ABSTRACT
Objective: understanding some mechanisms used by family members when facing a chronic disease, that is, resistance, cunning, double game and silence. Method: descriptive study of qualitative approach, carried out with four families who lived with adult dependent physical care. Data collection was conducted through interviews and focus groups and analyzed by the theoretical and methodological framework of the sociology of everyday maffesolian epistemology. The research project was approved by the Research Ethics Committee under the number 125/2004. Results: shows three categories that represent Maffesoli’s resistance mechanisms: the chameleon instinct of the performing self in order to make use of cunning; the role-playing considering the person’s existence in the family; and silence as a defense mechanism. Conclusion: cunning, double game, and silence are ways of resistance expressed according to the place and time. Descriptors: Family; Chronic Disease; Resistance Mechanisms.

RESUMO
Objetivo: apreender os mecanismos de resistência astúcia, duplo jogo e o silêncio, utilizados por familiares diante da vivência da doença crônica. Método: estudo descritivo, de abordagem qualitativa, realizado com quatro famílias que conviviam com pessoa adulta dependente de cuidados físicos. A coleta de dados foi realizada por meio de entrevista e grupo focal e analisados seguindo o referencial teórico-metodológico da sociologia do cotidiano da epistemologia maffesoliana. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa sob o parecer nº 125/2004. Resultados: identificamos três categorias que representam os mecanismos de resistência maffesolianos: revestindo-se como um camaleão para fazer uso da astúcia; o jogo da representação no existir da pessoa na família; e o silêncio como mecanismo de defesa. Conclusão: consideramos que a astúcia, o duplo jogo, e o silêncio servem como formas de resistência que se expressam de acordo com o lugar e o momento. Descriptores: Família; Doença Crônica; Mecanismos de Defesa.

RESUMEN
Objetivo: aprehender los mecanismos de resistencia astucia, juego doble y silencio, utilizados por familiares ante la vivencia de la enfermedad crónica. Método: estudio descriptivo de enfoque cualitativo, realizado con cuatro familias que vivían con cuidado de adultos dependientes físicos. La recolección de datos se realizó a través de entrevistas y grupos focales y analizada por el marco teórico y metodológico de la sociología de la epistemología maffesoliana cotidiana. El proyecto fue aprobado por el Comité Ético de Investigación bajo el número 125/2004. Resultados: identificamos tres categorías que representan los mecanismos de resistencia de Maffesoli: revestíéndose como un camaleón para hacer uso de la astucia; el juego de la representación en el existir de la persona en la familia; y el silencio como mecanismo de defensa. Conclusión: consideramos que la astucia, el juego doble y el silencio sirven como formas de resistencia que se expresan de acuerdo con el lugar y el momento. Descriptores: Familia; Enfermedad Crónica; Mecanismos de Defensa.
INTRODUCTION

Studying family experiences is important in order to provide the technical-scientific community with some new knowledge so that the health professional can assist the family in a humanized and integrated way, thus, contributing to both, teaching and professional practice in what regards the analysis and implementation of attitudes directed to the family assistance. The innovation of this study lies on the family care supported by the concepts of the Everyday Life Sociology, since such an approach has been nationally and internationally addressed and worked in different sciences, however, rarely used either in Nursing or in the several health fields.

Considering the health area, chronic diseases have required a differentiated performance from the professionals who take care of the individual with some pathologies, as well as it demands a reflection on the existing public policies. Due to their long-term characteristic, healthcare models advocate that the family need to establish their actions based on the everyday life of the patients and their family members.

This is because family are a set of relationships that will be building their history depending on the game produced in the inner reality of the group based on some aspects, that is, individuality, intersubjectivity and conceptions of each subject. The presence of a disease in the nuclear family often causes uncomfortable situations that lead to the need for changes, usually evidenced by conflicts that may arise because of the responsibilities assigned by the care activities. These crises cause stressful situations on the caregiver’s everyday life, however, the help of other people in the task of caring is an aspect that may ease the difficulties.

