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Families Coping With Change

A Conceptual Overview

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Cynthia and David are in their early 60s and are the parents of four adult children. Until this year they were looking forward to retirement in 2 to 3 years. However, because of the economic turndown, their savings and investments have been drastically reduced, and their private business is barely surviving. Consequently, their lives have been filled with high levels of stress, and from all indications this will increase. For multiple reasons, the courts recently awarded them custody of their 4-year-old grandson. As a consequence, they are once again involved in securing babysitters, arranging play dates, enrolling a child in preschool, and driving a child to appropriate activities. In addition to these increased demands, last week they found out that David's parents, because of a lack of resources, will be coming to live with them. His parents are in their 90s and are very frail.

Stanley and Laurie were extremely excited about their adoption of a little girl from Bulgaria. They arrived at a major U.S. airport with their new daughter after a 16-hour flight, tired but happy. All the new daughter's grandparents (three sets as a result of divorce and remarriage) met them at the airport decked out in decorated hats and shirts and carrying many balloons. Naturally, the grandparents wanted to spend time with their new granddaughter, and although they stayed at a nearby hotel, for several days they spent every waking hour at Laurie and Stanley's house. The new parents were exhausted and had minimal time to spend alone with their daughter. This was a very exciting time, and they loved having their parents participate in the wonderful events, but they were relieved when the grandparents left and they could begin to establish a schedule for their new family.

Carlin is in a state of shock. He just learned that he is to be laid off after working for the same company for more than 20 years. He is very concerned about finding a new job; he is middle-aged,

unemployment rates are at an all-time high, and he is afraid his job skills may not be competitive in today's labor market. Sarah, his wife, is a teacher and her salary will probably cover most of their basic expenses, but he is still very worried, not only about finding another job but about expenses related to adequate health insurance, the new roof the house needs, and their two children in college. Carlin and Sarah know that at a minimum, they will have to cut back on their expenses significantly; and they may have to move to another location so that Carlin can secure a job.

Families increasingly experience a wide variety of stressors associated with both positive and negative events. Advances in technology, industrialization, urbanization, increased population density (including housing, traffic, and demand on the infrastructures), terrorism, and economic issues are frequently identified as making daily life more complicated and impersonal. Gender roles are blurred, and families are more diverse as a result of divorce, unwed parenthood, remarriage, immigration, and mobility. Add to these events ongoing natural disasters such as hurricanes, tornadoes, storms, floods, and earthquakes, as well as everyday stressors such as accidents and discrimination based on race, religious beliefs, gender, and sexual orientation. More recently, U.S. families are facing a constant sense of insecurity and stress due to the severe economic downturn in the global economy; a rising unemployment rate; sobering financial losses in pensions, investments, and savings accounts; disappearing benefits; and the reality of war in both Iraq and Afghanistan. When one considers the accumulation of these events, it quickly becomes apparent that stress is a part of everyday life.

Families were once viewed as havens for individuals who were stressed by external pressures, but today they are increasingly challenged to meet individual emotional needs. Complicating the matter is that many still hold the myth that happy families are (or should be) free from stress. Many believe it is acceptable to experience stress from outside families, that is, environment- and work-related stress, but not stress within families.

Families are often faced with many unique problems, not because of any identifiable crisis, event, or situation, but because of everyday societal change. For example, technology, which has facilitated an increasing life span, has also brought about a growing aged population with whom already overextended and geographically mobile families must cope. Young family members are contending with the realization that there may be fewer opportunities and resources available for them as compared to their parents and grandparents. In addition, the fluidity of family structures requires most families to deal with several family structural transitions during the life course (Price, McKenry, & Murphy, 2000; Teachman, Polonko, & Scanzoni, 1999).

All families experience stress as a result of change, whether change is "good" or "bad." The impact of change is dependent on the family's perception of the

situation as well as coping ability. Boss (1988, 2002, 2006) defines *family stress* as pressure or tension on the status quo; it is a disturbance of the family's steady state. Life transitions and events often provide an essential condition for psychological development, and family stress is perceived as inevitable and normal, or even desirable since people and, therefore, families, must develop, mature, and change over time. With change comes disturbance and pressure—what is termed *stress* (Boss, 2002). Changes affecting families also occur externally (e.g., unemployment, natural disasters, war, acts of terrorism), and these also create stress in family systems. Change becomes problematic only when the degree of stress in a family system reaches a level at which family members and/or the family system become dissatisfied or show symptoms of disturbance.

The Study of Family Stress and Change

In comparison with the long history of research in the general area of stress and coping, theoretical and clinical interest in family stress, problems, and coping is a rather recent phenomenon. Research on family stress and coping evolved gradually from various disciplines that have examined stress and coping from more than an individualistic perspective.

According to the *Oxford English Dictionary*, the term *stress* can be traced back to the early 14th century when stress had several distinct meanings, including hardship, adversity, and affliction (Rutter, 1983). Even among stress researchers today, stress is variably defined as a stimulus, an inferred inner state, and an observable response to a stimulus or situation; there is also debate concerning the extent to which stress is chemical, environmental, or psychological in nature (Frankenhaeuser, 1994; Lazarus & Folkman, 1984; Sarafino, 1990).

