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Weaknesses in the Resources of the Family Environment and Developmental Disorders and Adaptation Problems in Children

Abstract: The article presents the relationship between the condition of the family and developmental disabilities and adaptation problems of children raised in it. Finally, it presents the character styles determined by the resources of the family (personality traits, attitudes and parental competences), which can be useful not only in psycho-educational treatment of developmental disorders and in the diagnosis and understanding of the etiology of risky behavior of children and adolescents, but also in designing social rehabilitation interactions. Based on them, one can in fact undertake holistic socializing actions – consistent and adequate to the needs of children, parents and other family members.

Key words: family resources, adaptation problems, developmental disorders.

Introduction

The family is of interest to many researchers from various fields of science, and therefore it is defined in various ways. Lawyers recognize a family in legal and formal terms, psychologists, but also sociologists, accentuate its systemic nature, a system of emotional ties and the importance of roles and positions (Plopa 2007; de Barbaro 2003; Tyszka 2000, 2001), while teachers see it as the basic environment of life and analyze in the perspective of assumed and performed functions (de Tchorzewski 2005; Kawula 2004; Winiarski 2001). All concepts of family, however, are linked by a common theme expressing the belief of its huge

existential value for every human being. It is in fact the most intimate, personal, exceptional and unique living environment. This is evidenced by the unique interactions, specific social climate and manner in which the basic functions are performed, which are individual for each family.

The family as the natural and basic living environment of the child, has a major impact on the formation of its personality, character and identity. Living in stable socio-economic and environmental conditions, families go through their life cycle overcoming developmental crises and solving current problems, and their youngest generations grow up in a friendly environment, developing harmoniously and comprehensively. Modern human functioning, however, is difficult and complex, as it takes place in times of rapid economic, social and cultural transformation, in fact, during permanent threat and a dizzying pace of life. Hence, many families today are affected by crises of multiple problems of various etiologies, disturbing their proper, safe and prosperous existence. One of the major implications of this situation is the presence of various developmental disorders in children. Therefore, from the viewpoint of pedagogy and especially social rehabilitation, it seems reasonable to search for answers to the questions: what is the growth of a child in an environment of deep dysfunction and/or family pathology and what types of personality and character constellations are formed in such conditions? Such knowledge is still developing and is determined mainly by cultural perceptions. In this article I would like to draw attention to two theories: characterological and developmental, as well as the conservation of resources, integrating the effects of the initial development of human potential with the influence of cultural and environmental conditions.

In further consideration, the family (considered as a system and embedded in the cultural context) will be looked at in the light of the Conservation of Resources Theory by Stevan E. Hobfoll (2006) and Stephan M. Johnson's theory of shaping of character (2012). Finally, the character styles determined by family resources will be presented, and more precisely personality traits, attitudes and parental competences.

Resources and culture

Taking the above into account, we should begin analysis with ascertainment that in Confucian cultures, such as Chinese or Korean, family and social harmony is the *sine qua non* of human welfare. In Western culture, however, the role of "I" is much more emphasized, but here it is also seen in the perspective of social comparisons, roles and standards.

Western culture of independence is based on the rule of rational self-interest. Hence, in order to achieve individual goals, a person is forced to take into account both the social roles performed by himself and others, as well as the values on which social bonds are formed. Therefore, community actions are taken which aim also to realize the objectives (interests) of one's own family. This collectivist nature of coping in life and purposeful human activity embedded in the family, the group and the larger community is emphasized by Hobfoll in the Conservation of Resources Theory (2006). The author is of the opinion that the family cannot exist without individuals, which in turn need social bonds, because their well-being, self-esteem and survival depend on them. Hobfoll's approach is strengthened by the research of James C. Coyne and David A.F. Smith (1991), which showed that proximal and distal human social environment has a significant impact on the way a person deals with and accepts specific coping strategies. On the basis of own biological predispositions developed in the learning and modeling process, a person acquires the skills to negotiate with the environment and in the course of social interaction he learns to acquire and protect the things that are valuable to him. He does so by using a variety of tactics and ways to meet his own needs and the needs of family members and the family as a whole.

