

# Families Coping With Change

## A Conceptual Overview

Christine A. Price, Kevin R. Bush,  
Sharon J. Price, and Patrick C. McKenry

Families increasingly experience a wide variety of stressors associated with both positive and negative events. Industrialization, urbanization, increased population density (e.g., housing, traffic, demand on infrastructures), community violence, threats of terrorism, advances in technology (e.g., e-mails, texts, social media), financial challenges, and everyday hassles (e.g., errands, commuting, appointments) are frequently identified as making daily life more complicated and impersonal. Family roles are more fluid than the past, resulting in fewer social norms and a lack of support. Families have become more diverse as a result of changing family structures (e.g. divorce, single-parent families, lesbian, gay, bisexual, and queer-parent families, custodial grandfamilies, remarriage, cohabitation, intergenerational reciprocity), immigration, economics (e.g., increased cost of living and two earner families), geographic mobility, and other macro level factors. In addition to natural disasters (e.g., hurricanes, tornadoes, earthquakes) and societal stressors (e.g., discrimination based on race, religious beliefs, gender, and sexual orientation), U.S. families are facing the reality of wars involving American troops overseas, the threat of nuclear attack, and the reality of an ever-changing, and often divisive, political landscape. Additionally, contemporary families are still experiencing economic insecurity and stress due to the Great Recession and the associated economic downturn in the global economy (see Bartholomae & Fox, Chapter 11 in this volume). Sobering financial losses in pensions, investments, and savings accounts, employment instability, income volatility, and rising unsecured debt contribute to the financial struggle of individuals and families. Consider the accumulation of these events and it quickly becomes apparent that stress is a part of everyday life.

Families often face many unique problems, not because of one identifiable crisis, event, or situation, but because of continuous everyday societal change. Technology, for example, has enhanced everyday life in many ways but it has also brought about an increasingly overextended population that is bombarded with ongoing tweets, texts, and work-related demands. From an economic standpoint, members of the younger generation, in many families, are struggling with an increase in cost of living and overwhelming debt as they establish their independence. They are also faced with the reality that their life experiences may involve fewer opportunities and resources as compared to their parents and grandparents.

At the same time, due to medical advancements improving longevity and quality of life as we age, a demographic of adult children is faced with the undefined responsibilities of caregiving for their elders. Finally, the fluidity of family structures requires most families deal with cumulative, and sometime coinciding structural transitions during the life course (Teachman, Tedrow, & Kim, 2013; Walsh, 2013b).

All families experience stress as a result of change or pressure to change, whether or not change is “good” or “bad.” The impact of change or the pressure to change depends on the family’s perception of the situation as well as their coping abilities (Boss, 2013; Lavee, 2013; McCubbin & McCubbin, 2013). Boss (1988, 2002) defines *family stress* as pressure or tension on the status quo—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 in the family system and pressure, what is termed *stress* (Boss, 2002; Boss, Bryant, & Mancini, 2017; Lavee, 2013). Changes affecting families also occur externally (e.g., unemployment, natural disasters, war, acts of terrorism), and these also create stress in family systems. This instability becomes problematic only when the degree of stress in a family system reaches a level at which family members becomes dissatisfied or show symptoms of decreased functioning (i.e., ability to carry out regular routines and interactions that maintain stability).

## The Study of Family Stress and Change

---

Compared to the long history of research on stress and coping, theoretical and clinical interest in family-related stress is a rather recent phenomenon. Research on family stress and coping gradually evolved from various disciplines that have examined stress and coping from primarily 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 (e.g., Oken, Chamine, & Wakeland, 2015). There is also an ongoing debate concerning the extent to which stress is chemical, environmental, or psychological in nature (Folkman, 2013; Lazarus, 2006; Sarafino, 2006).

In the late 17th century, Hooke used *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 and identified the term *General Adaptation Syndrome* (GAS) to describe the body's short- and long-term reaction to stress. In the 1950s, social scientists became interested in his conceptualization of stress, and Selye's work has remained influential in the stress and coping literature (e.g., Hatfield & Polomano, 2012; Lazarus & Folkman, 1984).