In the late 17th century, Hooke used the term *stress* in the context of physical science, although the usage was not made systematic until the early 19th century. Stress and strain were first conceived as a basis of ill health in the 19th century (Lazarus & Folkman, 1984). In the 20th century, Cannon (1932) laid the foundation for systematic research on the effects of stress in observations of bodily changes. He showed that stimuli associated with emotional arousal (e.g., pain, hunger, cold) caused changes in basic physiological functioning (Dohrenwend & Dohrenwend, 1974). Selye (1978) was the first researcher to define and measure stress adaptations in the human body. He defined stress as an orchestrated set of bodily defenses against any form of noxious stimuli (General Adaptation Syndrome). In the 1950s, social scientists became interested in his conceptualization of stress, and even today, Selye's work accounts for much of the scholarly interest in stress and coping (Lazarus & Folkman, 1984; Lovallo, 1997).

Meyer, in the 1930s, taught that life events may be an important component in the etiology of a disorder and that the most normal and necessary life events may be potential contributors to pathology (Dohrenwend & Dohrenwend,

1974). In the 1960s, Holmes and Rahe (1967) investigated life events and their connection to the onset and progression of illness. Through their Schedule of Recent Events, which includes many family-related events, Holmes and Rahe associated the accumulation of life changes and those of greater magnitude to a higher chance of illness, disease, or death.

In the social sciences, both sociology and psychology have long histories of study related to stress and coping. Sociologists Marx, Weber, and Durkheim wrote extensively about “alienation.” Alienation was conceptualized as synonymous with powerlessness, meaninglessness, and self-estrangement, clearly under the general rubric of stress (Lazarus & Folkman, 1984). In psychology, stress was implicit as an organizing framework for thinking about psychopathology, especially in the theorizing of Freud and, later, psychologically oriented writers. Freudian psychology highlighted the process of coping and established the basis for a developmental approach that considered the effect of life events on later development and gradual acquisition of resources over the life cycle. Early psychologists used anxiety to denote stress, and it was seen as a central component in psychopathology through the 1950s. The reinforcement-learning theorists (e.g., Spence, 1956) viewed anxiety as a classically conditioned response that led to unserviceable (pathological) habits of anxiety reduction. Existentialists (e.g., May, 1950) also focused on anxiety as a major barrier to self-actualization (Lazarus & Folkman, 1984). Developmentalists (e.g., Erickson, 1963) proposed various stage models that demand that a particular crisis be negotiated before an individual can cope with subsequent developmental stages. Personal coping resources accrued during the adolescent–young adult years are thought to be integrated into the self-concept and shape the process of coping throughout adulthood (Moos, 1986). Crisis theorists (e.g., Caplan, 1964) conceptualized these life changes as crises, with the assumption that disequilibrium may provide stress in the short run but can promote the development of new skills in the long run.

The study of family stress began at the University of Michigan and the University of Chicago during the 1930s and the upheavals of the Depression (Boss, 2002). Reuben Hill, referred to as the father of family stress research (Boss, 2006), was the first scholar to conceptualize family stress theory (Hill, 1949, 1971) when he developed the ABC-X model of family stress and his model of family crisis (Boss, 1988, 2002, 2006). A second generation of family stress researchers made major contributions to this basic model (e.g., Boss, 1988, 2002; Figley, 1978; McCubbin, 1979; McCubbin & McCubbin, 1988), and Boss addressed recent developments in the evolution and use of family stress theory (Boss, 2002, pp. 2–14). These include:

1. The introduction of the *mind-body-family connection*. In contrast to the measurements of life events, the emphasis is on the measurement of human reactivity during intensely stressful situations.

2. The reintroduction of *family resilience*. This is a process that implies growth within families becoming stronger for having had a stressful experience with greater emphasis on context.
3. Increased emphasis on the *role of spirituality and faith* in the management of family stress.
4. Increase in the recognition of *posttraumatic stress disorder*; increased recognition that an individual's response to an isolated event such as rape may be the same as the response to a mass catastrophe (war, torture, act of nature).
5. Increased *use of "disaster" teams* that are deployed into an arena immediately after a catastrophe; more emphasis is placed on crisis instead of stress.
6. Increased emphasis on *stress resulting from caring for an individual* with long-term illness or disability, including the elderly.
7. Recognition that the *demands created by balancing work and family* (time bind, parents and children rarely being home, overwork) result in high stress levels in many families.
8. Shift to emphasis on individuals' and families' *perceptions, interpretations, and beliefs* about stress producing situations/events.
9. Adaptation of *social constructionism* in working with stressed families. Focus is on stories and processes that guide distressed families including how they reframe, restory, and construct a new narrative that helps families manage stress.
10. Increase in use of *narrative analysis*. Distressed people tell their story, their truth, and interpretation of what they believe about their situation.

Family Stress Theory

Social Systems Perspective

Family theorists typically have used a social systems approach in their conceptualization of families under stress. As a result, families are viewed as living organisms with both symbolic and real structures. They have boundaries to maintain and a variety of instrumental and expressive functions to perform to ensure growth and survival (Boss, 1988). As with any social system, families strive to maintain a steady state. Families are the products of both subsystems (e.g., individual members, dyads) and suprasystems (e.g., community, culture, nation).

Although most general stress theories have focused on only the individual, the primary interest of family stress theory is the entire family unit. Systems theory states that the system is more than the sum of its parts (Boss, 2006; Hall & Fagan, 1968). In terms of families, this means that the collection of family members is not only a specific number of people but also an aggregate of

particular relationships and shared memories, successes, failures, and aspirations (Boss, 1988, 2002). However, systems theory also involves studying the individual to more completely understand a family's response to stress.