Hobfoll (2006) defines the resources as things valued by people, but he examines them from the perspective of the individual. He sees them as objects, conditions, personality traits, and energy reserves that are helpful to a person in the struggle for survival or useful to achieve the resources needed for survival. When classifying resources Hobfoll distinguished external resources, to which he included material resources and condition (e.g. health, employment, seniority, marriage), and internal resources - energy resources (e.g. money, knowledge, creditworthiness), as well as personal resources (skills: professional competences, social skills, leadership abilities and personality traits: e.g. self-esteem, optimism, effectiveness). In the Conservation of Resources Theory, a strong differentiation in the values of individual resources is emphasized. Hobfoll argues that some material resources are valuable to a person as they help him survive, while others are valuable, because they are associated with status or self-esteem. What's more, he argues that condition resources are also important due to the fact that they allow access to other resources - in the process of sharing resources belonging to the other three categories, according to him, the most useful are energy resources. Striving to gain and maintain any resources or their loss is associated almost always with the activation, experiencing and deepening of stress and its consequences.

Resources play a crucial role in these spheres of life, which by nature are social and require cooperation (family is one of them). Regardless of the culture and location on the continuum of individualism-collectivism, people are mutually dependent (Etizioni 1997). Typical of all families (regardless of the cultural context) are also basic processes associated with the formation of the community and fulfilling the role of a parent. However, one should take into account the fact that there is a link between certain cultures and styles of parenting/attitudes, as indicated by the research results (Garcia Coll, Meyer, Brillon, source: Garcia Coll, Pachter 2002). This relates to cultural transmission – passing on a hierarchy of

values, traditions, models of interactions, references to social roles and social status from generation to generation.

Family resources

In relation to the family, the concept of "family resources" functions in literature, which is often understood as family resilience or empowerment (Fredrickson 2001; Oleś 2000). Mostly, however, family resources are defined as the set of all available and owned by the family elements that are conducive to its development (internal, personal and systemic and external - environmental). The resources of the family include both those that are recognized and used by the family (capital resources), as well as those that they are not yet fully conscious of and have not been activated (participation resources).

In a properly functioning family the flow of resources between family members, their exchange, and accumulation of individual resources and transfer of them to the pool of the family's capital offers a real opportunity to raise much greater resources. The families of functional resources are distributed in a constructive way, allowing personal development to all members, which greatly contributes to the development of the whole family system and to expanding its welfare. But what happens in this respect in dysfunctional families - with many problems, often marked by the stigma of social pathology?

The results of research on families in crisis (Nowak 2011) clearly indicate a shortage in them of all kinds of resources identified by Hobfoll. This is due to huge deficits taking place in material resources (these are usually families with low economic status, living in social housing or functioning with families of origin) and energy resources - in this case we are dealing with a low level of education of spouses/partners, poverty and lack of participation of family members in social and cultural life. These families also have large deficiencies in resources of condition - in most cases, they are plagued by long-term unemployment, chronic diseases, addictions, crime and social maladjustment.

In deeply dysfunctional families, spouses/partners or persons of strategic importance for the functioning of the family, have significant shortcomings of personal resources: social competences, personality traits, skills in expressing and recognizing emotions, conflict resolution, communication with other people, dealing with development crises and negotiating in conflicts of interest. Entangled in a complex crisis, in difficult situations they avoid social interaction or withdraw from existing contacts. In experiencing severe stress they react aggressively or become passive, submissive, helpless (Nowak 2011).

In present times, we note increasing problems of adaptation resulting from the multiformity of family. Regardless of the adopted forms of family life - traditional or alternative - the idea is for development experiences of every child to be associated with relations that are full of safety and love. This is in fact fundamental for the child to develop many qualities and skills, and thus for the quality of his personal and social life in adulthood. Parental deficits, especially those that are in the pool of personal resources, are one of the main causes of developmental disorders and adaptation problems related to the risky behaviors of children and adolescents, including those with criminal behavior (Biel 2008).

Deprivation of needs - adaptation implications

Considering the perspective of interactive growth of the child in the family, it should be assumed that proper adaptation of each individual is determined by its interaction with the environment in terms of satisfying basic needs and the changing ability of the environment to satisfy them.

One of the key development needs securing proper adaptation is the need for affection and bonds, expressed towards the primary caregiver (Bowlby 1968, 1980). The adaptive function of bonds and roles of early experience in shaping an individual's resources are also strongly emphasized by representatives of evolutionary psychology (Goldberg 2000; van Ijzendoorn, Sagi 1999). Numerous studies have shown that the model of a secure attachment is a factor safeguarding and strengthening the individual's resistance to stress, which is a frequent source of psychopathology. According to Susan Goldberg (2000), the experience of early commitment is the foundation for the development of these resources of the child. Moreover, an accepting, sensitive and caring relationship of the child with the parents determined the ability to maintain secure attachment in romantic relationships in adulthood (Hazan, Shaver 1987). In contrast, longitudinal studies of social behavior demonstrated (source: Plopa 2007) that children experiencing secure attachment in adulthood show, among others, a stronger empathy, a higher level of social skills and interpersonal skills and a high level of emotional openness in relationships with other people.

