

Examining Family Stress: Theory and Research

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Abstract

Families develop shared worldviews called family paradigms, an ordered set of beliefs about the social world that are sensibly connected to the ways families actually respond to and interact with their social world and which help or hinder their problem solving abilities. Evidence suggests that these paradigms are generally built in and endure and regulate transactions with the family's social environment. Under stress, however, a family may alter its paradigm as a result of transactions with the environment. Using a family system paradigm, this presentation will examine the theoretical literature in search of a better way of understanding stress and its management in families. Multiple causes and multifaceted coping strategies, and the advantages and disadvantages of management strategies in families will be highlighted.

Keywords: Family stress, Family paradigms, Stress management, Coping strategies

Introduction

Families develop shared world views called family paradigms, an ordered set of beliefs about the social world that are sensibly connected to the ways families actually respond to and interact with their social world and which help or hinder their problem-solving abilities. Evidence suggests that these paradigms are generally built in and enduring and regulate transactions with the family's social environment. Under stress, however, a family may alter its paradigm as a result of transactions with the environment. The family's conceptualization of itself in relation to the world becomes more basic, clear, and simple. The paradigm comes to the foreground rather

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than being a background coordinator of daily events and actions. In some situation, a new paradigm may emerge and in turn becomes the background and orientation for daily problem-solving and the stabilizing force for the family under stress. It is important to note that face-to face relationships cannot go forward without reconciliation, integration, and shared development of the basic premises of these personal theories. The shared family world view is the result of the progressive integration of members' definitional systems into the family paradigm. In this presentation, three theoretical and research paradigms on family stress and resilience and their cross-cultural implications will be discussed.

Family Stress Theory

This theory was developed by Reuben Hill in 1949 when he studied the impact of separations and reunions on families after World War II. He described the interactions of a set of variables to explain the events leading up to a family crisis. According to Hill (1958; p. 143), there is a pattern to the formation of a family crisis:

A (the event) interacting with B (the family's crisis meeting resources) interacting with C (the definition the family makes of the event) produces X (the crisis).

Hill's studies firmly established family crisis as an area of interest and started a tradition of theoretical and empirical inquiry into family stress. Several theoretical articles on family stress appeared after Hill's (1949) first presentation of the ABCX Model (e.g., Hill & Hanson, 1964; Hill, 1958). It was, however, Burr's (1973) modification of the ABCX Model and synthesis of family stress research into a theoretical framework that revitalized an interest in the subject and provided the motivation for further theory-building.

Unlike Hill, who concentrated on factors B and C, Burr focused on X, the crisis, claiming there had been no systematic explanation of how and why the crisis varies. The X factor was redefined as the amount of crisis, the variation in the degree of disruption and disorganization that has come about from a family's inability to prevent change in the family system. Two concepts were considered critical in a family's reaction to crisis: (a) vulnerability, or ability to withstand the initial impact of a stressor depending on the family's resources; and (b) regenerative power, or the family's ability to recover following a crisis. In their "rethinking" of family stress theory Hansen and Johnson (1979) reviewed and critiqued Burr's model,

particularly unclear definitions, inconsistent conceptualization, and implications of the dysfunctional definition of crisis. In turn, they developed a new set of propositions to guide further research. The primary focus of this work was the factor C, definition of the situation, considered central to family interaction and communication under stress. The authors elaborated on McHugh's (1968) concepts of "emergence" and "relativity" to describe fluctuations in the family's definition, and developed new models and propositions to test their theory. Hansen and Johnson admitted that the explanatory and predictive power of their synthesis was untested, and recommended that further research incorporate some of their ideas.