Based on the crisis, it can be understood that there is the potential movement of the individuals who reveal the resistance mechanisms. Resistance is a movement that allows either the person or the group to play with duplicity intentionally through its several aspects, such as cunning, double game and silence in order to face the difficulties imposed to them. This is an offensive process of reacting against commands and dominant schemes.

The duplicity mechanism, using its multiple aspects, puts on scene the image, the appearance, the mask, playful characteristics, the hierarchy, manners, politeness, slowness, conformism, intensity, excitement, among other elements.

Maffesoli’s epistemology considers that role-playing leads to resistance and this leads to duplicity. According to the author, the meaning of duplicity is under the plane of the double and dubious characteristics. The author explains such a duplicity as a shadow on the different certainties of individual identity, but which has a paradoxical function of hiding nothing.

Duplication is the dissidence manifestation in which the individual often consciously experiences the paradox of not replying, standing apart, but giving the impression of participating, being present, working, and being integrated into the social order. It allows individuals to survive the absolutism, the several impositions of everyday life by protecting in their existence the self-communion, that is, duplicity is a set of attitudes that constitute an effective way to protect oneself from the world of others, thus, people can play and take risks in order to create and change their everyday life.

Cunning, an important aspect of duplicity shown by Maffesoli, is a way of resistance that allows the preservation of life in which human beings manifest different identities in accordance with danger. According to the author, cunning is passive, perverse, and double. Therefore, it can be applied to multiple and distinct social settings.

The double game is also part of the social structure, and Maffesoli considers it as one of the mechanisms of social resistance; this is an appropriate way to reply to social artificiality.

Silence and speech are also ways of resistance expressed according to the place and time. Silence, because of its structure, is often ignored, however the silent attitudes can become corrosive.

Silence is a defense mechanism that does not deny or attack the official morality. The person even listens to what others say, but in return, he/she shows a polite silence, an abstention, a non-response to the request for participating. This is an active passivity, which generally shows more strength, corrosion and subversiveness than a frontal attack.

It is assumed that the adoption of duplicity aspects reveals the resistance mechanisms that allow people’s adequacy and self-adjustment in face of small deviations in everyday life, what supports the coping with precariousness and permanence in an ambivalent world. Such mechanisms originate from the acceptance and the affirmation itself of the limits of life.
Therefore, this study aims at understanding cunning, the double game and silence, as shown by Maffesoli’s epistemology as resistance mechanisms used by family members in face of a chronic disease.

**METHOD**

Article from Thesis "Dynamics of family relationships: understanding the interaction with family dependent on physical care". School of Nursing of Ribeirão Preto, University of São Paulo/EEERP/USP.

The qualitative research approach according to the theoretic-methodological references based on everyday life sociology of Michel Maffesoli’s epistemology was used because it allows us to understand the concrete reality of the object of investigation, what is suitable for studying the social structure of families who have suddenly experienced a family member dependent on healthcare.5

This research used Formism based on Maffesoli’s epistemology as a resource of investigation, which fits the methodological need of providing the social phenomena with an outline, in addition to either delineate or sketch the social phenomena without looking for an exact purpose of the minimum attitudes of everyday life. According to the author, the method assumes a social and natural organicity, which is the approach suggested by Formism.6

This study observed the environment of the collective being-together of the family, focusing on the person who is dependent on healthcare and on family members as well, exploring the conviviality, the dynamics of interpersonal relationships in everyday life, based on both, the family and Maffesoli’s epistemology.

Data of four families who lived with an adult dependent on healthcare because of a disease or trauma that had caused the sequel were collected. In all family groups, the dependent was a progenitor.

Data collecting was carried out from July to December 2004 in the residence of the family, and structured interviews, open individual interviews and focus groups were the techniques used.