Secure attachment correlates also with the freedom of the child in showing expression, with its greater openness to others and a more realistic perception and interpretation of the emotions of others (Belsky, Cassidy 1994). In interactions with a parent revealing a wide range of expressions, the child acquires the belief that the **free expression of emotions** may be useful in social relations (Kohut 1971, 1977; Lowen 1958, 1983).

Adverse patterns of attachment activate defensive processes in the relations of a child with other people (Levy et al. 1998; Thompson 1999). Dismissing attachment is a risk factor associated with increasing or decreasing resistance to stress, and correlates with social maladjustment, aggression and crime (Plopa 2007). The results of studies on the consequences of disorganized attachment in infancy indicate a strong relationship of this pattern with the subsequent problems of adap-

tation (oppositional-defiant disorders, dissociative symptoms, anxiety, aggression, taking control and domination) (Brzezińska 2005).

A child's need for **individuation**¹, satisfied by exploring the environment, activity and formation of mental boundaries independently initiated by the child (Mahler 1968) and the need for the harmonized relationship self-others (Kohut, 1971; Stern 1985) is equally important in the process of growing up. As emphasized by the researchers involved in this issue, developmental changes can cause transformations in the internal model of social relations, especially that children experience attachment to different people, but most often to the closest and distant family members. Interaction inside the family are determined by personality and attitudes of parents, their life competences, experiences acquired from families of origin as well as the gender of the child, its age, personality and level of intelligence (Plopa 2007).

The results of numerous studies show the impact of mental health and mental well-being of the parent on the course of psychological development of the child (Kujawa 2011). The positive effects of development are associated with parental attitude which is characterized by warmth, clear communication, transparency in decision making and commitment. Children of parents who have these types of attitudes cope in social relations better than others, they function better in school and their peer group (Steinberg et al. 1992). The development of resources that determine parenting attitudes (styles), which include personality and mental health, is strongly influenced by the developmental trajectory of the parents and the history of the generation family. High parental competence is possessed by people whose needs determining their comprehensive development as children were satisfied, who experienced rational parental control and models of interaction that supported the process of their individuation (Belsky et al. 1991).

In contrast, parental style that is characterized by a hostile attitude, rejection, the use of force or lack of supervision is conducive to the formation of developmental disorders (aggressive, criminal behavior, educational failure, mental disorders, risky behaviors) (Barnes, Farrel 1992). Research conducted by Mieczysław Plopa (2007) gave rise to the conclusion that there is a correlation between the perception of parental attitudes and adaptation of school youth. Clear adaptation difficulties which are a threat to the mental health are demonstrated by adolescents rejected by their parents, in whom negative behaviors predominate over the positive, in contrast to adolescents declaring very good and good relationships with their parents.

The quality of the relationship of each parent with children is mostly determined by their personal resources and contextual resources, including professional (Anderson, Sabatelli 1999). This thesis is confirmed by the research of Elżbieta

¹ Individuation is a process in which the individual becomes aware of his unique personality (source: Johnson 2012).

Kornacka-Skwara (2002), which showed that inappropriate parental attitudes are more often presented by unemployed fathers who are seeking work than fathers who are employed, as well as mothers dissatisfied with their work situation, reacting in increased nervousness, which results in a lower level of social adaptation of their children. Recent research on internalizing and externalizing disorders indicate the existence of links between the characteristics of the family of origin, parental attitudes and roles and the specific developmental problems of children and their behavioral problems. Generally speaking, the characteristics of the family can trigger the mechanism of adaptation disorders (emotional and behavioral) and can be a source of faulty adaptation (Wysocka, Ostafińska-Molik 2015).

In problem families, especially in families affected by pathology, children are to a large extent exposed to impairment not only in terms of adapting to social norms, but above all in terms of life skills and constructively coping with adulthood. They experience chronic frustration from the lack of environmental conditions necessary to satisfy their basic needs and suffer from personality, functional and neurotic disorders affecting them.

The deprivation of needs typical of a specific developmental phase, resulting from the scarcity of biological and environmental resources (individual and group), generates a characterological problem. When this confrontation is traumatic, early resolutions tend to become rigid and are resistant to change. This is the core thesis in the characterological and developmental approach developed by Johnson (1993, 2012) on the basis of psychoanalytic theories as a result of the synergistic combination of the concept of relation with the object, ego psychology, psychoanalysis, characterological, developmental, interactive and phenomenological orientation. Johnson stresses that the human character, but also the sources of psychopathology, are the result of a complex response of an individual to frustration caused by the environment (and in the early stages of development, mainly through the family environment), related to the lack of satisfying needs of different nature. Already in the early stages of life the child is confronted with the basic human problems, and some of the early attempts to solve them are based on limited, at the time, environmental tools and poor experience of the world.

