Social Time, and Historical Time

Our notions of normality—both typical and optimal—are socially constructed, influenced by subjective worldviews and by the larger culture and historical times (Walsh, 2012c). Family and social time clocks are influential in setting expectations and goals in life and contribute to feeling successful and in sync with age peers.

Chronological ages tend to be associated with normative milestones, such as reaching maturity, marrying, having children, and retirement. Transitions to the next decade in life—turning 30, 40, or 60—can hold heavy meaning. Yet, with medical advances and biological and social changes, traditional mileposts have been shifting and age-appropriate norms blurred. A variety of reproductive strategies now assist older adults in having children. Most adults aged 65–75 are healthy and productive, do not consider themselves “elderly,” and are expanding later life possibilities.

Varying cultural norms influence family life-cycle patterns, intertwined with socioeconomic factors that impact career and marital options, family stability, and life expectancy. Gender, class, ethnicity, race, and religion structure our developing relationships and our role expectations

for marriage and family life. Multigenerational family legacies also influence family members' worldviews, including their expectations about life passage and their hopes and dreams.

Normative (typical, expectable) passage over the life course is also profoundly influenced by the historical era in which individuals grow up, come of age, and grow old. Each generational cohort is distinct as it evolves through time, influenced by the social, economic, and political tides of its era (Elder & Shanahan, 2006). Major societal and global events, such as war or famine, impact various age cohorts differently, shaping their identity and life aspirations. The recent economic downturn and job market transformations severely impact young adults in establishing successful adult careers, marriage prospects, and childrearing plans, with forecasts of a lower standard of living than that of their parents. For older adults, it threatens jobs and financial security for their later years.

Beyond Normative Models of Human Development: A Social Constructionist Lens

In the mid-20th century, influential models of human development and the family life cycle were developed from a Euro-American perspective, reflecting cultural ideals and typical patterns in their times (Walsh, 2012c). Normative studies were standardized on white, middle-class intact families, headed by a heterosexual married couple with traditional gendered breadwinner/homemaker roles. That model of family life became reified as a universal standard, essential for healthy development. Yet today, it is only a small band on a wide spectrum of family structures.

Likewise, those formulations sanctioned and privileged a standard sequential progression of stages in individual, marital, and family development over the life course. Those who followed other pathways tended to be stigmatized and pathologized, with their lives regarded as deviant, deficient, incomplete, harmful, or even sinful. Pejorative labels, such as "working mothers" or "fatherless family" have persisted. Single women and those without children have been viewed as having incomplete lives; "childless"

couples considered selfish; stepparents regarded as not "real" or "natural" parents; and gay parenting assumed to harm children.

Individual models of healthy lifespan development were based on male standards, and generalized from small studies of more affluent, educated men. Separation, autonomy, and career success—values associated with masculinity—were primary markers of positive development and adult maturity. The prioritizing of relationships and the care and nurturing of others were viewed as the primary attributes in female development. Yet, Vaillant's (2002) longitudinal studies of male Harvard graduates throughout adulthood concluded that strong relationships were the overriding key to men's positive development and life satisfaction. Feminist scholarship heightened recognition of the value of relational connectedness and interdependency in human development, eschewing the stereotyping of attributes as feminine or masculine to expand the full potential for men and women.

A social constructionist lens is imperative to appreciate the multiplicity of contemporary family forms and the intersection of cultural influences, life options, and timing of nodal events that make each individual and family developmental pathway unique. Above all, no single model or life trajectory should be deemed ideal or essential for positive development (Walsh, 2012c).

Family Challenges and Resilience

Over recent decades, efforts to understand risk and resilience in human adaptation have come to the fore in the fields of mental health and developmental psychology. *Resilience*—the ability to withstand and rebound from crisis and prolonged adversity—involves dynamic processes fostering positive adaptation within the context of significant risk and stressful conditions (Masten, 2013). Beyond coping and recovery, these strengths and resources in dealing with serious life challenges can yield positive growth.

The preponderance of resilience theory, research, and practice has been individually focused (Luthar, 2006). Early studies in child development described character traits that enabled some individuals to overcome childhood

trauma or maltreatment to lead loving and productive lives. Developmental models also tended to focus predominantly on the influence of the mother–infant dyadic bond and early childhood factors with insufficient attention to the broader family network, the larger environmental context, and significant experiences over the life course.

As studies of risk and resilience expanded to a wide range of adverse conditions and social contexts—impoverished circumstances, chronic illness, traumatic life events, war and combat zones, and natural disasters—it became clear that individual vulnerability and resilience involve the dynamic interplay of multiple influences and multilevel risk and protective processes—individual, interpersonal, socioeconomic and cultural influences—over time (e.g., Luthar & Brown, 2007; Masten, 2013; Rutter, 1987). Longitudinal studies found that even among high-risk youth who did poorly in adolescence, many were able to turn their lives around in young adulthood or later in midlife, revealing the potential to gain resilience throughout the life course (Werner & Smith, 2001).

Current developmental approaches to individual resilience attend broadly to dynamic, multi-level, and process-oriented variables over time, reflecting a theoretical shift toward a *relational developmental systems* framework in life course human developmental science (Masten, 2013; Walsh, 2011). Advanced computer programs for data analysis address these complex mutual interactions along developmental pathways. This systems orientation has many parallels with a family resilience framework, suggesting the potential for integration of individual and family level approaches (Masten & Monn, 2015).