It is worth emphasizing that the individual who depends on healthcare did not participate in the focus groups (Fgs). Four focus groups were carried out with each family, respecting the availability of all family members, dates and scheduled times. The residence of the family was the scenery of the study, which was carried out by the moderator of the group, the mental health nurse, following a script. The researcher remained in the position of an observer. The time for each group ranged from 50min to 1h30min. The interval between one group and another in the same family was of fifteen days, and such interval was modified according to the need of the familiar components. There were some difficulties during data collecting, that is, arranging date and time for everybody, the inadequacy of the place for developing the techniques because of the structural conditions of the residence, the presence of small children who lived with their parents and used to interfere in the research, in addition to the agreed absence of a member in one of the families. In the latter case, the focus groups were carried out without the presence of such a member, after several attempts to set a date and time. In the last focus group for each family, the researcher, together with the moderator, analyzed the evolution of the nuclear families in order to conclude this phase of the research.

The researcher analyzed both, the detailed reports of the focus groups (Fg I, Fg II, Fg III, and Fg IV) and the individual interviews. Based on the sequence of theoretical categories of analysis shown in the theoretical references, the empirical data let emerge the ‘outlines’ and ‘possibilities’ of the sociality observed in this renovation of the everyday life of the families evaluated.

The ethical principles were considered in order to develop the research, in accordance with Resolution No. 466/12-MS, the research project was approved by the Standing Committee on Ethics in Research Involving Human Subjects of the University of Maringá - Paraná, Brazil (Case No. 152/2004); and all the participants signed an informed consent form.7

The families themselves established a name to identify them, that is, Affection (Fg I), Colors (Fg. II), Bird (Fg. III), and Flowers (Fg. IV). The family members defined the nomenclature of each of them.

**RESULTS**

♦ Introducing the families

The families evaluated had in common only the presence of an adult dependent on healthcare, in addition, each one had its own peculiarity and singularity, taken into consideration throughout the research.

In the family named Affection, the father was the individual dependent on healthcare who had had a cerebrovascular accident.
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(CVA), leading him to tetraplegia and aphasia. This family consists of Hope(47 years old - the father), Love (40 years old - the mother), Fondness (23 years old - a son), Tenderness (22 years old - the daughter), Determination (25 years old - the other son) who got married with Dedication (26 years old - the daughter-in-law) and who had a son, Naivety (05 years old - the grandson).

In the family named Colors, the mother was the person dependent on healthcare who had had a car accident, what caused her a fracture of the hip and of both femurs, as well as a traumatic brain injury. This family consists of Yellow (37 years old - the mother), White (22 years old - the daughter), Red (19 years old - a son) and Black (15 years old - the other son).

In the family named Bird, the father was the individual dependent on healthcare who had had a cerebrovascular accident (CVA), which caused him hemiplegia and dysphagia. This family consists of Big Macaw (52 years old - the father), Macaw Mother (43 years old - the mother), Macaw (24 years old - a son) and Little Macaw (23 years old - the other son).

In the family named Flowers, the mother was the person dependent on healthcare who had had a car accident, what caused her a traumatic brain injury and an open fracture of the lower limb. This family consists of Daisy (38 years old - the mother), Chrysanthemum (48 years old - the father), Rose (14 years old - a daughter), Violet (13 years old - another daughter), Poppy (09 years old - another daughter), Calendula (06 years old - another daughter) and Orchid (03 years old - the other daughter).

**RESULTS**

♦ The chameleon instinct of the performing self

This study shows how the individuals deal with obscure sad situations, having an attitude never seen by the group before, which make the family find strange this person who is arguing and showing different behaviors:

[...] He (Determination) is demanding, he demands a lot on us ... he thinks we are not taking good care, he thinks we have to sit him down (the dependent on healthcare) more often. He demands a lot on us, I do not know why. What does he think? [...] (Dedication - Fg. III)

[...] He (Determination) does nothing, but he demands on us (vehemently) [...] . (Love - Fg III)

There are other reports that show ways to face authoritative adversities, so that the attitudes do not show clearly what the desire is, as well as the aim, so they are obscure:

Because Rose is very stubborn, disobedient, mouthy.... She swears at me every time she says something; she retorts and throws things. Then, I no longer have the patience with her complaining. Today I hit her with a belt, I called her, she came, then I belted on her three times ... She cried and went to sleep, and then she got up as if nothing had happened. (Daisy - Dependent Family Flowers)

When my mother was angry I used to take the bike and went out, rode for a while to cool down. [...] Then I met my friends, we talked a bit, and then I said, 'I'm leaving now'. I went back home. (Black - Fg II)

Sagacity also makes itself known when the person seeks to please and take advantage of others and events to ease the situation and find a way of survival:

When she is stressed she pays us back ... I get angry, It makes me want to swear at her [there is an anxious laughing]. I do not swear, I just answer ... because if not then she does not give me anything (money, candy, clothes). (Poppy - Fg IV)

Cunning appears in the subjectivity of jokes, explosions, and polite attitudes:

[...] Sometimes I wanted to punch up the walls, to bang my head on it, and then I took the bike and went out, rode it for a long time, I took a while. [...] Sometimes I went out on foot, I had to leave the house [...] . (Red - Fg II)

[...] There are a lot of things from the past that hurt us a lot, and now when he (the dependent individual) wants to act angrily like a macho to solve the situation, I have to get this out, then I explode. It is my strategy, it is when he accepts things, when he is quieter, and it is necessary to do this [...] . (Macaw Mother - Fg. I)

[...] I hardly ever argue, take sides, I sometimes say something, but never vehemently. First, obviously, it is not one of my characteristics to be rude, sometimes I think like that, sometimes I hold on, but no, I always keep it well. Sometimes this is bad, because there are situations in which you have to be hard, you have to be fast, you have to be effective [...] . (Macaw - Fg IV)

♦ The individual’s role-playing in the nuclear family

Considering this category, the reports show how the individuals role-play in order to assemble normal as a way of coping with different situations: the use of the double game not to confront the experienced
Impositions, and the self-communion or a false acceptance as a way of attacking uncomfortable situations. The speech below clearly reflects the double game:

[...] Now when someone asks me about him (the husband and dependent on healthcare) I say, ‘he’s fine; he’s getting better every day.’ I answer this way to stop listening to certain themes. Thus, I have started to learn, ‘he’s great!’ Some days he is not well, my goodness; some days I left the house when he was not feeling well, but I said, ‘no, no, Hope is great, go there and see him.’ [...] Because people like to poke around [...]. (Love - Fg I)

The speeches reveal attitudes and behaviors in which there is no frontal contestation to what others impose, but the individuals act this way to overcome problems, as well as to defend themselves against uncomfortable situations:

[...] I go out when they are arguing, when I see that an argument will start I sneak out. These days my mother was arguing with Rose, I went out for a walk, but she did not see. If she saw I would have to stay, but then I am quiet, even though I am in the mood to talk, it is better for me! [Silence] [...]. (Poppy - Fg I)

[...] This is a good strategy that my brother (Little Macaw) has, that is, being ironic, playing, of not even being there, [...] of dreaming. (Macaw - Fg I)

Considering the duplicity of movements, it is worth highlighting the aspects of false acceptance. People’s behaviors represent a multiplicity of roles, that is, they accept what others suggest, but do not fulfill it, on the other hand, they do the opposite:

[...] She talks too much, I say, ‘Ok, mom, calm down!’. Oh no, for God’s sake! I have to agree, and then do the opposite. I do not do anything she asks, I agree, but I do everything the opposite [laughs]. Then she shouts at me, she argues with me. I say, ‘Ok, mom, I’ll do it!’ and, ah, ah [he showed that he does not do it and goes out] [...]. (Black - Fg III)

Silence as a defense mechanism

An energy that enables to withstand difficulties is implicit in the silent attitudes of the family members, concerning the deaths of everyday life, and the conflicts in daily life. This is revealed in the speech:

[...] Sometimes I am anxious, I go to the bathroom [...]. In the first days I told him (the dependent on healthcare): ‘stay here that I'm going to take a shower.’ I used to have three, four showers a day. I turned on the shower and cried. Then I shouted, cried, cried, sit on the floor [...]. Remembering hurts us, why am I going to hurt myself if it is something that will not solve my problem, it will not help me, and it will not ease my guilt? Thus, this is something that I try, I do not tell anyone [...]. (Yellow - dependent on healthcare)

[...] Red does not speak, the more he is something that my mother says and that is evident in him is that he just listens and you just know his reactions through his look. He looks hollow; he looks at you with a look of happiness too, but he does not say a word; he neither thanks us for anything, nor argues with us. Then we can see in his eyes, he cries quietly. [...] He is always more himself [...]. (White - Fg I)

It is worth emphasizing that this crying has always happened silently, the subjects try not to be listened neither to overload the family members even more, nor to make the dependent on healthcare to feel guilty about his/her disease, in addition to the situation that the family has been experiencing. Crying, which in reality is an explosion, is ambivalent when it is quiet, and it aims, in this specific case, to maintain an appeasing atmosphere in the family.

DISCUSSION

In face of a chronic disease, the family’s routine and the interpersonal relationships undergo changes, which lead to the emergence of adaptation mechanisms that eventually advance to overcome feelings. 8

The adaptation mechanisms are a way of resistance, which is shown in Maffesoli’s epistemology as a movement of multiple personal potentialities, which manifest themselves to face the terrible impositions, that is, small and large deaths of the everyday life. 8,9,10

Resistance makes the person or group play with duplicity and face the difficulties, arbitrariness and requirements that arise in everyday life.

The study of everyday life draws attention to both, the duplicity and the intrinsic plurality of any social situation, even to everything that seemed to be homogeneous. 9

The analysis of the reports showed three categories that represent Maffesoli’s resistance mechanisms, that is, the chameleon instinct of the performing self; the

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role-playing considering the person’s existence in the family; and silence as a defense mechanism.

The chameleon instinct of the performing self

Cunning is a duplicity aspect for which the author uses the metaphor of a chameleon that changes according to the interest of the moment, in order to state that the person changes, mimics up according to the danger that appears before oneself, appropriating the most diverse identities. This change works as a defense for the person’s survival.\(^3\)

All the members of the family named Affection reported Determination’s behavior, what clearly shows how a person can have different resistance mechanisms in face of impositions. As he could not deal with his father’s illness, Determination found his way to follow along with the family. He did not help directly, but expressed his involvement with attitudes that characterized sagacity, what the family members did not accept well. This mechanism consists of intergenerational conflicts that may arise due to responsibilities involved in healthcare, that is, the son could not see his father depending on his care.\(^3\)

Daisy’s speech shows the manifestation of cunning, and Rose found the way to confront it through submission, but at the same time by reporting a perversive participation. Cunning is evident in Black’s speech through his behavior to find ways not to face the problem directly.

Previous studies corroborate with the reports above, since they reveal that parents who face their children’s chronic disease make use of the strategies known as escaping and avoiding, especially when they have more negative perceptions of the consequences of the disease.\(^10\)

Mentioning cunning is to declare cleverness in order to deal with events one does not want to face directly; it is to keep away from unwanted situations.

Cunning embraces specific attitudes in everyday situations, and it expresses strength, which can be passive, perversive and double, manifested in several fields. This is a way of resistance that is not stated as an active struggle; it works hidden and effectively. There is, rather, the refusal to participate or to argue, and especially the diversion of conventional values.\(^3\)

These ways of coping with different situations allow the exposure of diverse identities, which are latent, hidden and kept vigil by masks most of the times. Based on the speech of the individual above, it can be observed how this person uses her ability to create and act out in front of what does not please her, supporting the situation until the moment that patience allows, then she has an explosive behavior, showing her limit.