Contemporary Family Stress Theory: The Double ABCX Model

The Double ABCX Model grew out of a concern for methodological and conceptual inadequacies in contemporary studies of family stress. In particular, emphasis has been placed on conceptualizing family stress as a dynamic process of adjustment. A post crisis stage has been added to the original pre-crisis model, representing ongoing adjustment following a crisis, which occurs when a family is unable to prevent change. Four factors represent the "Double" in the ABCX Model, and variability in the family's ability to recover: (a) pile-up of stressors; (b) family efforts to acquire new resources; (c) modifications of definition of the situation; and (d) results of coping strategies (McCubbin & Patterson, 1982). To portray family adjustment over time the Double ABCX Model has been imbedded in a larger framework, "family adjustment and adaptation response," or FAAR. In the Double ABCX Model family stress is defined as an imbalance in demands (the A factor: stressor event, related hardships, and prior strains), and capabilities or resources (the B factor). The family's definition (C factor) of the imbalance, however, influences its impact. When families define the imbalance positively (e.g., as an opportunity for growth) they experience eustress; when they view the situation as unpleasant they experience distress. Stress may never become a crisis if the family uses resources and definitions to resist change in the family system. When first confronted with stressors, coping strategies are used to resist the stressor. However, when the family is unable to balance demands and capabilities without making a change in its structure and interaction patterns, a crisis (X) occurs. Following a crisis, new coping strategies must be employed to enable the family to adapt, i.e., to reorganize and

regroup (restructure and consolidate) as new rules, patterns of communication, and roles are established. The outcome of family efforts to achieve a new balance varies' along a continuum from bonadaptation to maladaptation, depending on the "fit" between resources and demands at the individual, family, and community levels.

Family Stress and Coping Theory

Just as understanding of child resilience emerged from studies of stress and coping in children, family resilience can be examined from the perspective of family stress and coping theory (Boss, 2001; Hill, 1958; McCubbin, McCubbin & Thompson, 1995; McCubbin & Patterson, 1983; Patterson, 1988). The Family Adjustment and Adaptation Response (FAAR) Model (Patterson, 1988) emphasize the linkages between family stress theory and the family resilience perspective. In the FAAR Model, four central constructs are emphasized: families engage in active processes to balance family demands with family capabilities as these interact with family meanings to arrive at a level of family adjustment or adaptation (Patterson, 1988; 1993). Family demands are comprised of (a) normative and nonnormative stressors (discrete events of change); (b) ongoing family strains (unresolved, insidious tensions); and (c) daily hassles (minor disruptions of daily life). Family capabilities include (a) tangible and psychosocial resources (what the family has) and (b) coping behaviors (what the family does). There are some obvious parallels between risk factors (resilience language) and demands, as well as between protective factors and capabilities. Both demands and capabilities can emerge from three different levels of the ecosystem: (a) individual family members, (b) a family unit, and (c) from various community contexts. The diagnosis of a child's disabling condition would be an example of an individual level demand; marital conflict about how to manage the child's condition would be a family level demand; and community stigma about disability would be a community level demand. Parent education, family cohesiveness, and good health and education services are examples of capabilities at each of the three levels, which could be used to help manage the aforementioned demands. Developmental psychologists also have emphasized that the resilience process involves transactions between multiple systems in the ecological context and that both risk and protective factors can emerge within individuals, families, and/or

community contexts (Luthar, Cicchetti, & Becker, 2000). Among family stress theorists, Boss (2001) has emphasized the contexts of family stress and the need to take account of community and cultural contexts in which a family resides to understand why and how families are stressed, as well as to understand how families respond to stress.

Boundary Ambiguity

At any transition point, normative or nonnormative, a family must renegotiate its internal and external boundaries. These exits and entries constitute a challenge to the family's primary task of boundary maintenance and create stress for the family.

Since the 1940s, sociologists and family researchers have studied the ways families experience and manage stress. Boundary ambiguity has become a valuable concept in understanding why even healthy families sometimes struggle to do this well. Researcher and family therapist Pauline Boss defines boundary ambiguity as a state, resulting from either nonnormative or normative stressor events, in which family members are uncertain about who is in the family and who is out, or about who is performing which roles and tasks within the family system (Boss, 2002). In some stressful situations, the family cannot obtain the facts surrounding the troubling event. This degree of uncertainty—Is a missing member dead or alive? What will the course of a terminal illness be? It prevents the family from defining the situation clearly enough to know how to respond to it (Boss, 2002).