Meyer, in the 1930s, taught that life events may be an important component in the etiology of a disorder and 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 Social Readjustment Rating Scale (SRSS), 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 the 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 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 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, often referred to as the father of family stress research (Boss, 2006), was the first scholar to conceptualize family stress theory (Hill, 1949, 1958, 1971), when he developed the ABC-X model of family stress and his model of family crisis (Boss, 1988, 2002, 2006; Lavee, 2013). Subsequent generations of family stress researchers

have made major contributions to this basic model (e.g., Boss, 1988, 2002, 2013; McCubbin, 1979; McCubbin & McCubbin, 1988; McCubbin & McCubbin, 2013). Developments in family stress theory include emphases on (a) family strengths or resilience (Walsh, 2006; Henry, Morris, & Harrist, 2015); (b) culture, race or ethnicity (Emmen et al., 2013; McCubbin, & McCubbin, 2013); (c) spirituality and faith (Boss, 2006; Walsh, 2013a); and ambiguous loss (Boss, 2002, 2013).

## Family Stress Theory

---

### Ecological/Systems Perspective

Family theorists typically have used an ecological or systems approach (e.g., Bronfenbrenner, 1979) 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 (Anderson, Sabatelli, & Kosutic, 2013; Boss, 1988, 2013). As any social system, families strive to maintain equilibrium. 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 only on 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 (Anderson et al., 2013; Boss, 2006; Hall & Fagan, 1968). In terms of families, this means that a 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 (Anderson et al., 2013; Boss, 1988, 2002). At the same time, systems theory also involves studying the individual to more completely understand a family's response to stress.

An ecological/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 ecological theory. This ecosystem consists of historical, cultural, economic, genetic, and developmental influences (Anderson et al., 2013; 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

---

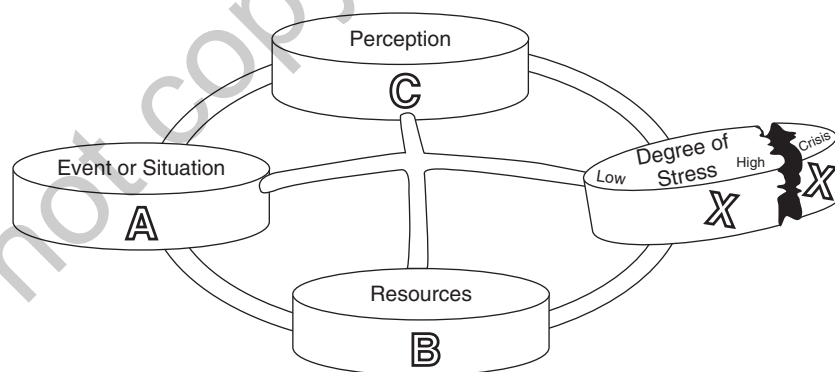
The foundation for a systemic model of family stress lies in Hill's (1949) classic research on war-induced separation and reunion. Although his ABC-X formulation has been expanded (e.g., Boss, 1988, 2002, 2013; Burr, Klein, & Associates, 1994;

McCubbin, & McCubbin, 2013; McCubbin & Patterson, 1982; Walsh, 2013a), it has withstood careful assessment and is still the basis for analyzing family stress and coping (Boss, 2002, 2006; Darling, Senatore, & Strachan, 2012; Lavee, 2013). This family stress framework can be described as encompassing the following components: 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 system to the stressor (Boss, 1988, 2002, 2006; Burr, 1973; Hill, 1949; Lavee, 2013; Walsh, 2013a; See Figure 1.1.).

### Stressor Events

A stressor event is an occurrence that provokes a variable amount of change in the family system. Anything that alters some aspect of the system, such as the boundaries, structures, goals, processes, roles, or values, can produce stress (Boss, 2002; Burr, 1973; Lavee, 2013; Walsh, 2013a). 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

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](http://www.familiesinsociety.org)), published by the Alliance for Children and Families.

negative life events can be stressors. Research has clearly indicated that normal or positive life changes can increase an individual's risk for illness. Finally, stressor events do not always increase stress levels to the point of crisis. In some situations, the family's stress level can be successfully 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; McCubbin & McCubbin, 2013). Lipman-Blumen (1975) described family stressor events in terms of eight dimensions—these have been updated by adding two additional dimensions based on the research literature: (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, (9) perceived insolvable versus perceived solvable (e.g., ambiguous loss), and (10) substantive content (See Table 1.1 for definitions). 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 events. Normal events are part of everyday life and represent transitions inherent in the family life cycle, such as birth or death of a family member, child's school entry, and retirement. These normative stressor events by definition are of short duration. Although predictable, such life-cycle events have the potential of changing a family's level of stress because they disturb the system equilibrium (Anderson et al., 2013; Henry et al., 2015). 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 unique situations that could not be predicted and are 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; Lavee, 2013).

