Characteristics of the Healthy Family

“Traditional” Perspectives

Child Centered- Most traditional perspectives on family are child centered. The child’s developmental stages drive the development of the family.

Structural and Functional Focus- Many tradition perspectives focus on either structural focus or functional focus only. Structural focus is the focus on marriage, blood relations, or adoptions. Functional focus is the focus on tasks performed to benefit the family or society such as child rearing, meeting affect ional needs of adults, and transmitting values of society. From these focuses the traditional view sees a healthy family as “a unity of interacting persons related by ties of marriage, birth, or adoption, whose central purpose is to create and maintain a common culture which promotes the physical, mental, emotional, and social development of each of its members.” This view later was changed to a family which:

- Shows affection between husband and wife, parents, and children
- Has personal security and acceptance of each family member
- Has satisfaction and a sense of purpose
- Has continuity of compassion and association
- Has social placement and socialization
- Has control over and a sense of what is right

This definition of a healthy family still reflects a child centered, two parent, heterosexual, white family with access to resources.

Family Life Model- This model includes three criteria: 1) a major change in family size, 2) the developmental age of the oldest child, and 3) a change in the work status of “father.” This model looks at a healthy family as one that completes the following tasks:

- Provide physical care
- Allocating resources
- Determining who does what
- Assuring members socialization
- Establishing interacting patterns
- Incorporating and releasing members
- Relating to society through its institutions
- Maintaining morale and motivation

Changes in this system over time have not changed much and still focus on the family life cycle stages of American middle-class, which I predominately white.

Step families- In the book stepfamilies are placed in the “Traditional Paradigm” section, but I believe it should instead be included in the alternative perspective section. The reason I believe that stepfamilies are in the traditional section is because the alternative would say that it is a family not a stepfamily. With that in mind, Visher and Visher stress characteristics of the healthy stepfamily which include:
• Realistic expectations
• Mourning of losses
• A strong couple relationship
• Satisfactory step relationships
• Establishing satisfying rituals
• The separate households cooperate

Alternative/Possible

In the alternative perspective no assumptions are made that all families do or should look and behave the same over time.

Integrative Approach- This says that most of us are really members of many different families. The two types of families are the Biological based family and the Relationship based family. The biological based family is much like the family the traditional paradigm mentions (Family of origin), while the relationship-based family (Family as intimate environment) can include:

• Two or more people
• Chosen to share living space
• Have close emotional ties
• Share a variety of roles and function
• Help each other meet biological, social, and psychological needs.
• They do not need to be recognized by law

Adaptive strategies- Another focus of the alternative perspective is that families need to share adaptive strategies to be healthy. An adaptive strategy is an observable social behavior that promotes survival and well-being. Some of the adaptive strategies people need to be healthy are:

• Responses to racism and oppression
• Extended family networks
• Kinship care
• Social role flexibility
• Biculturalism
• Spirituality and ancestral worldviews

Gender Model- This is an approach used to understand the interrelatedness of women and family. This model looks at the family structure and assumption of roles and how a family can be healthier. Ferree describes how this approach can help families become healthier through change in the roles that do not effectively distribute power and chores. Studies have shown the relation between inequality and abuse. If women can gain equality in the family, power will be equal, and there will be reduced rates of abuse. This makes equality very important within a healthy family. While sex roles assume structure, behavior and attitudes the gender model analyzes these things. The model also shows the importance for families to be interconnected. It also calls for healthy families to have equality in the division of labor.
**Family Centered Approach** - is another alternative approach. In this approach a healthy family has characteristics like:

- Relying on the family as an important resource for change
- The sharing of ethnic, cultural, religious background, values, and/or community ties
- Each family is a unique system
- Policy at all levels help to strengthen the family
- Family members are crucial in the helping process
- Respect for family members
- Families have potential to change

The alternative view on healthy families leaves room for homosexual people to be a family along with friends, distant relatives, and people whom you share a special bond with. Beyond the family structure the alternative view also gives attention to their characteristics. These characteristics seem to show that a healthy family cares about both the whole family and each individual.  

Brad Hall

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¹ Note: These concepts are based on sources from Schriver (2001)