A social systems approach allows the researcher to focus beyond the family and the individual to the wider social system (suprasystem). Families do not live in isolation; they are part of the larger social context. This external environment in which the family is embedded is referred to as the "ecosystem," according to social systems theory. This ecosystem consists of historical, cultural, economic, genetic, and developmental influences (Boss, 1988, 2002). Thus, the family's response to a stressor event is influenced by living in a particular historical period, its cultural identification, the economic conditions of society, its genetic stamina and resistance, and its stage in the family life cycle.

ABC-X Model

The foundation for a social systems model of family stress lies in Hill's (1949) classic research on war-induced separation and reunion. Although his ABC-X formulation has been expanded (Boss, 1988, 2002; Burr, Klein, & Associates, 1994; McCubbin & Patterson, 1982; Patterson, 1988), it has withstood careful assessment and is still the basis for analyzing family stress and coping (Boss, 2002, 2006). This family stress framework may be stated as follows: A (the provoking or stressor event of sufficient magnitude to result in change in a family)-interacting with B (the family's resources or strengths)-interacting with C (the definition or meaning attached to the event by the family)-produces X (stress or crisis). The main idea is that the X factor is influenced by several other moderating phenomena. Stress or crisis is not seen as inherent in the event itself, but conceptually as a function of the response of the disturbed family to the stressor (Boss, 1988, 2002, 2006; Burr, 1973; Hill, 1949). (See Figure 1.1.)

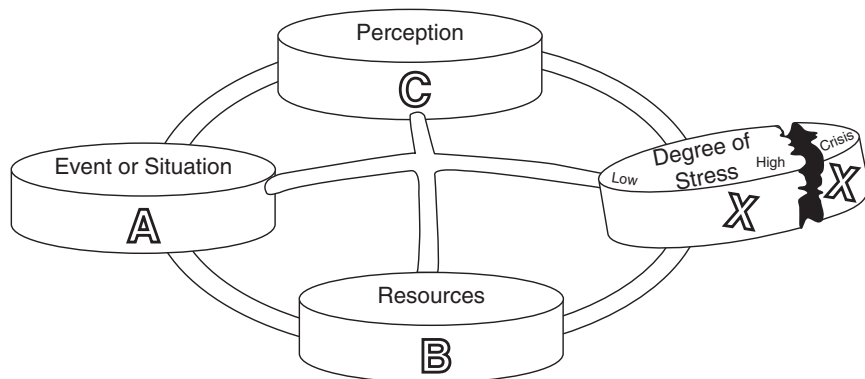


Figure 1.1 ABC-X Model of Family Crisis

SOURCE: Hill, R. (1958). Social stresses on the family: Generic features of families under stress. *Social Casework*, 39, 139–150. Reprinted with permission from *Families in Society* (www.familiesinsociety.org), published by the Alliance for Children and Families.

Stressor Events

A stressor event is an occurrence that provokes a variable amount of change in the family system. Anything that changes some aspect of the system such as the boundaries, structures, goals, processes, roles, or values can produce stress (Boss, 2002). This variable denotes something different than the routine changes within a system that are expected as part of its regular, ordinary operation. This variable is dichotomous; that is, an event either changes or does not change (Burr, 1982). The stressor event by definition has the potential to raise the family's level of stress. However, the degree of stress is dependent on the magnitude of the event as well as other moderating factors to be discussed. Also, both positive and negative events can be stressors. Life events research has clearly indicated that normal and/or positive changes can increase an individual's risk for illness. Finally, stressor events do not necessarily increase stress levels to the point of crisis; the family's stress level can be managed and the family can return to a new equilibrium.

Researchers have attempted to describe various types of stressor events (e.g., Boss, 1988, 2002; Hansen & Hill, 1964; Rees & Smyer, 1983). Lipman-Blumen (1975) has described family stressor events in terms of nine dimensions: (1) internal versus external, (2) pervasive versus bounded, (3) precipitate onset versus gradual onset, (4) intense versus mild, (5) transitory versus chronic, (6) random versus expectable, (7) natural generation versus artificial generation, (8) scarcity versus surplus, and (9) perceived solvable versus perceived insolvable. (These dimensions are defined in Table 1.1.) The type of event may be highly correlated with the family's ability to manage stress. Other researchers (e.g., McCubbin, Patterson, & Wilson, 1981; Pearlin & Schooler, 1978) have classified stressor events in terms of their intensity or hardship on the family.

One dichotomous classification that is often used by family stress researchers and clinicians is normal or predictable events versus nonnormative or unpredictable or situational events. Normal events are part of everyday life and represent transitions inherent in the family life cycle, such as the birth or death of a family member, child's school entry, and retirement. Normative stressor events by definition are of short duration. Although predictable and normal, such life cycle events have the potential of changing a family's level of stress because they disturb the system equilibrium. These events lead to crisis only if the family does not adapt to the changes brought about by these events (Carter & McGoldrick, 1989).

Nonnormative events are the product of some unique situation that could not be predicted and is not likely to be repeated. Examples of nonnormative events would include natural disasters, loss of a job, or an automobile accident. Unexpected but welcome events that are not disastrous may also be stressful for families, such as a promotion or winning the lottery. Although these events are positive, they do change or disturb the family's routine and thus have the potential of raising the family's level of stress (Boss, 1988).