There has been much interest in the study of isolated versus accumulated stressors. Specifically, life event scholars (e.g., Holmes & Rahe, 1967; McCubbin & McCubbin, 2013; McCubbin et al., 1981) 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, loss of job may result in a family having to move or marital disruption. By focusing only on certain

Table 1.1 Ten Dimensions of Family Stressor Events

- 1) *Internal versus External* refers to whether the source of the crisis was internal or external to the social system affected.
- 2) *Pervasive versus Bounded* 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, i.e., without or with warning.
- 4) *Intense versus Mild* involves the degree of severity of the crisis.
- 5) *Transitory versus Chronic* refers to the degree to which the crisis represents a short- or long-term problem.
- 6) *Random versus Expectable* 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 insolvable versus Perceived solvable* 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, one can determine whether the substantive nature of the crisis is primarily in the political, economic, moral, social, religious, health, or sexual domains or any combination thereof.

Source: Adapted from Lipman-Blumen, J. (1975). A crisis framework applied to macrosociological family changes: Marriage, divorce, and occupational trends associated with World War II. *Journal of Marriage and the Family*, 27, 889–902.

events or stressors, researchers may fail to capture the complexity in the range and clustering of stressors (Pearlin, 1991; Yeh, Arora, & Wu, 2006).

Researchers have also offered alternative perspectives on stressor events. One such alternative is focusing on daily stressors and their relationship to stress outcomes (e.g., Darling et al., 2012; Harris, Marett, & Harris, 2011; Serido, Almeida, & Wethington, 2004; For review, see Helms, Postler, & Demo, Chapter 2 in this volume). Daily hassles not only parallel major life events in their potential to engender stress, but have an even stronger relationship than traditional life events measures in affecting relationship satisfaction, subjective well-being, and predicting physical health (Falconier et al., 2014; Graf et al., 2016).

Not all stressor events, however, are straightforward or easily understood. As a result, a state of ambiguity is created. Boss (1999, 2006, 2013; Boss, Bryant, & Mancini, 2017) addressed the issue of *ambiguous loss* that can result

from incongruity between physical and psychological/emotional presence or 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 or emotionally absent (a person that has Alzheimer's disease or a chronic mental illness, chronic substance abuse; a spouse preoccupied with work; Boss, 1999, 2013). 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 what are appropriate roles for family members. This type of ambiguity is the most stressful situation a person or family can experience. Boss attributed this high level of stress to (a) people feeling unable to problem solve because they do not know whether the problem is final or temporary, (b) the ambiguity preventing people from adjusting by reorganizing their relationship with the loved one, (c) families denying societal rituals associated with loss (e.g., funerals, death certificate) that in turn impede their ability to grieve, (d) friends or neighbors withdrawing rather than giving support, and (e) the extended continuation of ambiguous loss which leads to the physical and emotional exhaustion of affected family members (Boss, 1999, pp. 7–8).

## 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; Henry et al., 2015). 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 resources which include self-esteem, optimism, sense of coherence, sense of mastery, and a positive family schema or ethnic identity (Everson, Darling, Herzog, Figley, & King, 2017; Garrard, Fennell, & Wilson, 2017; Lavee, 2013; McCubbin & McCubbin, 2013).

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 or crisis. Family cohesion (bonds of unity) and adaptability (ability to change) (Olson, Russell, & Sprenkle, 1979, 1983; Patterson, 2002) have received the most research attention (Lavee, 2013). 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).

Community resources refer to those capabilities of people or institutions outside the family upon which the family can draw from to deal with stress (Boss, Bryant, & Mancini, 2017). Social support is one of the most important community resources, such as informal support from friends, neighbors and colleagues, as well as formal support from community institutions (Lavee, 2013). Social support may be viewed as informational in terms of facilitating problem solving and as tangible in the development of social contacts who provide help and assistance. 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 (Emmen et al., 2013; Hill, 1999; McCubbin, Futrell, Thompson & Thompson, 1998; McCubbin, & McCubbin, 2013; Yeh et al., 2006) as well as those offered within established neighborhoods and communities (Distelberg & Taylor, 2015; Lum et al., 2016).

### Definition of the Event/Perceptions

The impact of the stressor event on the family's level of stress is 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 (Lavee, 2013; 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; Hennon et al., 2009).