Relational Resources for Individual Resilience

Notably, the crucial influence of significant relationships have stood out across studies of individual resilience (Walsh, 2003). Those who overcame adversity typically reported that their resilience was nurtured by strong bonds and mentoring by adults, such as coaches and teachers, who were invested in their positive development. Troubled

youth who turned their lives around in adulthood credited a strong bond with a life partner or involvement in a faith community (Werner & Smith, 2001). Family functioning, particularly in caregiving quality, was identified as a crucial protective influence (Rutter, 1987). Yet most studies, narrowly focused on parenting, have not considered potential family-wide resources.

A family systems orientation has broadened attention to the entire relational network, identifying potential resources—“lifelines for resilience”—in the immediate and extended family. Individual resilience might be nurtured in bonds with siblings, parents or other caregivers, spouses, grandparents and godparents, aunts and uncles, and other informal kin (Ungar, 2004; Walsh, 2003). Even in troubled families, islands of strength can be found. Family assessment and intervention seek to identify and recruit those members who could provide a nurturing, mentoring relationship with at-risk youth: believing in their worth and potential, supporting their best efforts, and encouraging them to make the most of their lives.

The Concept of Family Resilience

Beyond the role of family members as resources for individual resilience, the concept of family resilience focuses on vulnerability, risk, and resilience in the family as a functional unit (Walsh, 2003, 2012a). Theory and research on family resilience extend family systems research and developmental theory on family stress, coping, and adaptation (Hawley & DeHaan, 1996; Patterson, 2002).

A basic premise in this systemic orientation is that highly stressful events, disruptive transitions, and persistent, multi-stress conditions impact the whole family. In turn, key family processes mediate the adaptation—or maladaptation—of all members, their relationships, and the family unit. Major stressors or a pile-up of stresses can derail the functioning of a family system, with ripple effects for all members and their relationships. The way a family deals with stress is crucial: key transactional processes for resilience enable the family system to rally in troubled times to anticipate and prepare for threats on the

horizon and to buffer disruption, reduce the risk of dysfunction, and support optimal adaptation.

Family resilience can be defined as *the ability of the family to withstand and rebound from disruptive life challenges, strengthened and more resourceful* (Walsh, 2003). More than managing stressful conditions, shouldering a burden, or surviving an ordeal, resilience involves the potential for personal and relational transformation and growth that can be forged out of adversity. By mobilizing key processes for resilience, even struggling families can emerge stronger and better able to meet future challenges. Members may develop new insights and abilities. A crisis can be a wake-up call, heightening attention to important matters. Many report that a major life challenge became an opportunity for reappraisal of their priorities, stimulating greater investment in meaningful relationships and pursuits. Their experience often sparks compassionate actions to benefit others or address harmful conditions (Lietz, 2013; Walsh, 2016).

Studies of strong families have found that relationships were deepened and enriched through weathering a crisis as a shared challenge (Walsh, 2003). Gottman's research found that successful couples approached tough times as a team; partners emphasized their "we-ness" and the strength they drew from each other. They viewed hardships as trials to be overcome together and believed that their struggles strengthened their bond as their shared efforts and pride in prevailing brought them closer (Driver, Tabares, Shapiro, & Gottman, 2012).

Multi-level Systems Dynamics in Family Risk and Resilience

From a systems orientation, family vulnerability, risk, and resilience are viewed in light of multiple, multilevel recursive influences in dealing with highly stressful experiences and social contexts. Family distress may result from unsuccessful attempts to cope with an overwhelming situation, such as a serious illness, disability, or death in the family or the wider impact of neighborhood blight or a large-scale disaster (Walsh, 2007).

Families living in poverty, largely in minority and marginalized groups, are most vulnerable to

environmental conditions that heighten risks for serious illnesses, disabilities, and caregiver strain, as well as early mortality (Conger, Conger, & Martin, 2010; Walsh, 2012b). Moreover, the wide income gap in our society has produced a "marriage gap" (Cherlin, 2010). Those with low employment and earnings prospects are more likely to have children on their own or with cohabiting partners and are less likely to marry and more likely to divorce when they do. Persistent unemployment and recurring job transitions increase risks of family conflict and violence, substance abuse, residential instability, and child problems.

The family, peer group, community resources, school or work settings, and other social systems can be seen as nested contexts for nurturing and sustaining resilience (Bronfenbrenner, 1979; Ungar, Ghazinour, & Richter, 2013). Even highly vulnerable families, struggling with financial strains or crushing hardships, most often have many strengths and supporting bonds in extended kin and social networks and involvement in faith communities (Boyd-Franklin & Karger, 2012; Orthner, Jones-Sanpei, & Williamson, 2004). The vital role of cultural and spiritual resources (McCubbin & McCubbin, 2013; Walsh, 2009c) is especially crucial for those facing racial and socioeconomic barriers or other forms of discrimination.

A family resilience perspective, similar to Falicov's (2012) multidimensional framework, considers the intersection of cultural and developmental variables, locating each family within a complex ecological niche. A holistic assessment includes the varied contexts to understand the constraints and possibilities in each family's position, identifying common elements with other families in similar situations while also considering a family's unique perspectives, aims, challenges, and resources.

Key Processes for Family Resilience

The Walsh Family Resilience Framework (2003, 2012a) was developed as a conceptual map to guide assessment, intervention, and prevention in clinical and community practice. This framework is informed by three decades of

social science and clinical research on resilience and well-functioning family systems. Nine core processes for resilience were identified and then organized within three domains of family functioning: *family belief systems*, *organizational patterns*, and *communication/problem-solving*. Key processes can be targeted to strengthen family capacities to rebound from stressful life challenges (Walsh, 2016). Interventions aim to build family strengths as immediate problems are addressed, thereby reducing risk and vulnerability. As the family becomes more resourceful, the relational unit and its members gain ability to meet future challenges.