Therefore, cunning, which identifies itself with the use of several identities according to the existent danger, is the active element of the family and social relationships. Anxieties, caused by the events of everyday life, contribute to the formation of inner stress, making the person have attitudes in ways that cunning is revealed.

Knowing how to use cunning at the right moment is something positive and it indicates growth, inner maturity. Based on these report it is possible to understand Red’s perception, since when he realized that he no longer had the strength to withstand the pressures and this could trigger aggressive behaviors with himself, he decided to be away from the environment, taking some time to reorganize his ideas.

This behavior, which is also evident in reports of other subjects in the same family, allows relationships to develop in a more peaceful and balanced way. It makes cunning act as balance and approximation factors in family relationships.

Cunning can also be seen when the person shows conformism in face of impositions, thus, participating submissively. This participation may be random and dangerous. The reports reveal that the individuals are doing something, but such an attitude is not coping. The person does not attack frontally, but tries to keep oneself away from the events, and shows a certain passivity when facing adversities.

In this sense, cunning is shown by the use of a mask, politeness, conformism, elements organically connected to life, and that allow people to exist. According to everyday life sociology, the conformism has a double movement: it becomes more intense or it disappears. Thus, cunning spreads itself and creates opportunities for each individual and the social group to remain masked and resist to all impositions of the several powers.\(^11\)

Therefore, facts and attitudes that can lead to conflicts, and that are part of the past, do participate in the current life. Cunning, used during the whole life, works as a balance to keep the relationships of the group, even if the conflict remains latent for years, cunning is expressed without guilt only at the present time.

Considering non-verbal behaviors, cunning may work as a camouflage, thus, insight is necessary to discover what lies between the

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lines. It is still possible to state that people know how to use and take advantage of the shade to survive, thus, declaring their strength.\(^4\)

Therefore, cunning is the structuring element of group relationships and it is a resistance mechanism considering the family environment, which may be expressed by several distinct ways. Understanding it is interesting because, as evidenced by the definition of the word itself, it expresses smartness, but it is also a way of coping with the reality that minimizes suffering.

\* The individual’s role-playing in the nuclear family

Role-playing is an aspect of duplicity that helps a person to face uncomfortable situations, ensuring one’s life. Appearance and the double game work as a refuge, as a way of replying to the impositions of the world. Playful and appearance are important cells in the role-playing mechanism of both, daily life and the double game, because due to the trivialities of everyday life there is a link between these two elements, that is, playful and the double game, allowing the manifestation and experience of plurality.\(^3\)

It is worth remembering that the game, even though often tragic, keeps its main feature in the plurality. Because of its ability of being plural, the double game is the individual’s powerful resistance strategy, which enables oneself to live in a natural way, with the appearance of normality, yet maintaining the subversive relativism in face of dominant values. This is only possible by using an apparent submission, which allows the group - it is not known how, perhaps because of the disguised duplicity - to practice the commonly accepted values.\(^4,11\)

It is worth observing that the way the individual behaves is not of coping with the discussions, but otherwise to deviate from them and not being involved, that is, to run away when possible. When this is not possible, the strategy is not to contradict, but pretend to be accepting. This shows a game of appearances, a hidden duplicity for which there is no place for coping, so that one can have some advantages even when there are adversities.

The double game conveys the idea of a show, a role-playing, in which the person shows up for oneself and others as he/she wants to be seen, this is part of social life. Everything is organized according to other people, what makes the person play roles according to the conveniences.\(^3\)

The author also states that when making use of mockery, manifested by laughter and irony, the person reflects his/her personal and popular power and vitality. As in a game, in difficult situations, for or against the adversities, the person appropriates and enjoys both, mockery and joke, in subtle ways, thus, finding resistance.\(^5\)

So that the double game occurs, it is important that the person knows the environment, the others with whom he/she has a relationship, and, above all, the individual must be perceptive.