There has been much recent interest in the study of isolated versus accumulated stressors. Specifically, life event scholars (e.g., Holmes & Rahe, 1967;

Table 1.1 Ten Dimensions of Family Stressor Events

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- (1) *Internality versus externality*: Refers to whether the source of the crisis was internal or external to the social system affected.
 - (2) *Pervasiveness versus boundedness*: Refers to the degree to which the crisis affects the entire system or only a limited part.
 - (3) *Precipitate onset versus gradual onset*: Marks the degree of suddenness with which the crisis occurred, that is, without or with warning.
 - (4) *Intensity versus mildness*: Involves the degree of severity of the crisis.
 - (5) *Transitoriness versus chronicity*: Refers to the degree to which the crisis represents a short- or long-term problem.
 - (6) *Randomness versus expectability*: Marks the degree to which the crisis could be expected or predicted.
 - (7) *Natural generation versus artificial generation*: Connotes the distinction between crises that arise from natural conditions and those that come about through technological or other human-made effects.
 - (8) *Scarcity versus surplus*: Refers to the degree to which the crisis represents a shortage or overabundance of vital commodities—human, material, and nonmaterial.
 - (9) *Perceived solvability versus perceived insolvability*: Suggests the degree to which those individuals involved in the crisis believe the crisis is open to reversal or some level of resolution.
 - (10) *Substantive content*: This dimension differs from the previous nine in that it subsumes a set of subject areas, each of which may be regarded as a separate continuum graded from low to high. Using this dimension, the analyst can determine whether the substantive nature of the crisis is primarily in the political, economic, moral, social, religious, health, or sexual domain or any combination thereof.
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SOURCE: Adapted from Lipman-Blumen (1975).

McCubbin et al., 1981; Sarason, Johnson, & Siegel, 1978) suggest that it is the accumulation of several stressor events rather than the nature of one isolated event that determines a family's level of stress. The clustering of stressor events (normative and/or nonnormative) is termed *stress pileup*. An event rarely happens to a family in total isolation. Normal developmental changes are always taking place and nonnormative events tend to result in other stressors; for example, losing a job may result in a family having to move, or marital disruption. By focusing on only certain events or stressors, researchers may fail to capture the complexity in the range and clustering of stressors (Pearlin, 1991).

More recently, researchers have offered an alternative perspective on stressor events. Instead of assessing major life events that tend to be extreme in nature and are fairly low in base-rate occurrence (Fisher, Fagot, & Leve, 1998), researchers are focusing on daily stressors or hassles and ongoing strains and their relationship to stress outcomes. Daily hassles not only

parallel major life events in their potential to engender stress, but they have an even stronger relationship than traditional life event measures in predicting physical health (Derogatics & Coons, 1993; Gruen, 1993).

Not all stressor events, however, are clear-cut. As a result, a state of ambiguity is created. Boss (1999, 2006) addressed the issue of *ambiguous loss* resulting from incongruency between physical and psychological/emotional presence/absence. There are two major types of ambiguous loss: (1) a person being physically absent but psychologically or emotionally present (missing children, divorce, a family member in prison, soldiers missing in action, immigrants) and (2) when a person is physically present but psychologically/emotionally absent (a person that has Alzheimer's disease or a chronic mental illness, chronic substance abuse; a spouse preoccupied with work or another issue) (Boss, 1999). Ambiguous loss not only disrupts family functioning, it results in a lack of clarity regarding who is "in" and who is "outside" the family, as well as appropriate roles for family members. This type of ambiguity is the most stressful situation a person and/or family can experience. Boss attributed this high level of stress to the following factors: (a) People are unable to problem solve because they do not know whether the problem is final or temporary; (b) the ambiguity prevents people from adjusting by reorganizing their relationship with the loved one; (c) families are denied social rituals (e.g., funeral, death certificate) that usually support a clear loss; (d) friends/neighbors tend to withdraw rather than give support; and (e) ambiguous loss may continue for a long time; therefore, those who experience it become physically and emotionally exhausted (Boss, 1999, pp. 7–8).

Additional factors that could influence families' perceptions in a stressful situation include *spirituality, values and beliefs, culture, and stage of the family life cycle*. As earlier noted, there has been an increased emphasis on the role of spirituality, beliefs, and faith on family stress. Boss (2002, 2006) discussed several cases where a strong sense of spirituality results in a more positive attitude, hope, and optimism when families are confronted with a stressful situation. Faith can be a major coping mechanism resulting in families turning to their religious institutions and communities more than cognitive problem solving (Tix & Frazier, 1998, in Boss, 2002). Of course, spirituality can be experienced within or outside formal religious institutions. Regardless of the source, spiritual associations can bring a sense of meaning, wholeness, and connection with others. For example, religious communities provide guidelines for living and scripted ways to make major life transitions, as well as congregational support in times of need (Walsh, 2006).

The belief system and/or value orientation of families may also influence their perceptions of stressful events. For example, families with a *mastery orientation* may believe they can solve any problem and control just about anything that could happen to them. In contrast, families with a *fatalistic orientation* are more likely to believe that everything is determined by a higher power; therefore, all events are predetermined and not under their control. As a consequence, a highly fatalistic orientation could be a barrier to

coping because it encourages passivity, and active coping strategies have been found to be more effective than passive strategies (Boss, 2002).

The third factor, *stage of the family life cycle*, points to the variation in structure, composition, interaction (between family members as well as between the family and the outside culture), and resources in families (Price, McKenry, & Murphy, 2000). Consequently, families at different stages of the life cycle vary in their response to stressful situations. This is particularly relevant as families move from one stage of development to another during normative transitions. It is during these periods of change (a child is born, children leave home, a family member dies) that families are likely to experience high levels of stress as they adjust rules, roles, and patterns of behavior (Aldous, 1996). This stress is also impacted by whether the transition is “on time” or “off time” as well as expected or unexpected (Rodgers & White, 1993). In general, “off time” (e.g., a child dies before a parent dies) and unexpected (a family member dies in an accident) transitions create periods of greater stress. This greater stress could, at least partially, be attributed to the family members’ perception of the stressful situation as being overwhelming or unfair.