Family Belief Systems

Family resilience is fostered by shared beliefs: that facilitate members' abilities (1) to *make meaning* of their stressful situation and options; (2) to (re)gain a *positive, hopeful outlook*, and (3) for *transcendence*, through larger values, spiritual beliefs and practices, and sense of purpose. Families can be helped to gain a sense of coherence (Antonovsky & Sourani, 1988), recasting a crisis or hardship as a shared challenge that is comprehensible, manageable, and meaningful to tackle. Normalizing and contextualizing members' distress as common or understandable in their situation can depathologize their reactions and reduce blame, shame, and guilt. Affirming family strengths in the midst of difficulties counters a sense of helplessness, failure, and despair as it reinforces shared pride, confidence, and a "can do" spirit. Family members' mutual encouragement bolsters efforts to take initiative and to persevere in attempts to overcome barriers. Energies are focused on mastering the possible, accepting that which is beyond their control, and tolerating uncertainties. Shared spiritual resources—such as transcendent values, deep faith, contemplative practices (e.g., prayer, meditation), congregational involvement, and connectedness with nature—strengthen resilience and family bonds (Walsh, 2009c). Many find meaning through creative arts expression or in social action to alleviate suffering or repair harmful conditions. Difficult life challenges can be transformative, yielding

valuable learning and new priorities, purpose, and positive growth.

Family Organizational Resources

A (4) *flexible family structure* (e.g., role functioning) enables adaptation to meet life challenges. In navigating disruptive changes, families need to *restabilize and reorganize*, with strong leadership to provide security, continuities, and dependability for children and other vulnerable family members. (5) *Connectedness* (cohesion) builds mutual support, commitment, trust, and teamwork. (6) *Extended kin and social networks, and community resources, and larger systems' structural supports* are critical "lifelines for resilience." It is not enough to help vulnerable families to "overcome their odds"; it is crucial to "change the odds" to enable them to thrive.

Communication Processes

Resilience in families is facilitated through (7) *clear, consistent information* about their adverse situation and options. (8) *Open emotional sharing* with empathic response strengthens bonds. *Pleasurable interactions and humor* offer respite from suffering and struggle, revitalizing energies and spirits. Through (9) *collaborative problem-solving*, families negotiate differences and take concrete steps toward achieving their aims. Families become more resourceful by learning from mistakes and shifting from a crisis-reactive mode to a *proactive stance*, anticipating and preparing to meet future challenges.

The Developmental Context of Family Resilience

The impact of adverse situations and family adaptational strategies vary over time and in relation to individual and family life-cycle passage: 1) families navigate varied pathways to meet emerging challenges over time; 2) a pile-up of multiple stressors can overwhelm family resources; 3) the impact of a crisis may vary depending on its timing in individual and family life passage; 4) a family's past experiences of

adversity and response can generate catastrophic expectations or can serve as models of resilience.

Emerging Challenges and Varied Pathways Over Time

Most major stressors are not simply a short-term single event, but involve a complex set of changing conditions with a past history and a future course (Rutter, 1987). Such is the experience of divorce, from an escalation of predivorce tensions, to separation and reorganization of households and parent-child relationships. Subsequent stressful transitions are common with relocation, remarriage, and stepfamily integration (Greene, Anderson, Forgatch, deGarmo, & Hetherington, 2012; Pasley & Garneau, 2012).

Given this complexity, no single coping response is invariably most successful; varied strategies may prove useful in meeting emerging challenges. In assessing the impact of stress events, it is important to explore how family members approached their situation: from their proactive steps to immediate response and long-term strategies. Some approaches may be functional in the short term but may rigidify and become dysfunctional over time or as conditions change. For instance, with a father's stroke, a family must mobilize resources and pull together to meet the crisis, but later they need to shift gears to adapt to chronic disability and attend to other members' needs (Rolland, 2012). Family resilience thus involves varied adaptational pathways extending over time, from a threatening event on the horizon, through disruptive transitions, and multiple shockwaves in the immediate aftermath and beyond.

Cumulative Stresses

Some families may do well with a short-term crisis but buckle under the cumulative strains of multiple, persistent challenges, as with chronic illness, unrelenting conditions of poverty, or complex, ongoing trauma in wartorn regions. Multi-stressed families, often in low-income, under-resourced, single-parent households, are especially vulnerable (Walsh, 2016). A pile-up of internal and external stressors can overwhelm

most families, heightening their risk for subsequent problems in cascade effects (Masten & Cicchetti, 2010; Patterson, 2002).

One couple's escalating conflict and the husband's heavy drinking brought them to therapy. It was essential to situate their crisis in the context of the family's barrage of strains and losses over the past two years: the husband's job loss, with the loss of family income and health benefits, and a stroke suffered by the maternal grandmother, who had been their mainstay in raising their three small children, one with developmental disabilities. The family was reeling from crisis to crisis, with mounting pressures. Resilience-oriented couple counseling helped them to contextualize their distress in light of the pile-up of stressors and losses, and facilitated their mutual support, role reorganization, and team efforts, mobilizing extended family and community resources to master ongoing challenges.

Multigenerational Family Life-Cycle Passage

A family developmental assessment of functioning and distress attends to the multigenerational family system as it moves forward over time (McGoldrick, Garcia Preto, & Carter, 2015). Relationships with parents, siblings, spouses, children, and extended family members evolve and change over the life course and across the generations. The meaning and implications of a crisis for all members and their relationships should be considered. For instance, when one couple suffered a stillbirth, the impact was devastating throughout the kinship network: all had eagerly awaited this birth of the first son to the first son in a large Greek extended family.