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 member's social and emotional development (Lavee, 2013; McCubbin & McCubbin, 2013; McCubbin & Patterson, 1985).

Additional factors which could influence families' perceptions in a stressful situation include *spirituality, values and beliefs, culture, and stage of the family life cycle* (e.g., Emmen et al., 2013; McCubbin & McCubbin, 2013; Walsh, 2013a; Yeh et al., 2006). As noted earlier, 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 promoting family resilience (Martin, Distelberg, & Elahad, 2015) and causing families to turn to their religious institutions and communities more than cognitive problem solving (Walsh, 2013a). 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, 2013a).

The belief system or value orientation of families may also influence their perceptions of stressful events. Families with a *mastery orientation* may believe they can solve any problem and control just about anything that could happen to them. For example, a recent study found that adolescent mastery orientation served to increase health promotion behaviors in teens despite family stress (Kwon & Wickrama, 2014). 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. This 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 (e.g., Boss, 2002; Yeh et al., 2006). The influence of belief and value orientations can also be mediated by culture (McCubbin & McCubbin, 2013; Yeh et al., 2006).

Culture influences the family stress process through (1) values or value orientations and (2) minority and immigrant status—both of which influence perceptions, coping strategies, and resources (Emmen et al., 2013; Folkman & Moskowitz, 2004; Yeh et al., 2006; Walsh, 2013a). Researchers of individual models of coping have made some strides in identifying how cultural values and social norms influence coping strategies. Scholars in this area have asserted that coping is not dualistic (e.g., Lazarus & Folkman, 1984) with only action oriented coping strategies resulting in positive outcomes, but rather cultural context also plays a part (Folkman & Moskowitz, 2004; Lam & Zane, 2004; Yeh et al., 2006). While taking direct action (e.g., confronting others, standing up for oneself) is a preferred and effective strategy in individualist cultural contexts; in collectivistic contexts, the emphasis on group harmony and interdependence leads individuals to enact coping strategies that focus on changing themselves to meet the needs of the group, instead of attempting to change the situation (Lam & Zane, 2004; Yeh et al., 2006). Scholars examining the cultural context of stress and family stress have focused on models that account for the depth and complexity of cultural and ethnic influences on family systems related to family stress and resilience. For example, McCubbin and McCubbin (2013) created the Relational and Resilience Theory of Ethnic Family Systems, which was designed to identify and validate competencies among ethnic/cultural families that facilitate successful adaptation in the context of family stress. Similarly, McNeil Smith and Landor (2018) developed the sociocultural family stress model to help better understand the experience of

family stress within racially and ethnically diverse families (see James, Barrios, Roy, & Lee, Chapter 12 in this volume).

The *stage of the family life cycle* can also influence a family's perceptions during a stressful event. Where the family currently exists in 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 of that family (Henry et al., 2015; Price et al., 2000; Walsh, 2013b). 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; Carter & McGoldrick, 2005). This stress is also affected 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 is diagnosed with a terminal illness) transitions create periods of greater stress. The significance of this stress could, at least partially, be attributed to the family members' perception of the stressful situation as being overwhelming or unfair.

## Stress and Crisis

According to systems theory, stress represents a change in the family's steady state. Stress is the response of the family system to the demands experienced as a result of a stressor event. Stress itself 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 overwhelming, (b) pressure that is so severe, or (c) change that is so acute that the family system is blocked 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, Walsh, 2013b).

## 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 (e.g., Henry et al., 2015). In terms of intervention, this represents a change from crisis intervention to prevention (Boss, 1988; McCubbin et al., 1980; McCubbin & McCubbin, 2013).

The study of family coping has drawn heavily from cognitive psychology (e.g., Lazarus, 2006; Lazarus & Folkman, 1984) as well as sociology (e.g., Pearlin & Schooler, 1978; McCubbin, 2006). *Cognitive coping strategies* refer 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; McCubbin & McCubbin, 2013). Thus family coping has been conceptualized in terms of three types of responses: (a) direct action (e.g., acquiring resources, learning new skills); (b) intrapsychic (e.g., reframing the problem); or (c) controlling the emotions generated by the stressor (e.g., social support, use of alcohol; Boss, 1988; Lazarus, 2006; 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 (e.g., Folkman & Moskowitz, 2004; Yeh et al., 2006). Flexible access to a range of responses appears to be more effective than the use of any one response (Moos, 1986; Yeh et al., 2006). 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—their concrete efforts to deal with a stressor (Folkman & Moskowitz, 2004; 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; Yeh et al., 2006).