Cultural Differences in the Experience of Boundary Ambiguity

Although all families face the challenge of boundary maintenance, cultural value orientations affect how they perceive and respond to ambiguity and even how they may practice denial. First, families from different cultures hold different values about exits and entries themselves. In some cultures, for example, parents see themselves as failures if their children do not move away and become independent; in others, parents consider themselves failures if their children do. In some cultures, family interaction is relatively democratic; in other, hierarchy and parent-child distance are valued more highly than is open intergenerational communication. Exits and entries thus are assigned different meanings from one culture to another, and what may be considered ambiguous in one may not be in another.

Results

Clinical Implications

The family resilience perspective has much to offer the family science and therapy disciplines. Although, in many ways, the concepts that underlie it are already included in family stress theory, a focus on resilience draws greater attention to family success and competence. The knowledge derived from family resilience studies can contribute to the resiliency approach being used in practice settings. However, greater understanding of how families remain or become competent following exposure to significant risk will require rigor and precision in the methodology employed to capture these dynamic processes in families.

A family's ability to be resilient in the face of normative or significant risk is related not only to their internal relational processes but also to risks or opportunities in the social systems in their ecological context. Living in poverty and in crime-ridden, violent neighborhoods place families at high risk and contribute to their inability to satisfactorily accomplish their core functions. Risk processes in the family (marital conflict, child abuse, etc.) are more likely to emerge under these social conditions. The absence of needed community resources to support families in fulfilling their core functions further undermines family resilience. Public programs and policies, societal norms and values, and other community institutions shape the style and degree to which families are able to fulfill their functions, as well as their ability to acquire and develop new capabilities when challenged.

References

- Boss, P. (2001). *Family stress management*. Newbury Park, CA: Sage.
- Burr, W. 1973 *Theory Construction and the Sociology of the Family*. New York: Wiley and sons.
- Hansen, D. and Johnson, V. (1979) "Rethinking family stress theory: definitional aspects." Pp. 582-603 in W. Burr, P. Hill, F. I. Nye, and I. Reiss (Eds.), *Contemporary Theories about the Family* (Vol. 1). New York: The Free Press.
- Hill, R. (1958). Generic features of families under stress. *Social Casework*, 49, 139–150.
- Hill, R. and Hansen, D. (1964). "Families under stress." Pp. 782-822 in H. Christiansen (Ed.), *Handbook on Marriage and the Family*. Chicago: Rand McNally.

- Luthar, S., Cicchetti, D., & Becker, R. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71, 543–562.
- McCubbin, H., McCubbin, M., Patterson, J., Cauble, E. W., and Warwick, W. (1983) "CHIP: Coping health inventory for parents: An assessment of parental coping patterns in the case of the chronically ill child." *Journal of Marriage and the Family* 45 (May): 359-370.
- McCubbin, H., McCubbin, M., & Thompson, E. (1995). Resiliency in ethnic families: A conceptual model for predicting family adjustment and adaptation. In H. McCubbin, M. McCubbin, A. Thompson, & J. Fromer (Eds.), *Resiliency in ethnic minority families* (Vol. 1, pp. 3–48). Madison, WI: University of Wisconsin Press.
- McCubbin, H., & Patterson, J. (1982). Family adaptation to crises. In H. McCubbin, A. Cauble, & J. Patterson (Eds.), *Family stress, coping and social support*. Springfield, IL: C.C. Thomas.
- McHugh, P. (1968) *Defining the Situation: The Organization of Meaning in Social Interaction*. Indianapolis: Bobbs-Merril.
- Patterson, J. (1988). Families experiencing stress: The family adjustment and adaptation response model. *Family Systems Medicine*, 5(2), 202–237.
- Patterson, J. (1993). The role of family meanings in adaptation to chronic illness and disability. In A. Turnbull, J. Patterson, S. Behr, et al. (Eds.), *Cognitive coping research and developmental disabilities* (pp. 221–238). Baltimore: Brookes.