Life's many crises and transitions generate emotional disequilibrium and often require structural reorganization and relational realignments, particularly with the addition or loss of family members, and as subsystems are redefined and updated. Successful family functioning over the life course depends on strong relational connections and flexibility in structure, roles, and responses to new developmental priorities and challenges (Walsh, 2012b, 2016). As patterns that were functional in earlier life phases no longer

fit, new options can be explored. With the loss of functioning or death of significant family members, others are called upon to assume new roles and responsibilities. In doing so, they can develop new competencies and enhanced sense of worth.

Mild to moderate disruption is commonly experienced with normative family developmental transitions, such as the birth of the first child (Cowan & Cowan, 2012). Non-normative stressors, which are uncommon, unexpected, or untimely in chronological or social expectations tend to be much more disruptive, especially the death of a child, the premature loss of a parent, or early spousal loss (Walsh & McGoldrick, 2013; Walsh, 2015b).

Stress is intensified in transition periods from one developmental phase to another as families and their members redefine and realign their relationships. Hadley, Jacob, Milliones, Caplan, and Spitz (1974) found that symptom onset frequently occurred at times of family developmental transitions involving the addition or loss of family members

Although all normative change is to some degree stressful, with highly disruptive events or multi-stress conditions even well-functioning families can falter. Transitional crises and immediate distress are common, yet they do not produce long-term dysfunction for the majority of children and their families. How a family prepares for anticipated challenges, buffers stress and manages disruption, effectively reorganizes, and reinvests in life pursuits will influence the immediate and long-term adaptation for all members and their relationships (Walsh, 2016, 2012a).

The counterbalance of continuity and change is extremely important (Falicov, 1988). Shared rituals are valuable in facilitating disruptive transitions, such as funeral rites and memorial events that mark the death of a loved one, honor the life, and offer community support for the bereaved to carry on their lives (Imber-Black, 2012).

Well-functioning families tend to have an evolutionary sense of time and a continual process of growth, change, and losses across the life course and the generations (Beavers & Hampson, 2003). This perspective helps members to see disruptive events and transitions also as milestones

on their shared life passage. Families may lose time perspective when they are having problems. Some become stuck in the past or cut off from it; others magnify the present moment, overwhelmed and immobilized by their immediate situation; others, with catastrophic fears, become fixed on a dreaded future.

Legacies from the Past

Distress is heightened when current stressors reactivate painful memories and emotions from past experiences. Family members may lose perspective, conflating immediate situations with past events, and become overwhelmed or cut off from painful feelings and connections. Past adversity, such as relational abuse or war-related and refugee trauma, influence future expectations: catastrophic fears heighten risk of complications whereas stories of resilience can inspire positive adaptation. Reaching the age that a parent died can be fraught with anxiety, leading some to expect the worst while others start new health regimens, thereby gaining resilience. (Walsh & McGoldrick, 2004, 2013). The convergence of developmental and transgenerational events should be explored (McGoldrick et al., 2015).

One couple sought therapy because of intense fighting over the husband's vehement opposition to the wife's wishes for a second child. Genogram construction revealed that the husband's mother had died in childbirth with his younger sibling, a devastating loss he had suppressed and shared with no one. In exploring that experience, with his wife's empathic understanding, he realized his catastrophic fear of losing *her* and their bond deepened as they charted their future course.

Research Considerations and Practice Applications

Systems-oriented family process research over recent decades has provided some empirical grounding for assessment of effective couple and family functioning (Lebow & Stroud, 2012). However, family models and typologies tend to be static and acontextual, offering a snapshot of interaction patterns within families at one point

in time. It is essential to understand family functioning in social and temporal contexts.

A family resilience framework offers several advantages. First, by definition, it focuses on strengths under stress, in response to crisis, or in prolonged adversity. Second, it is assumed that no single model of healthy functioning fits all families or their situations. Functioning is assessed in context: relative to each family's values, structural and relational resources, social contexts, and life challenges. Third, processes for optimal functioning and the well-being of members may vary over time as challenges emerge or recede and families evolve over their life course. Although most families do not measure up to ideals, a family resilience perspective is grounded in a deep conviction in the potential of all families to gain resilience out of adversity.

The flexibility of the concept of resilience, the complexity of multilevel systemic assessment over time, and the varied practice applications and formats, pose daunting challenges for family assessment and intervention research. Given cultural and family diversity, and the probability that some processes may be more useful than others in dealing with varied challenges, intervention approaches and findings from a particular study focus or context may not be generalizable to other populations and life challenges. Despite these constraints, a family resilience framework is finding broad application in community-based interventions (e.g., Landau, 2007; Saltzman et al., 2011; Saul, 2014; Walsh, 2013). Numerous studies are increasing our understanding of core processes in family resilience in a wide range of high-risk conditions. Assessment tools and practice formats need to be adapted to fit varied situations.

Family Life Phases: Challenges and Resilience

The impact of a crisis in the family will likely vary for members and for the family unit depending on their concurrent life phase-related priorities and concerns. In every family, parental life challenges intersect with their children's developmental needs and concerns at their life phase. For instance, the death of a grandparent near

the birth of a child poses incompatible demands for bereaved parents to attend both to grieving and to forming attachments with their newborn (Walsh & McGoldrick, 2004). A parent's serious illness, disability, and caregiving needs can derail educational or career plans of a young adult child (Rolland, 2012). For siblings at different developmental phases, differing concerns may be salient at the time of a family crisis. Over time, as children mature, new concerns may arise. A mother's diagnosis of breast cancer aroused intense loss issues for an 8-year-old daughter; as she later approached puberty, anxiety surfaced over her own future risk of breast cancer. Families need to be sensitive to such developmental issues and the need for open, ongoing, age-appropriate communication over time.