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, 2006; 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) maintenance of family bonds of coherence and unity, (d) maintenance and development of social supports in transactions with the community, and (e) maintenance of 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 and family system growth and development (McCubbin & McCubbin, 2013). This is consistent with systems theory, which suggests that the families who most effectively cope with stress are strong as a unit as well as in individual members (Anderson et al., 2013; 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, maladaptive forms of coping 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. In this instance, a family member may use an addictive behavior or violence to personally cope with stress, but this behavior will be disruptive, even harmful, 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, the denial of a problem may preclude getting necessary help and otherwise addressing the stressor event (Lavee, 2013; McCubbin et al., 1980).

## Adaptation

Another major interest of family stress researchers 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. Accordingly, the purpose of adjustment following a crisis or stressful event is to reduce or eliminate the disruption in the family system and restore homeostasis (Lavee, 2013; McCubbin & McCubbin, 2013; McCubbin & Patterson, 1982). However, these authors also note that family stress has the potential of maintaining family relations and stimulating desirable change. Because system theorists (e.g., Anderson et al., 2013; 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) or external reality to achieve a system (individual or family)-environment fit (Henry et al., 2015). 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; McCubbin & McCubbin, 2013).

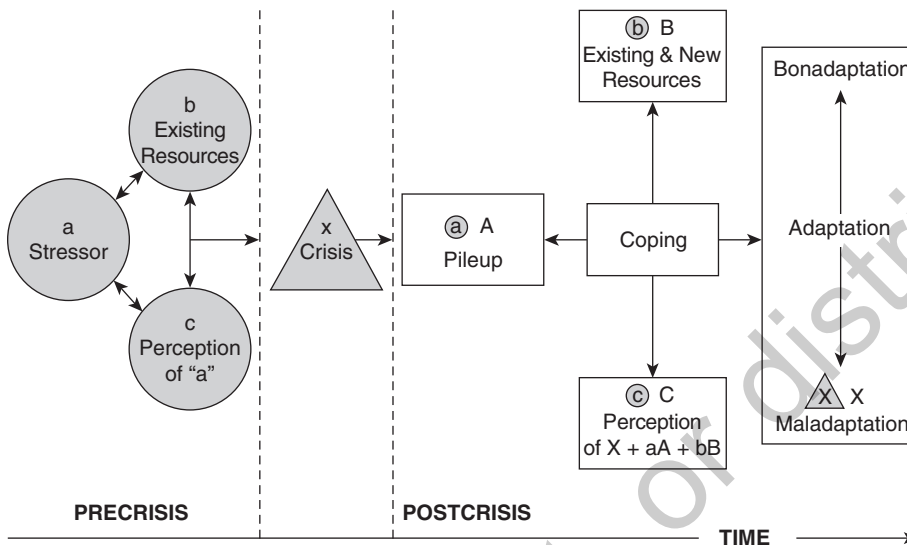
Demands on the family system include normative and nonnormative stressor events as well as the needs of individuals (e.g., intimacy), families (e.g., launching of children), and social institutions and communities (e.g., governmental authority; Lavee, 2013; McCubbin & Patterson, 1982). Resources include 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 or modification by a family that changes the situation temporarily. 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 (Henry et al., 2015; McCubbin, Cauble, & Patterson, 1982).

McCubbin and Patterson (1982) 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 unresolved aspects of the initial stressor event, the changes and events that occur regardless of the initial stressor (e.g., changes in family membership), and the consequences of the family's efforts to cope 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 or poststress perceptions involve values and 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. The xX factor represents a continuum ranging from

Figure 1.2 Double ABC-X Model



Source: From 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.

maladaptation (family crisis/stress) on one end to bonadaptation (family adjustment over time) on the other; and illustrates the extent of fit between individual family members, the family system, and the community in which they are imbedded (Lavee, 2013).

Boss (1988, 2002) has cautioned 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 into crisis” (Boss, 2002, p. 89).

Patterson (1988) revised the Double ABC-X model to include the community system as well as the individual and family system. 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 (e.g., Masten & Monn, 2015; Repetti, Robles, & Reynolds, 2011). A few examples include research on parental coping in the context of child illness (Didericksen, Muse, & Aamar, 2019) and research linking marital conflict, children’s stress reactivity (e.g., cortisol and alpha-amylase) and children’s emotional and behavioral regulation strategies (Koss et al., 2014).