Resources

The family’s resources buffer or moderate the impact of the stressor event on the family’s level of stress. Hansen (1965) uses the term *vulnerability* to denote the difference in families’ physical and emotional responses to stressful stimuli (Gore & Colten, 1991). This moderator denotes variation in a family’s ability to prevent a stressor event or change from creating disruptiveness in the system (Burr, 1973). When family members have sufficient and appropriate resources, they are less likely to view a stressful situation as problematic. McCubbin and Patterson (1985) defined *resources* as traits, characteristics, or abilities of (a) individual family members, (b) the family system, and (c) the community that can be used to meet the demands of a stressor event. Individual or personal resources include financial (economic well-being), educational (problem solving, information), health (physical and emotional well-being), and psychological (self-esteem) resources.

The term *family system resources* refers to internal attributes of the family unit that protect the family from the impact of stressors and facilitate family adaptation during family stress and/or crisis. Family cohesion (bonds of unity) and adaptability (ability to change) (Olson, Russell, & Sprenkle, 1979, 1983) have received the most research attention. These two dimensions are the major axes of the Circumplex Model (Olson et al., 1979). This model suggests that families who function moderately along the dimensions of cohesion and adaptability are likely to make a more successful adjustment to stress (Olson, Russell, & Sprenkle, 1980). However, it should be noted that the family literature contains studies and writings that qualify or refute the curvilinear interpretation of the relationship between adaptability and

cohesion and effective functioning; instead, these studies support a linear relationship between these two dimensions and effective outcomes (Anderson & Gavazzi, 1990).

Community resources refer to those capabilities of people or institutions outside the family upon which the family can draw for dealing with stress. Social support is one of the most important community resources, although it can, of course, be provided by individual family members. Social support may be viewed as information disseminated to facilitate problem solving and as the development of new social contacts who provide help and assistance. Social support offers information at an interpersonal level that provides (a) emotional support, (b) esteem support, and (c) network support (Cobb, 1976). In general, social support serves as a protector against the effects of stressors and promotes recovery from stress or crisis. Increasingly, the concept of community resources has been broadened to include the resources of cultural groups; for example, ethnic minority families are thought to be characterized by more elaborate and efficient patterns of social support (Hill, 1999; McCubbin et al., 1998).

Definition of the Event/Perceptions

The impact of the stressor event on the family's level of stress is also moderated by the definition or meaning the family gives to the event. This variable is also synonymous with family appraisal, perception, and assessment of the event. Thus, subjective definitions can vary from viewing circumstances as a challenge and an opportunity for growth to the negative view that things are hopeless, too difficult, or unmanageable (McCubbin & Patterson, 1985). Empirical findings suggest that an individual's cognitive appraisal of life events strongly influences the response (Lazarus & Launier, 1978) and may be the most important component in determining an individual's or family's response to a stressor event (Boss, 2002).

This concept has a long tradition in social psychology in terms of the self-fulfilling prophecy that if something is perceived as real, it is real in its consequences (Burr, 1982). Families who are able to redefine a stressor event more positively (i.e., reframe it) appear to be better able to cope and adapt. By redefining, families are able to (a) clarify the issues, hardships, and tasks to render them more manageable and responsive to problem-solving efforts; (b) decrease the intensity of the emotional burdens associated with stressors; and (c) encourage the family unit to carry on with its fundamental tasks of promoting individual members' social and emotional development (McCubbin & Patterson, 1985).

Lazarus and Launier (1978) discussed the impact of an individual's learned cognitive attributional style on the stress response; this work has been applied to the study of families as well (e.g., Boss, 1988). For example, a family may respond to an event in terms of "learned helplessness," thereby increasing their vulnerability due to low self-esteem and feelings of

hopelessness. Such a family would react to the unemployment of a spouse by failing to look for another job or failing to support that family member in the search for another job.

It has long been thought that men and women inherently differed in their susceptibility to and reaction to stressor events, with women being more likely to experience stress from relationship-oriented events and men, from external events that threatened the family or their good-provider role (Gore & Colten, 1991). Thoits (1991) uses identity theory to suggest that men and women are more likely to experience stress when an important identity is threatened, such as one's traditional family gender role. Yet evidence has accumulated that challenges the notion of gender differences in response to stressor events. With changing gender roles, men's distress is as affected by relationships with partners as is women's, and women's distress is as affected by the quality of their job experiences as is men's (Barnett, 1993).

Stress and Crisis

According to social systems theory, stress represents a change in the family's steady state and is the response of the family to the demands experienced as a result of a stressor event. Stress is not inherently bad; it becomes problematic when the degree of stress in the family system reaches a level at which the family becomes disrupted or individual members become dissatisfied or display physical or emotional symptoms. The degree of stress ultimately depends on the family's definition of the stressor event as well as the adequacy of the family's resources to meet the demands of the change associated with the stressor event.

The terms *stress* and *crisis* have been used inconsistently in the literature. In fact, many researchers have failed to make a distinction between the two. Boss (1988, 2006) makes a useful distinction as she defines crisis as (a) a disturbance in the equilibrium that is so overwhelming, (b) pressure that is so severe, or (c) change that is so acute that the family system is blocked, immobilized, and incapacitated. When a family is in a crisis state, at least for a time, it does not function adequately. Family boundaries are no longer maintained, customary roles and tasks are no longer performed, and family members are no longer functioning at optimal physical or psychological levels. The family has thus reached a state of acute disequilibrium and is immobilized.