Without prescribing a normative model of progressive life cycle stages, it is nonetheless helpful to understand salient challenges that commonly emerge for couples and families at various life phases and transitions.

Couples Over the Life Course

The transition to marriage or commitment to a life partner is more varied today, with cohabitation increasingly common before or in lieu of marriage. More couples are opting not to raise children, defining their relationship as family. Many adopt a pet instead of, or in preparation for, childrearing (Walsh, 2009b). An emerging trend is "living apart together": couples in stable relationships who maintain separate residences (Cherlin, 2010), some by preference and others by necessity, such as partners living at a distance for jobs.

Couples today, less bound by family traditions, are freer to develop a wide variety of intimate committed relationships and gender arrangements (Sassler, 2010). They increasingly marry across race, cultural background, and religious orientation. Yet, negotiating family of origin relationships can be painfully challenging when parents disapprove of a bond, as for gay, lesbian, or transgender couples from more conservative families and faiths (LaSala, 2007).

Traditional marriage vows "till death do us part" are harder to keep over a lengthening life

course (Walsh, 2012c). Couples who raise children can anticipate another twenty to forty years together after their launching from home. While divorce rates are high—now stabilized at around 45% of marriages—perhaps it is more remarkable that over half of first marriages do last a lifetime. Couples increasingly celebrate sixty and even seventy years together. Relational resilience is required to weather the storms of life and to meet changing priorities. In youth, romance and passion tend to stand out in choosing a partner. For those raising children, relationship satisfaction is linked more to sharing family joys and responsibilities. In later life, needs for companionship and caregiving come to the fore.

For couples, the launching of young adult children involves a reappraisal and restructuring of their relationship and household as they take stock and look ahead. Some who have stayed in unhappy marriages while raising children decide to leave. Most divorces in mid-life are now initiated by women, with more financial independence than wives in past eras. Yet numerous studies have found that marital satisfaction—which tends to be lowest for those with children in adolescence—rebounds for most to high levels after their launching. Adjustments with retirement require reorientation of life priorities and renegotiation of household responsibilities for couples. Most find greater relationship satisfaction in their later years, with more time for individual and shared leisure and pursuits, a sense of shared history, and bonds with grandchildren.

With these developments over time, resilient couples approach marriage less as an institution and more as a dynamic partnership over the life course (Walsh, 2016). Successful relationships require periodic renegotiation of roles, mutual expectations, and priorities, as couples actively shape and reshape their bonds to fit changing needs and preferences

Families and Early Childhood

Adults move up a generation when they become parents to their children. This transition to parenthood is commonly accompanied by declining marital satisfaction and a reversion to more traditional gender roles by dual-career couples

(Cowan & Cowan, 2012). New attachment and attention to the newborn take priority, reducing time and energy for personal needs or couple intimacy. Common strains involve conflict over different parenting styles and role expectations, which are often influenced by family of origin, cultural, or social class norms. With the vast majority of two-parent households headed by dual-earner couples, family resilience requires flexibility, collaboration, and good communication in navigating the ongoing demands of childcare, household maintenance, and jobs. Most fathers today are more involved in childrearing than were their own fathers, yet mothers continue to carry a disproportionate share of household maintenance, coordination, childcare, and eldercare. Most couples' values of gender equality are still, in practice, a work in progress.

Single-parent families, headed by an unmarried or divorced parent, now account for over 25% of all households in the United States. Nearly half of all children—and over 60% of ethnic minority children in poverty—are expected to live for at least part of their childhood in one-parent households, predominantly headed by mothers (Cherlin, 2010). There has been a decline in unwed teen pregnancy, while increasingly, young adult and older single women have been deciding to parent on their own when lacking suitable partners for childrearing. Inconsistent financial support and children's sense of abandonment by non-residential fathers have been major factors in child maladjustment. Children generally fare well in financially secure single-parent homes where there is strong parental functioning and support by extended kin networks (Anderson, 2012).

Grandmothers commonly provide essential childcare for working parents and those unable to do so, due to mental illness, substance abuse, or incarceration. For those who assume guardianship in kinship care (Engstrom, 2012), multi-stress demands take a toll on their own health, especially for those already burdened and on a limited income.

Families With Adolescents

With adolescence, family and parenting roles and relationships must shift to respond to a teenager's

changing cognitive, emotional, physical, and social needs. As youth strive for more autonomy and prefer time with peers, parents need to establish qualitatively different rules and boundaries than those with younger children. Dispelling outdated views of adolescence as a period of storm and turmoil, most teenagers experience little conflict or rebellion.

Yet close adolescent–parent relationships, guidance, and monitoring remain crucial to positive development, especially for those in high-risk communities (Gorman-Smith, Tolman, Henry, & Florshim, 2000; Steinberg, 2001). Those who lack supportive family bonds are at greater risk for developing problems of substance abuse, pregnancy, school drop-out, and gang involvement (Liddle, Rowe, Diamond, Sessa, Schmidt, & Ettinger, 2000). Trusting bonds, reliable structure, and open communication enable adolescents to share their interests and concerns and to depend on support and a sense of security. Teenagers need parents and other adult family members to learn about life, to discuss their own emerging identity issues and social concerns, and to help them make informed choices regarding their education and peer relations.

Establishing strong yet permeable rules, limits, and boundaries can be challenging, especially around issues of authority, privacy, and the use of cellphones and the internet. Management of a youth's serious medical condition, such as diabetes, can be fraught with conflict over control and treatment adherence. Pernicious peer bullying or risk of sexual assault may require parental intervention. The high risk of suicide by gender nonconforming teens is significantly lower for those with family acceptance.