Johnson (2012) distinguished seven types of disorders, each of which is a continuum (from less to more serious) and reflects the essential elements of human nature, around the human personality is formed. They point primarily to the importance of early relationships of the child with its parents in the process of shaping character, personality and self-identity. The table below presents brief characteristics of the existential experiences of life in comparison with styles of character² formed as a result of the associated disorders.

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² Due to limitations in the volume of the article, we presented a brief characteristic of styles of character, based on the choice of those elements that reveal the essence of this issue.

1. THE DEFEATED CHILD – social masochism and patterns of self-destruction

Etiology: parents oriented at control and domination, keeping far-reaching distance in personal relationships, emphasizing the family hierarchy and subordinate position of the child.

Symptoms (e.g.): self-depreciation, self-destructing behavior giving the impression of "the need for suffering", the frequent occurrence of chronic, overwhelming depression, sense of hopelessness, lack of trust and passive-aggressive behavior, problems in interpersonal relations.

Script decisions and pathogenic beliefs: e.g. "I will never accept my defeat", "I can punish you by withdrawing".

Relationships with others: provoking retaliatory responses, seeking contact with others by waiting on them, manifesting martyrdom, inducing guilt and complaining, abandonment of needs.

Emotional characteristics: inhibited, suppressed and depression-stained feelings, often unconscious hostility and aggression, perceiving oneself as a victim and a sacrificial person.

2. THE HATED CHILD (schizoid experience)

Etiology: improper parental care – dryness, lack of empathy, coldness, distance, detachment and rejection.

Symptoms (e.g.): evasive behavior, chronic anxiety, conflicts in social relations, especially ones requiring trust and commitment, inability to recognize own emotions and to form sustainable, social and intimate contact, signs of aggressive and self-destructive behavior.

Script decisions and pathogenic beliefs: e.g. "the world is dangerous", "if I indulged in a lack of control, I could kill somebody".

Relationships with others: others are seen as people who are not accepting and threatening, projection of hostility on others (or projective identification).

Emotional characteristics: feelings are isolated and/or suppressed, experiencing chronic anxiety, which hides a primitive, suppressed rage.

3. THE ABANDONED CHILD: social withdrawal

Etiology: parents are unreliable, not sufficiently caring to meet the needs of the child, they themselves are often excessively needy.

Symptoms (e.g.): as a result of deprivation of the child's needs, it is not able to identify and express them, it does not know how to approach others and ask for help (impaired ability of self-care); common depression and forms of breakdown, which need and justify the use of social support.

Script decisions and pathogenic beliefs: e.g. "I don't need anything, I can achieve everything alone", "if I expressed my needs, I'd experience disappointment, abandonment or rejection".

Relationships with others: tendency to form relationships on the basis of dependence or interdependence.

Emotional characteristics: susceptibility to euphoria, excitement intertwined with physical breakdown and depression, easy irritation but lack of aggression and hostility, fear of loneliness, abandonment and jealousy.

4. THE APPROPRIATED CHILD: symbiotic character

Etiology: through their anxiety reactions, withdrawal, threats and punishing those behaviors that serve to create distance, defining differences and the autonomous development of a specific identity, the parents block self-identity of the child and its ability to take risks and for self-control.

Symptoms (e.g.): underdevelopment in terms of a stable sense of identity, fear of rejection and isolation, tendency to be dominated by other people, suppressed aggression.

Script decisions and pathogenic beliefs: e.g. "I can't be happy if you can't be happy", "my happiness, success will hurt you or be achieved at your expense".

Relationships with others: far-reaching caution in dealing with others, because they are seen as extremely important, often appropriating or abandoning and using pressure and manipulation in social and intimate relationships.

Emotional characteristics: guilt associated with excessive responsibility for others; anxiety can be triggered by anything that leads to separation (e.g. difference of opinion, success, etc.).

5. THE USED CHILD: narcissistic experience

Etiology: the child is used by parents to reflect, increase self-esteem, fulfill ambitions; parents idealize the child or humiliate it if it does not meet their expectations.

Symptoms (e.g.): focus on oneself, demanding attitude, perfectionism and excessive reliance of self-esteem on achievements (success), manipulation, objectification and devaluation of others.