Family stress, on the other hand, is merely a state of changed or disturbed equilibrium. Family stress therefore is a continuous variable (degree of stress), whereas family crisis is a dichotomous variable (either in crisis or not). A crisis does not have to permanently break up the family system. It may only temporarily immobilize the family system and then lead to a different level of functioning than that experienced before the stress level escalated to the point of crisis. Many family systems, in fact, become stronger after they have experienced and recovered from crisis (Boss, 1988).

Coping

Family stress researchers have increasingly shifted their attention from crisis and family dysfunction to the process of coping. Researchers have become more interested in explaining why some families are better able to manage and endure stressor events rather than documenting the frequency and severity of such events. In terms of intervention, this represents a change from crisis intervention to prevention (Boss, 1988; McCubbin et al., 1980).

The study of family coping has drawn heavily from cognitive psychology (e.g., Lazarus, 1966, 1976; Lazarus & Folkman, 1984) as well as sociology (e.g., Pearlin & Schooler, 1978). *Cognitive coping strategies* refers to the ways in which individual family members alter their subjective perceptions of stressful events. Sociological theories of coping emphasize a wide variety of actions directed at either changing the stressful situation or alleviating distress by manipulating the social environment (McCubbin et al., 1980). Thus, family coping has been conceptualized in terms of three types of responses: (1) direct action (e.g., acquiring resources, learning new skills), (2) intrapsychic (e.g., reframing the problem), or (3) controlling the emotions generated by the stressor (e.g., social support, use of alcohol) (Boss, 1988; Lazarus & Folkman, 1984; Pearlin & Schooler, 1978). These responses can be used individually, consecutively, or, more commonly, in various combinations. Specific coping strategies are not inherently adaptive or maladaptive; they are very much situation specific. Flexible access to a range of responses appears to be more effective than the use of any one response (Moos, 1986).

Coping interacts with both family resources and perceptions as defined by the “B” and “C” factors of the ABC-X model. However, coping actions are different than resources and perceptions. Coping represents what people do, that is, their concrete efforts to deal with a stressor (Pearlin & Schooler, 1978). Having a resource or a perception of an event does not imply whether or how a family will react (Boss, 1988; Lazarus & Folkman, 1984).

Although coping is sometimes equated with adaptational success (i.e., a product), from a family systems perspective, coping is a process, not an outcome per se. Coping refers to all efforts expended to manage a stressor regardless of the effect (Lazarus & Folkman, 1984). Thus, the family strategy of coping is not instantly created but is progressively modified over time. Because the family is a system, coping behavior involves the management of various dimensions of family life simultaneously: (a) maintaining satisfactory internal conditions for communication and family organization, (b) promoting member independence and self-esteem, (c) maintaining family bonds of coherence and unity, (d) maintaining and developing social supports in transactions with the community, and (e) maintaining some efforts to control the impact of the stressor and the amount of change in the family unit (McCubbin et al., 1980). Coping is thus a process of achieving balance in the family system that facilitates organization and unity and promotes individual growth and development. This is consistent with systems theory, which suggests that the

families that most effectively cope with stress are strong as a unit as well as in individual members (Buckley, 1967).

Boss (1988) cautions that coping should not be perceived as maintaining the status quo; rather, the active managing of stress should lead to progressively new levels of organization as systems are naturally inclined toward greater complexity. In fact, sometimes it is better for a family to “fail to cope” even if that precipitates a crisis. After the crisis, the family can reorganize into a better-functioning system. For example, a marital separation may be very painful for a family, but it may be necessary to allow the family to grow in a different, more productive direction.

In addition to serving as a barrier to change and growth, coping also can serve as a source of stress. There are three ways that coping itself may be a source of additional hardship (Roskies & Lazarus, 1980). One way is by indirect damage to the family system. This occurs when a family member inadvertently behaves in such a way as to put the family in a disadvantaged position. For example, a father may become ill from overwork to ease his family’s economic stress. The second way that coping can serve as a source of stress is through direct damage to the family system. For example, family members may use an addictive behavior or violence to personally cope, but this will be disruptive to the family system. The third way that coping may increase family stress is by interfering with additional adaptive behaviors that could help preserve the family. For example, denial of a problem may preclude getting necessary help and otherwise addressing the stressor event (McCubbin et al., 1980).

Adaptation

Another major interest of family stress researchers in recent years has been the assessment of how families are able to “recover” from stress or crisis. Drawing from Hansen’s (1965) work, Burr (1973) described this process in terms of a family’s “regenerative power,” denoting a family’s ability to recover from stress or crisis. According to McCubbin and Patterson (1982), the purpose of postcrisis or poststress adjustment is to reduce or eliminate the disruptiveness in the family system and restore homeostasis. However, these authors also note that family disruption has the potential of maintaining family relations and stimulating desirable change. Because system theorists (e.g., Buckley, 1967) hold that all systems naturally evolve toward greater complexity, it may be inferred that family systems initiate and capitalize on externally produced change in order to grow. Therefore, reduction of stress or crisis alone is an incomplete index of a family’s adjustment to crisis or stress.