The duplicity stated in the report above shows the non-acceptance of the impositions. In order not to create an unpleasant environment at any given time, Black appropriates the mechanism of the game. This game favors new conflicts, because he says he will do something, but looking ‘nicer’, he acts as it suits him, thus, ending up doing the opposite. This will create negative elements, which provide the family with problems for their relationships.

The analysis of this category shows that the movement of life itself, which proves sociality, is essentially constituted by both, duplicity and cunning, elements that make the double game and multiplicity occur in everyday life.\(^12\)

In face of stressful situations, the choice of ways in the process of coping and adaptation is individual, that is, each person perceives, evaluates and acts differently and health professionals, especially nurses, need of appropriate delicacies and human solidarity to provide joy and comfort to patients.\(^13,14\)

\* Silence as a defense mechanism.

Considering the importance and power of silence, the following statement must be highlighted: ‘it will never be too much to reinforce the unifying function of silence, which the great mystics have understood as the quintessence of communication’ \(^9\).

Denying the disease is a challenge that must be overcome by the patient.\(^2\) Denying is a resistance mechanism that manifests itself in several ways when something bothers the person, causing him/her either to minimize the event or not to accept it.

Silence and discretion originate practices that affirm the identities and personal resistances. Thus, silence, that is, everything that you do not hear or listen, shows itself as a manifestation of power and resistance, which works as a strategy to live the deaths of everyday life.\(^4\)

When experiencing a chronic disease the caregivers will likely show a movement of
introspection. In this sense, Maffesoli’s epistemology allows us to understand that when we refer to the self-communion of a person we are saying that he/she keeps some distance from the situation, but still maintains a space for having freedom to act when facing impositions.1,3

Modest and silent attitudes are a way found by the subjects evaluated in this study to support the painful impositions manifested in daily life, considering the presence of the disease in the family.

There is some resistance in the self-communion, expressed in the reports and silent behaviors of the dependents’ children, such as Macaw who faced the situation without speaking, just felt sad, without having an attitude, giving the impression that he was closed in himself. Violet also behaved quietly and did not talk, because she was afraid of her mother’s possible verbal aggressions. In this particular case, the self-communion was a defense against the declared and constant violence to which the daughters were exposed at home. The person may show his/her potential and strength to survive the tragedy of everyday life through the practices of silence and refuge. These elements allow either the adaptation or the adjustment of the individual to coercive situations, without, however, relenting to them.4,6

Silence can also express an active passivity, an attitude taken up to try to face both, the difficulties and what is so imposing. The speeches allow us to understand the active passivity that appears in certain behaviors and attitudes of family members in this study.

The active passivity, which shows the dissatisfaction with the situations, was seen in other reports of the subjects evaluated, in which there is a silent attitude together with a resistance behavior, for example, getting up and leaving without saying anything; leaving with an angry facial expression, or remaining silent and quiet, without saying anything.

For the everyday life sociology maintaining a polite silence, a non-response in face of an aggressive or authoritative practice, is the assertion of an active passivity that is more subversive than any frontal action.3

Study shows psychological and social challenges revealed by cojuge, the patient and family members in coping with the disease in the family.16 This study confirms our incitement unveiled before the illness, and clearly shows the cunning, the double game and silence as resistance mechanisms to cope with the situation. It is concluded that the relationships of the family group are defined by both, the behaviors and the individuality of their members, being determined based on a specific historical context influenced by educational, economic, cultural, social, and religious issues, in addition to others. Families, according to the pre-modern, modern and post-modern contexts, show a range of specific models according to the historical period and to the changes occurred in people’s everyday life. The empirical data show that people develop their potential and reveal the resistance mechanisms according to the moment and situation experienced. Therefore, it is important to recognize the resistance mechanisms of the family members, revealed in face of a disease, as an aspect that will contribute to the health professional to give individualized and humanized assistance.

REFERENCES

CONCLUSION

Mecanismos de resistência de familiares diante da...