Script decisions and pathogenic beliefs: e.g. "I have to be omnipotent, perfect, unique", "I need to know everything without learning, achieve anything without work, be powerful and universally admired", "if I'm sensitive, I will be exploited, humiliated or embarrassed".

Relationships with others: attracting others with one's charisma and talent. Emotional characteristics: inability to display affection towards others, extraordinary ease of responding with wounded pride, disturbances in controlling impulses, deeply experiencing shame and humiliation (hidden).

6. THE SEDUCED CHILD: hysterical defense

Etiology: one of the parents abuses the natural sexuality of the child, treating it like a sexual object, the other parent is often cold, distant or directly punishing.

Symptoms (e.g.): excessive emotional excitability, dramatizing behavior, shallow emotional experiences, sexual dysfunction, global and imprecise thought processes, excessive interest in the opposite sex, ease of distraction combined with difficulty to focus.

Script decisions and pathogenic beliefs: e.g. "my value depends on my sexuality and attractiveness", "any gratification comes from the opposite sex".

Relationships with others: relationships are often sexualized, impulsive, unconscious competition with persons of the same sex, stepping into the roles of sacrificing and caring parents or helpless children.

Emotional characteristics: simulated feelings, tendency to lose control in response to emotions manifested by others, unconscious hostile and competitive feelings.

7. THE DISCIPLINED CHILD: obsessive-compulsive personality

Etiology: accurate parental care, rigid, stubborn and holding to strict rules, especially in the field of social training, controlling emotions and inhibiting sexual, competitive and aggressive expression, the use of sanctions and reinforcement of desired behavior.

Symptoms: (e.g.) forced, irresistible pressure to do the right, necessary and legitimate things, the tendency to give out moral and other judgments, routine in action, perfectionism, difficulty in making decisions, rigid and pedantic behavior, devoid of emotions, depression and compulsive thoughts combined with obsessive thoughts and compulsive behaviors.

Script decisions and pathogenic beliefs: e.g. "I have to do the right things", "I will never make another mistake".

Relationships with others: wavering attitude in interpersonal formalized relations, frequent conflicts, tensions, rigidity of values and behaviors.

Emotional characteristics: specifically reserved and slow style of responding with limited access to feelings.

Referring to the above characteristics, it should be noted that the etiology of behavior disorders is multifactorial and multidimensional. They are determined not only culturally, socially and environmentally, but also largely biologically, especially genetically. Nevertheless, the context of the family is of fundamental importance here and must be taken into account in educational, preventice, social rehabilitation and therapeutic work with children and adolescents. As it was previously accentuated, the family is the natural, most affecting and most important environment for the formation and functioning of a human being.

Final conclusions

The research results of numerous studies cited in the article reinforce the thesis that the inefficiency of the family environment and the insufficient personal and family resources resulting from it, are a source of developmental disorders and psychopathology, as well as the root cause of behavioral disorders in children and adolescents (e.g. aggression, criminal acts, experimenting with psychoactive substances), just like "poverty is a symptom of the lack of an efficiently functioning economy built on the foundations of credible political, social and legal institutions" (Levitt, Dubner 2015, p. 70).

There is no doubt that parents are most responsible for creating the conditions for their children to enable them to create a safe and fulfilling life. But how should parents do it, who themselves grew up in families marked by a profound dysfunction and/or pathology? They are still the victims of malfunctioning families of origin, the distorted characters and personality disorders of their parents. It is they who bear the personal, traumatic effects of impairing their own family environments. They duplicate parental attitudes and behaviors of parents and often enter the path of deviance and pathology. Consciously or not even being aware of it, they harm their own children by adopting negative parenting styles (attitudes), avoiding or emotional styles of coping with stress and coming to terms with their own disability in personal and social functioning.

This creates a "vicious circle of parental pathology". How can one stop it? How does one effectively prevent a kind of "inheritance" of deep dysfunction of the family? The answer to these and other questions about the issue in question is extremely important but also very complex and requires to conduct further, more extensive and multidisciplinary research and deep intellectual thinking.

The types of characterological disorders specified by Johnson are useful not only in the psychological and educational treatment of developmental disorders and in the diagnosis and understanding of the etiology of risky behavior in children and adolescents, but in my opinion, they may also be useful in designing social rehabilitation interactions, because based on them, one can take socializing actions – consistent and adequate to the needs of children, parents and other family members. Using creative methods of social rehabilitation, by discovering and activating personal and systemic potentials, one can made adequate, methodically targeted modifications to the basic dimensions of family functioning – adaptability, consistency and communication.

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