## Resilience

Resilience has its roots in family stress and is both an individual and family phenomena. 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, resiliency is referred to as the ability to stretch (like elastic) or flex (like a suspension bridge) in response to the pressures and strains of life (Boss, Bryant, & Mancini, 2017). In general, resilient families possess coping strengths that enable them to benefit from the challenges of adversity. The ability to successfully deal with a stressor event actually results in outcomes as good or better than those that would have been obtained in the absence of the adversity (Cicchetti & Garnezy, 1993; Hawley & DeHaan, 2003; Henry et al., 2015).

While early research and theorizing about the impact of stress on families focused mainly on the adverse effects of stressor events of families, more recent scholarship and theorizing have emphasized family resilience (Distelberg & Taylor, 2015; Henry et al., 2015; Lavee, 2013; Martin et al., 2015). 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; Henry et al., 2015). Following the family resilience model (FRM)—when family risk interacts with family protection and vulnerability in such ways that result in short-term and long-term family system adaptation, family resilience is present (Henry et al., 2015). Henry and colleagues (2015) describe the FRM as consisting of four key elements: (1) the presence of family risk, (2) family protection, (3) family vulnerability, and (4) short-term adjustment and long-term adaptation. Several key principles from individual resilience theories are applied, including



variables that serve as protective or promotive functions in one circumstance, yet serve as risks or vulnerabilities in others (e.g., across cultural contexts).

Rather than a pathological view, or deficient model of families, the emphasis is on family wellness and strengths (Hawley & DeHaan, 2003; McCubbin & McCubbin, 1988, 2013; Walsh, 2006, 2013b). In contrast to Hill's (1949) original 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 (Henry et al., 2015). A valuable conceptual contribution from the family resilience literature has been the recognition of a family ethos (i.e., a schema, world view, or sense of coherence) which 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, 2003; McCubbin, 2006; McCubbin & McCubbin, 2013).

## Conclusion

---

Families today are being challenged with a compelling 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. Major theoretical paradigms that have been used to study family responses to stressor events include human ecology models (e.g., Bronfenbrenner, 1979) and family systems models (e.g., Anderson et al., 2013). 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 or moderator, and response to look at coping and adaptation as a process that continues over time—that is, how families actually manage stress 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. Further, 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.

## REFERENCES

- Aldous, J. C. (1996). *Family careers: Rethinking the developmental perspective*. Thousand Oaks, CA: SAGE.
- Anderson, S.A., & Gavazzi, S.M. (1990). A test of the Olson Circumplex Model: Examining its curvilinear assumption and the presence of extreme types. *Family Process*, 29, 309–324. <https://doi.org/10.1111/j.1545-5300.1990.00309.x>
- Anderson, S.A., Sabatelli, R. M., & Kosutic, I. (2013). Systemic and ecological qualities of families. In G. W. Peterson & K. R. Bush (Eds.), *Handbook of marriage and the family* (3rd ed., pp. 121–138). New York, NY: Springer.
- Boss, P. G. (1988). *Family stress management*. Newbury Park, CA: SAGE.
- Boss, P. G. (1999). *Ambiguous loss*. Cambridge: Harvard University Press.
- Boss, P. G. (2002). *Family stress management: A contextual approach* (2nd ed.). Thousand Oaks, CA: SAGE.
- Boss, P. G. (2006). *Loss, trauma, and resilience: Therapeutic work with ambiguous loss*. New York, NY: Norton.
- Boss, P. G. (2013). Resilience as tolerance for ambiguity. In D. S. Becvar (Ed.), *Handbook of family resilience* (pp. 285–297). New York, NY: Springer.
- Boss, P. G., Bryant, C. M., & Mancini, J. A. (2017). *Family stress management: A contextual approach*. Thousand Oaks, CA: SAGE.
- Brody, L. (1999). *Gender, emotion and the family*. Cambridge, MA: Harvard University Press.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard University Press.
- Buckley, W. (1967). *Sociology and modern systems theory*. Englewood Cliffs, NJ: Prentice Hall.
- Burr, W. R. (1973). *Theory construction and the sociology of the family*. New York, NY: Wiley.
- Burr, W. R. (1982). Families under stress. In H. I. McCubbin, A. E. Cauble, & J. M. Patterson (Eds.), *Family stress, coping, and social support* (pp. 5–25). Springfield, IL: Charles C Thomas.
- Burr, W. R., Klein, S. R., & Associates. (1994). *Reexamining family stress: New theory and research*. Thousand Oaks, CA: SAGE.
- Cannon, W. B. (1932). *The wisdom of the body*. New York, NY: Norton.
- Caplan, G. (1964). *Principles of preventive psychiatry*. New York, NY: Basic Books.
- Carter, B., & McGoldrick, M. (1989). Overview: The changing family life cycle—A framework for family therapy. In B. Carter & M. McGoldrick (Eds.), *The changing family life cycle: A framework for family therapy* (pp. 3–28). Boston, MA: Allyn & Bacon.
- Carter, B., & McGoldrick, M. (2005). *The expanded family life cycle: Individual, family, and social perspectives*. Boston, MA: Pearson.
- Cicchetti, D., & Garmezy, N. (1993). Prospects and promises in the study of resilience. *Developmental and Psychopathology*, 5, 497–502. <https://doi.org/10.1017/S0954579400006118>
- Darling, C. A., Senatore, N., & Strachan, J. (2012). Fathers of children with disabilities: Stress and life satisfaction. *Stress and Health: Journal of The International Society for the Investigation of Stress*, 28(4), 269–278. <https://doi.org/10.1002/smi.1427>
- Didericksen, K.W., Muse, A., & Amar, R. (2019). Rethinking parental coping with child health: A proposed theoretical model. *Marriage & Family Review*, 55(5), 423–446. <https://doi.org/10.1080/01494929.2018.1501631>
- Distelberg, B., & Taylor, S. (2015). The roles of social support and family resilience in accessing