McCubbin and Patterson (1982) use the term *adaptation* to describe a desirable outcome of a crisis or stressful state. *Family adaptation* is defined as the degree to which the family system alters its internal functions (behaviors, rules, roles, perceptions) and/or external reality to achieve a system (individual or family)–environment fit. Adaptation is achieved through reciprocal

relationships in which (a) system demands (or needs) are met by resources from the environment and (b) environmental demands are satisfied through system resources (Hansen & Hill, 1964).

According to McCubbin and Patterson (1982), demands include normative and nonnormative stressor events as well as the needs of individuals (e.g., intimacy), families (e.g., launching of children), and social institutions and communities (e.g., governmental authority). Resources include individual (e.g., education, psychological stability), family (e.g., cohesion, adaptability), and environmental (social support, medical services) attributes. Adaptation is different than adjustment. Adjustment is a short-term response by a family that changes the situation only momentarily. Adaptation implies a change in the family system that evolves over a longer period of time or is intended to have long-term consequences involving changes in family roles, rules, patterns of interaction, and perceptions (McCubbin, Cauble, & Patterson, 1982).

McCubbin and Patterson (1982) have expanded Hill's (1949) ABC-X model by adding postcrisis/poststress factors to explain how families achieve a satisfactory adaptation to stress or crisis. Their model consists of the ABC-X model followed by their "double ABC-X" configuration. (See Figure 1.2.)

McCubbin and Patterson's (1982) "Double A" factor refers to the stressor pileup in the family system, and this includes three types of stressors. The family must deal with (1) unresolved aspects of the initial stressor event, (2) the changes and events that occur regardless of the initial stressor (e.g., changes in family membership), and (3) the consequences of the family's efforts to cope

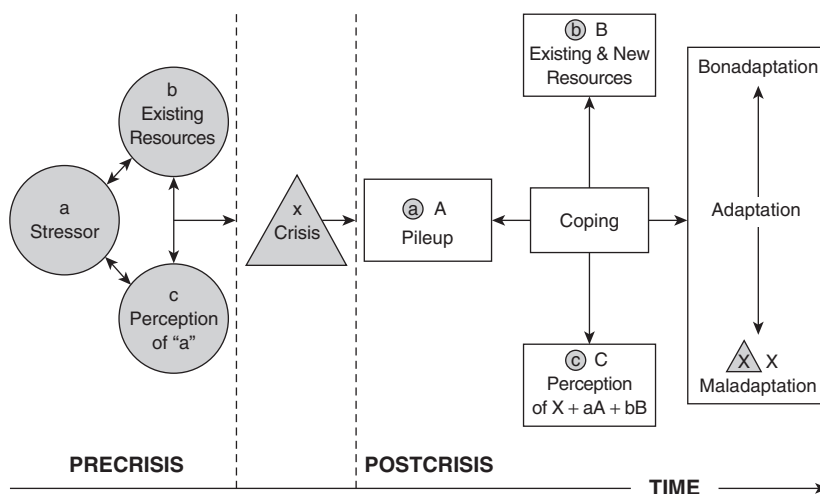


Figure 1.2 Double ABC-X Model

SOURCE: McCubbin, H. I., & Patterson, J. M. (1982). Family adaptation to crisis. In H. I. McCubbin, A. E. Cauble, & J. M. Patterson (Eds.), *Family stress, coping, and social support* (pp. 26–47). Reprinted by permission of Charles C Thomas, Publisher, Springfield, IL.

with the hardships of the situation (e.g., intrafamily role changes). The family's resources, the "Double B" factor, are of two types. The first are those resources already available to the family and that minimize the impact of the initial stressor. The second are those coping resources (personal, family, and social) that are strengthened or developed in response to the stress or crisis situation. The "Double C" factor refers to (a) the perception of the initial stressor event and (b) the perception of the stress or crisis. The perception of the stress or crisis situation includes the family's view of the stressor and related hardships and the pileup of events as well as the meaning families attach to the total family situation. The family's postcrisis/poststress perceptions involve religious beliefs, redefining (reframing) the situation, and endowing the situation with meaning.

The "Double X" factor includes the original family crisis/stress response and subsequent adaptation. Family crisis/stress is at one end of the continuum of family adjustment over time, and family adaptation is the outcome at the other end of the continuum.

Boss (1988, 2002) cautions against the use of the term *adaptation* to describe the optimal outcome of a stressful or crisis state. She contends that the family literature appears to assume that calm, serenity, orderliness, and stability are the desired ends for family life. Like Hoffman (1981), Boss maintains that systems naturally experience discontinuous change through the life cycle in the process of growth. If adaptation is valued over conflict and change, then families are limited to a perspective that promotes adjustment to the stressor event at the expense of individual or family change. Boss contends that sometimes dramatic change must occur for individual and family well-being, including breaking family rules, changing boundaries, and revolution within the system. For example, an abused wife may need to leave or at least dramatically change her family system to achieve a sense of well-being for herself and perhaps for other family members. Therefore, in order to avoid circular reasoning, Boss prefers use of the term *managing* to refer to the coping process that results from the family's reaction to stress or crisis. Specifically, "unless crisis occurs, the family is managing its level of stress. Managing high stress and being resilient are indeed the alternative outcome to falling in crisis" (Boss, 2002, p. 89).

Patterson (1988) has further revised the double ABC-X model to include the community system as well as the individual and family systems. This complex form of analysis requires that the (a) stressors, (b) resources, and (c) meanings/definitions of the individual, family, and community systems as well as their interactions be considered. Patterson's extension of the double ABC-X model is consistent with biopsychosocial systems models that attempt to deal with the complex interplay and multiplicative interactions among biological, psychological, and social phenomena regarding health and illness (McDaniel, Hepworth, & Doherty, 1992). For example, research on domestic violence has noted the role of testosterone and alcohol use as it interacts with other variables in increasing the risk of men's abuse of a female partner (Hillbrand & Pallone, 1994).