Families in Early Adulthood and Midlife

Family bonds and intergenerational relations for most are mutually beneficial, dynamic, and co-evolving throughout adult life (Bengston, 2001). With the launching of young adults and the structural contraction of the family unit from a two-generational household, most parents adjust well to this “empty nest” transition, welcoming increased freedom from childrearing responsibilities and reorienting attention to their own needs and priorities.

In our society, the primary developmental tasks in emerging adulthood involve establishing autonomy and forging personal life goals through education and/or initial commitments in worklife and intimate bonds. Those who have had highly conflictual or abusing families may cut off contact or flee reactively into other relationships. Yet, most are able to separate and individuate while renegotiating and realigning their relationships for close connection and interdependence as autonomous adults. However, the harsh economic climate and financial debts incurred in advanced education have brought many young persons back home to live as they figure out career options. For families that have lovingly raised children with serious developmental disabilities or mental illness, young adulthood poses daunting challenges in providing essential support while encouraging their offspring to make the most of their lives (Walsh, 2016).

Families in Later Life

Despite American society's stereotypes in ageism, focused on deterioration and decay, medical advances and neuroscience findings of neuroplasticity support the many possibilities for functioning and positive growth into later years (Cozolino, 2008; Walsh, 2012b). Most older adults today remain healthy and happy well into their seventies, enjoying greater leisure, and finding meaning and fulfillment in new pursuits and active involvement with friends and family. The subjective sense of future time shifts as they reorient priorities in consideration of time left in life (Carstensen, 2006).

The vast majority of older adults maintain close connection with their family members, even those living far apart. The importance of sibling relationships commonly increases over adulthood (Cicirelli, 1995), as do social connections. For most older adults, grandparenthood or other generative involvements offer a new lease of life (Mueller & Elder, 2003). Those without children forge a variety of significant bonds with siblings, cousins, nephews and nieces, godchildren, close friends, and social networks. Aging gay and lesbian persons meet needs for intimacy in varied ways, influenced by their past experiences,

present life circumstances, and social environment (Cohler & Galatzer-Levy, 2000). With growing societal acceptance, many are coming out openly in their later years. In our mobile world, many relationships are carried on at a distance and sustained through frequent cellphone and Internet contact. Yet, uprooting for jobs or retirement can strain direct caregiving abilities and support in times of crisis.

The family as a system, along with its elder members, confronts major adaptational challenges in later life (Walsh, 2015a). Each family's approach evolves from its earlier patterns and cultural worldview. Systemic processes over the years influence their ability to adapt to losses and flexibly meet new demands. Once functional patterns may no longer fit changing priorities and constraints. Changes with retirement, illness, death, and widowhood alter complex relationship patterns, often requiring family support, adjustment to loss, reorientation, and reorganization. Such challenges also present opportunities for relational transformation and growth.

Increasingly, older adults must continue working past retirement age for financial security. Loss of needed income and benefits threatens self-sufficiency and later-life plans. With the ethos of self-reliance and stigma of dependency in our dominant culture, most older adults are reluctant to ask for or accept financial assistance from their adult children or burden them with their needs. Issues of pride and shame keep many from even telling their children that they are financially strapped or can no longer live independently.

With advanced age, chronic illness and disability pose significant family caregiving challenges, particularly with dementias, which affect nearly half of adults over 85 (Qualls & Zarit, 2009). Especially anguishing for family members are the ambiguous losses with Alzheimer's disease, called "the long goodbye" (Boss, 1999). As the illness progresses, loved ones may not even be recognized or are confused with others, even with those long deceased.

Prolonged caregiving takes a heavy toll, primarily on women, most often designated the primary caregiver. Most are at midlife, in the workforce, and juggling child and eldercare responsibilities (Brody, 2004). Others are past

retirement, with limited resources, caring for very aged elders. As family size is decreasing worldwide, multigenerational networks become increasingly top heavy, with fewer adult children available for caregiving. A family systems approach broadens the individual caregiver model to involve family members as a *caregiving team*, each contributing according to abilities, proximity, and resources (Walsh, 2012b, 2015). The sharing of responsibilities and challenges can become an opportunity to strengthen bonds and heal old rivalries.

Intergenerational relations are often strained when elders have difficulties around declining abilities or dependency needs (e.g., refusing to give up driving when unsafe). Even when older parents are quite frail, losing mental or physical capacities, this should not be seen as an intergenerational role reversal, nor should parents be labeled as "childlike." Parents, with many decades more life experience, remain parents to their children in the generational hierarchy. The importance of dignity, respect, and involvement for elders is paramount (Walsh, 2012b).

A priority for resilience of elders and their families is to draw out sources of meaning and satisfaction and to integrate the varied experiences of a lifetime into a coherent sense of self, relational integrity, and life's worth. King and Wynne (2004) introduced the concept of *family integrity*, referring to older adults' developmental striving toward meaning, connection, and continuity within their multigenerational family system. It involves three competencies: (1) dynamic transformation of relationships over time, responsive to members' changing life cycle needs; (2) resolution or acceptance of past conflicts and losses; and (3) shared creation of meaning by passing on positive legacies across generations.

Divorce, Single-Parenting, and Remarriage

Divorce entails a complex set of changing conditions over time (Amato, 2010). Longitudinal studies have tracked family patterns associated with risk and resilience in the predivorce climate, through separation and divorce processes, subsequent reorganization, and, for most, later

stepfamily integration. Claims that divorce inevitably damages children, based on small clinical samples, have not been substantiated in large-scale, carefully controlled research (Greene et al., 2012). Although some studies have found a higher risk of problems for children in divorced families than those in intact families, fewer than one in four from divorced families shows serious or lasting difficulties. In high-conflict and abusive families, most children whose parents divorce fare better than those whose families remain intact. Moreover, economic strains and other factors heighten risks for maladjustment. Above all else, children's healthy adaptation depends on the strong functioning of their residential parent, household stability, and the quality of relationships with and between parents before and after divorce (Ahrons, 2004).