- healthcare and employment resources among families living in traditional public housing communities. *Child & Family Social Work*, 20, 494–506. <https://doi.org/10.1111/cfs.12098>
- Dohrenwend, B. S., & Dohrenwend, B. P. (1974). *Stressful life events: Their nature and effects*. New York, NY: Wiley.
- Emmen, R. G., Malda, M., Mesman, J., van Ijzendoorn, M. H., Prevo, M. L., & Yenniad, N. (2013). Socioeconomic status and parenting in ethnic minority families: Testing a minority family stress model. *Journal of Family Psychology*, 27(6), 896–904. <https://doi.org/10.1037/a0034693>
- Erikson, E. H. (1963). *Childhood and society* (2nd ed.). New York, NY: Norton.
- Everson, R. B., Darling, C. A., Herzog, J. R., Figley, C.R., & King, D. (2017). Quality of life among US Army spouses during the Iraq war. *Journal of Family Social Work*, 20(2), 124–143. <https://doi.org/10.1080/10522158.2017.1279578>
- Falconier, M. K., Nussbeck, F., Bodenmann, G., Schneider, H., & Bradbury, T. (2014). Stress from daily hassles in couples: Its effects on intradyadic stress, relationship satisfaction, and physical and psychological well-being. *Journal of Marital and Family Therapy*, Advance online publication. <https://doi.org/10.1111/jmft.12073>
- Folkman, S. (2013). Stress, coping, and hope. In B. I. Carr & J. Steel (Eds.), *Psychological aspects of cancer: A guide to emotional and psychological consequences of cancer, their causes, and their management* (pp. 119–127). New York, NY: Springer.
- Folkman, S., & Moskowitz, J. T. (2004). Coping: Pitfalls and promise. *Annual Review of Psychology*, 55, 745–774. <https://doi.org/10.1146/annurev.psych.55.090902.141456>
- Garrard, E. D., Fennell, K. M., & Wilson, C. (2017). “We’re completely back to normal, but I’d say it’s a new normal”: A qualitative exploration of adaptive functioning in rural families following a parental cancer diagnosis. *Support Care Cancer*, 25, 3561–3568. <https://doi.org/10.1007/s00520-017-3785-6>
- Gore, S., & Colten, M. E. (1991). Gender, stress and distress: Social-relational influences. In J. Eckenrode (Ed.), *The social context of coping*. New York, NY: Plenum.
- Graf, A. S., Ramsey, M. A., Patrick, J. H., & Gentzler, A. L. (2016). Dark storm clouds and rays of sunshine: Profiles of negative and positive rumination about daily hassles and uplifts. *Journal of Happiness Studies*, 17, 2257–2276. <https://doi.org/10.1007/s10902-015-9693-x>
- Hall, A. D., & Fagan, R. E. (1968). Definition of system. In W. Buckley (Ed.), *Modern systems research for the behavioral scientist* (pp. 81–92). Chicago, IL: Aldine.
- Hansen, D. A. (1965). Personal and positional influence in formal groups: Propositions and theory for research on family vulnerability to stress. *Social Forces*, 44, 202–210. <https://doi.org/10.1093/sf/44.2.202>
- Hansen, D. A., & Hill, R. (1964). Families under stress. In H. Christensen (Ed.), *Handbook of marriage and the family* (pp. 215–295). Chicago, IL: Rand McNally.
- Harris, J. K., Marett, K., & Harris, R. B. (2011). Technology-related pressure and work-family conflict: Main effects and an examination of moderating variables. *Journal of Applied Social Psychology*, 41(9), 2077–2103. <https://doi.org/10.1111/j.1559-1816.2011.00805.x>
- Hatfield, L. A., & Polomano, R. C. (2012). Infant distress: Moving toward concept clarity. *Clinical Nursing Research: An International Journal*, 21(2), 164–182. <https://doi.org/10.1177/1054773811410601>
- Hawley, D. R., & DeHaan, L. (2003). Toward a definition of family resilience: Integrating life-span and family perspectives. In P. G. Boss (Ed.),