Resiliency

More recently, family scholars have begun to assess family stress outcomes from a family strengths perspective (Bonanno, 2004). Based on studies of children and families who thrive under adversity, family researchers have applied the concept of *resiliency* to family adaptation (Boss, 2006; Cowan, Cowan, & Schulz, 1996; Elder & Conger, 2000; McCubbin et al., 1998; Vandsburger, Harrigan & Biggerstaff, 2008; Walsh, 2006). In the early 1970s, scholars used the term *competence* to describe how people thrived in the face of adversity. Today, this term has been replaced by *resilience* (Boss, 2006). Resilience has its roots in family stress, and is both an individual and family phenomenon. It has been defined as “the capacity to rebound from adversity strengthened and more resourceful . . . an active process of endurance, self-righting, and growth in response to crisis and challenges (Walsh, 2006, p. 4). In addition, Boss (2006) described resiliency as the ability to stretch (like elastic) or flex (like a suspension bridge) in response to the pressures and strains of life. In general, resiliency refers to the coping strengths of those families that seem to benefit from the challenges of adversity; the ability to successfully deal with a stressor event usually results in outcomes as good or better than those that would have been obtained in the absence of the adversity (Cicchetti & Garmezy, 1993; Hawley & DeHaan, 1996; Rutter, 1987). These coping strengths are thought to be characteristics acquired through repeated successful mastery of stressor events (Masten & Garmezy, 1985).

Rather than presenting a pathological view, or deficient model, of families, the emphasis is on family wellness and strengths (Hawley & DeHaan, 1996; McCubbin & McCubbin, 1988; Walsh, 2006). In contrast to Hill’s (1949) model, which hypothesized that following a crisis, families would return to functioning at a level below or above their previous level, resilient families are expected to return to a level at or above their previous level.

At this point, it appears that the focus on family resilience represents a combination of family strengths and family stress literature. Perhaps the most valuable conceptual contribution has been the recognition of a family ethos, that is, a schema, worldview, and/or sense of coherence that describes a shared set of values and attitudes held by a family unit that serves as the core of the family’s resilience (Hawley & DeHaan, 1996, 2003). Scholars have moved beyond viewing resiliency as a characteristic of an individual to providing a framework for viewing resiliency as a quality of families (Hawley & DeHaan, 2003).

Conclusion

Families today are being challenged with an unbelievable number of changes and problems that have the capacity to produce stress and crisis. After many years of focusing on individual stress responses, researchers have begun

systematic assessments of whole-family responses, often by focusing on resiliency. The major theoretical paradigm that has been used to study family responses to stressor events has been the social systems model. Developing from Hill's (1949) work on the effect of wartime separation, various characteristics of stressor events as well as the mediating effects of perceptions and resources have been studied, suggesting that there is nothing inherent in the event per se that is stressful or crisis producing. More recently, family stress research has moved beyond the linear relationship of stressor, buffer/moderator, and response to look at coping and adaptation as a process that continues over time, that is, how families actually manage stress and/or crisis. Coping is conceptualized as an ongoing process that facilitates family organization but also promotes individual growth. Increasingly, the outcome of interest is adaptation, that is, the ability of a family to make needed changes and ultimately recover from stress and crisis. Adaptation, like coping, however, should not be perceived as a definitive end product because families are always growing and changing. Furthermore, the serenity and stability synonymous with adaptation are not always functional for family members, and for some families, the response to a stressor event may result in a higher level of functioning. Finally, emphasis on the resilience of families has received increasing attention. By acknowledging the ability of families to successfully manage stressful events, scholars are broadening our understanding of how some families thrive in the face of adversity.

Suggested Readings and Internet Resources _____

- Boss, P. (2006). *Loss, trauma, and resilience: Therapeutic work with ambiguous loss*. New York: W. W. Norton and Company.
- Hill, R. (1949). *Families under stress*. Westport, CT: Greenwood.
- McCubbin, H., & McCubbin, M. (1988). Typology of resilient families: Emerging roles of social class and ethnicity. *Family Relations*, 37, 247–254.

eXtension (an interactive learning environment delivering research-based knowledge from land-grant universities across the United States) offers a variety of publications related to managing family stress:

Family Caregiving: <http://www.extension.org/family%20caregiving>

Managing Financial Stress: http://www.extension.org/pages/Managing_Stress

Disaster Preparedness: http://www.extension.org/pages/Stress_and_Decision_Making_After_a_Disaster

Loss and Grief: http://www.extension.org/pages/Loss_and_Grief

The University of Minnesota Extension Services offers a series of publications on how families can positively manage stress: <http://www.extension.umn.edu/topics.html?topic=3&subtopic=85>.

Michigan State University Extension offers a series of bulletins developed to assist families in family stress and coping issues: <http://www.fcs.msue.msu.edu/ff/familystress.html>

The University of Illinois Extension offers several factsheets on recognizing and handling family stress: <http://urbanext.illinois.edu/familyworks/stress-00.html>

The Utah State University Cooperative Extension offers a series of publications to assist families in managing the effects of natural and human-caused disasters: <http://extension.usu.edu/ueden/htm/family>

The American Psychological Association offers publications for members and nonmembers on topics related to family stress: www.apa.org (Search: Stress).

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