Divorce involves ambiguous loss: the couple's marriage and the family unit are dissolved, yet ex-spouses with children remain parents. Positive adaptation is facilitated by grieving what is lost (including past hopes and dreams) and dealing with hurt, anger, blame, and guilt. Family processes over time are a roller coaster with peaks of emotional tension at subsequent transition points. Parents can make a difference in the way they manage and communicate the decision to divorce and their custody, financial, and visitation arrangements, with reliable follow-through. Despite marital grievances, it is crucial for parents not to triangulate children as go-betweens, in loyalty conflicts, or in demonizing the other parent. They do best when parents cooperate, if not collaborate, across households over time, as each child celebrates milestones, such as graduation, or suffers difficulties. Continuing contact with important extended family members is encouraged.

Most divorced adults go on to remarry or repartner, a transition requiring negotiation of step-relations and realignments with families of origin (Pasley & Garneau, 2012). Challenges in stepfamily formation contribute to a 60% divorce rate in remarriage. Solidifying the new couple relationship is a priority, without vilifying the ex-spouse, which triangulates children in a loyalty conflict, commonly expressed by resisting or turning against the stepparent. Adaptation is facilitated when the biological parent assumes

the primary parenting role and the new partner take a supportive role, gradually building a trusting, caring relationship with children. Stepfamily integration typically takes several years.

Death and Loss of Loved Ones

From a family systems perspective, death and loss involve transactional process including those who die and all who survive in a shared multigenerational family life cycle, recognizing both the finality of death and the continuity of life (Walsh and McGoldrick, 2004, 2013). The death of the last member of the eldest generation is a family milestone, as those in next generation become the family elders.

Most people hope for a natural death, but medical technologies prolonging life and the dying process pose unprecedented family challenges, complicated by moral and religious issues. Agonizing end-of-life decisions can spark intense and long lasting family conflict (Rolland, 2012). Increasingly, death follows a long, progressively worsening illness and disability. It is crucial for individuals and their loved ones to address needs for dignity and control in the dying process, supported by palliative and hospice care for pain alleviation, comfort, and solace. Clinicians can help families to discuss important end-of-life concerns and make the most of precious time together (Walsh, 2016).

A death in the family involves multiple losses: the person, the meaning of each particular relationship, missing role functions (e.g., breadwinner), and special position (e.g., only child or single parent). Survivors commonly experience a hole in the fabric of their family. An untimely loss of a child, spouse, or parent shatters hopes and dreams for the future and often sparks a sense of injustice. It is hardest for elders to accept the loss—and their own survival—of children or grandchildren, reversing generational life-cycle expectations. The death of an adolescent can be agonizing for family members, most commonly occurring from risky behavior, accidents, suicide, or homicide. An untimely or traumatic loss is often accompanied by “shattered assumptions” in family members' worldviews, such as expectations of predictability, security, and trust (Walsh 2007).

Spousal bereavement is a highly stressful transition. Despite initial profound grief and challenges in daily living, most surviving spouses cope well and are quite resilient over time. Most become more competent and independent, valuing supportive bonds with family, friends, faith communities, and companion animals (Walsh, 2009a, 2012b; Walsh & McGoldrick, 2013). Men tend to have greater initial difficulty and often repartner soon after bereavement. With early spousal loss in parenting years, well-intentioned relatives may encourage precipitous replacement to provide support and a second parent for children, yet this risks attachment difficulties in the new relationships. Positive adaptation is fostered by facilitating shared grief processes and by pacing investments in new relationships and disruptive moves from homes and communities.

Family adaptation to loss involves sharing grief, gaining meaning and perspective, reorganizing family life, and reinvesting in new and renewed bonds and pursuits (Walsh & McGoldrick, 2013). Current bereavement approaches view healthy grief not as a detachment from the lost loved one, but rather a transformation from physical presence to continuing bonds in spiritual and symbolic connections, sustained by memories, stories, and deeds. With grief, there is commonly an oscillation in focus between grief processes and attention to immediate life demands (Stroube & Schut, 2010). Families may need help in respecting members' varied reactions, coping styles, and pace. Mourning processes have no orderly sequence, timetable, or final resolution. Facets of grief commonly resurface at birthdays, anniversaries, and other milestones. The multiple meanings of a death are transformed over the life cycle and integrated with other life experiences. Work with families facing loss requires appreciation of diverse cultural and spiritual beliefs and preferences.

Clinical Implications

With the growing diversity of relationships and households in society, our view of "family" must be expanded to fit the lengthened and varied life course, attuning therapeutic approaches to the challenges and preferences that make each

individual, couple, and family unique. Clinicians can help family members learn to live successfully in complex and changing relationship systems, buffer disruptive transitions, and make the best of stressful life experiences.

Families most often come for help in crisis, but they may not connect presenting problems and distress with relevant stressors. A genogram and timeline are valuable tools to visualize complex family systems and to track significant events and changes over time in order to understand and address problems in family developmental context (McGoldrick, Gerson, & Petry, 2008). Reactivation of past painful experiences at significant nodal points can be addressed. Recent or threatened crisis events, a pile-up of stressors, and changes in family or household composition should be explored to understand their implications.

One divorced custodial father sought therapy for difficulties he was having with his oppositional 11-year-old daughter (Walsh, 2016). The therapist initially focused unsuccessfully on improving his parenting skills with her. Called in as a consultant, I constructed a family genogram and timeline, which facilitated developmental exploration. After a bitter parental divorce, two years earlier, the father had cut off his daughter's contact with her mother and continued to demonize her, still furious over her past extra-marital affair. He plunged into a new intimate relationship with a woman who was now pressuring him to get married and trying to win over the daughter's affections. The meaning and impact of these relational knots needed to be untangled and dealt with for the daughter and family relations to move forward from the past and into the future.

With a family developmental perspective, clinicians show interest in each family's life journey, listening to stories of crisis or hardship with compassion for their struggles, suffering, and losses, and with affirmation of their courage, caring, and best efforts. With a resilience orientation, it is important to rebalance a problem focus to identify and enhance strengths and resources that can facilitate positive adaptation. It is crucial to identify and draw on extended kin, social, and community networks and cultural and

spiritual resources. By targeting interventions to strengthen key transactional processes for resilience, families can become more resourceful in dealing with crises, navigating disruptive transitions, weathering persistent stresses, and meeting future challenges. As clinicians, we can help families find coherence in the midst of complexity and restore continuities in the aftermath of upheaval. We can encourage their efforts for meaning, purpose, joy, and connections, with conviction in their potential to forge personal and relational growth from their life challenges.

The paradox of resilience is that the worst of times can also bring out the best in response. A crisis can yield learning, transformation, and growth in unforeseen directions. It can awaken family members to the importance of loved ones and spark them to heal grievances. Professionals can support family efforts to envision and strive toward a better future and, where hopes and dreams have been shattered, to imagine new pathways ahead, seizing opportunities for invention, transformation, and positive growth.

In families torn by past grievances, conflict, or estrangement, normative family challenges, such as parental caregiving, are often more complicated. A developmental systemic perspective and future orientation can be especially helpful in times of crisis, as in the following case:

In one family, the adult daughter sought therapy concerning her agonizing dilemma. Her father, in a medical crisis, had asked her to donate her kidney to save his life. In exploring her complicated feelings, she tearfully described her father's alcoholism that had caused his crisis, her anger at his abusive behavior when drunk, and his failure to heed their pleas to stop drinking. I suggested we convene a session with her siblings to see how they might approach this crisis as a collaborative caregiving team. She was dubious. The meeting proved difficult to schedule, as they had gone their separate ways after leaving home and were reluctant to respond to their father's plight.

When we met, I broadened the discussion focus forward with future-oriented questions, wondering if they had considered other

challenges ahead that might arise in caring for *both* aging parents or if either were widowed. They had avoided looking ahead, but coming together in this crisis opened discussion of new relational possibilities and realization of the need to collaborate over the coming years. The oldest brother then volunteered his kidney for their father, saying he was less conflicted, remembering good times with their father before his problem drinking. The others stepped up to support him and all agreed to keep in contact and to come together around their parents' future needs, forging a new solidarity.

The importance of family ties in adulthood has been neglected in research, clinical training, and practice, which emphasize early developmental phases: young couples and families raising children. At the launching of the young adults, attention follows the younger generation into their own life course and family formation, relegating the parent generation to the margins, as extended kin. Parents never cease to be parents, with lifelong concern for the well-being of their children and any grandchildren. The term "family of origin" connotes an older generation left behind, with clinical interest in past influence.

It is also crucial not to define a child or family identity by one milestone on their life passage—labels such as "child of divorce," or "broken family" can be pejorative and trapping of those moving on with their lives, overshadowing previous or future years of satisfying relational life. Our developmental lens needs to be expanded to the full life course and the interdependence of multigenerational connections that extend from the past into the future.

A facilitated family life review (Walsh, 2015, 2016) can assist families in the integration of family life phases and transitions, updating relationships and facilitating acceptance of life and loved ones. Sharing reminiscences can be a valuable experience for family members, incorporating multiple perspectives and subjective experiences of their lives over time. Recalling hopes and dreams, important milestones, and their satisfactions, pride, and regrets enlarges

the family story and fosters empathic understanding. Earlier conflicts or hurts that led to cut offs or frozen images and expectations can be reconsidered from new vantage points; misunderstandings and faulty assumptions can be clarified. As they mature, family members are often more open and honest about earlier transgressions or secrets and more readily acknowledge and regret past mistakes and hurts, opening possibilities to heal old wounds. Family photos, scrapbooks, genealogies, reunions, and pilgrimages can assist this work. Stories of family history and precious conversations can be videotaped, preserved, and transmitted to younger generations. Wisdom can be drawn from past hardships and stories of resilience can inspire the journey ahead.

We are relational beings; most lives are enriched by a variety of intimate relationships and significant kin and social bonds within and beyond households. The shared construction of identity and meaning is a lifelong process as individuals and their families organize, interpret, and connect experiences over time.

Conclusion

A family developmental framework views each family's functioning in relation to its broader sociocultural context and evolution over the multigenerational life cycle.

We must be sensitive to the culture and time in which families and their members live and the contribution of critical events and structural sources of meaning.

Crisis and challenge are inherent in the human condition. Although some families are overwhelmed by stressful life events, disruptive transitions, or persistent hardship, most emerge strengthened and more resourceful, able to love well and raise their children well. How the family deals with adversity as a functional unit is critical for all members' positive development and the future of the family. Many adaptational pathways are possible, with more resilient families using a variety of coping techniques, effective problem-solving strategies, and flexibility in dealing with internal and external stress events and conditions. Resilience does not mean bouncing back

unscathed, but struggling well, effectively working through and learning from adversity, integrating the experience into life's journey.

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