*Family stress: Classic and contemporary readings* (pp. 57–70). Thousand Oaks, CA: SAGE.

Hennon, C. B., Newsome, W. S., Peterson, G. W., Wilson, S. M., Radina, M. E., & Hildenbrand, B. (2009). Poverty, stress, resiliency: Using the MRM model for understanding poverty related family stress. In C. A. Broussard & A. L. Joseph (Eds.), *Family poverty in diverse contexts* (pp. 187–202). New York, NY: Routledge.

Henry, C. S., Morris, A. S., & Harrist, A. W. (2015). Family resilience: Moving into the third wave. *Family Relations: An Interdisciplinary Journal of Applied Family Studies*, 64(1), 22–43. <https://doi.org/10.1111/fare.12106>

Hill, R. (1949). *Families under stress*. Westport, CT: Greenwood.

Hill, R. (1958). Generic features of families under stress. *Social Casework*, 39, 139–150.

Hill, R. (1971). *Families under stress*. Westport, CT: Greenwood. (Original work published in 1949)

Hill, R. (1999). *The strengths of African American families: Twenty-five years later*. New York, NY: University Press of America.

Hillbrand, M., & Pallone, N. J. (1994). *The psychobiology of aggression: Engines, measurement, control*. New York, NY: Haworth.

Hoffman, L. (1981). *Foundation of family therapy: A conceptual framework for systemic change*. New York, NY: Basic Books.

Holmes, T. H., & Rahe, R. H. (1967). The social readjustment rating scale. *Journal of Psychosomatic Research*, 11, 213–218.

Koss, K. J., George, M. R. W., Cummings, E. M., Davies, P. T., El-Sheikh, M., & Cicchetti, D. (2014). Asymmetry in children's salivary cortisol and alpha-amylase in the context of marital conflict: Links to children's emotional security. *Developmental Psychobiology*, 56, 836–849. <https://doi.org/10.1002/dev.21156>

Kwon, J. A., & Wickrama, K. S. (2014). Linking family economic pressure and supportive parenting to adolescent health behaviors: Two developmental pathways leading to health promoting and health risk behaviors. *Journal of Youth and Adolescence*, 43(7), 1176–1190. <https://doi.org/10.1007/s10964-013-0060-0>

Lam, A. G., & Zane, N. W. S. (2004). Ethnic differences in coping with interpersonal stressors. *Journal of Cross-Cultural Psychology*, 35, 446–459. <https://doi.org/10.1177/0022022104266108>

Lavee, Y. (2013). Stress processes in families and couples. In G. W. Peterson & K. R. Bush (Eds), *Handbook of marriage and family* (3rd ed., pp. 159–176). New York, NY: Springer

Lazarus, R. S. (2006). Emotions and interpersonal relationships: Toward a person-centered conceptualization of emotions and coping. *Journal of Personality*, 74(1), 9–46. <https://doi.org/10.1111/j.1467-6494.2005.00368.x>

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York, NY: Springer.

Lazarus, R. S., & Launier, R. (1978). Stress-related transactions between person and environment. In L. A. Pervin & M. Lewis (Eds.), *Perspectives in interactional psychology* (pp. 360–392). New York, NY: Plenum.

Lipman-Blumen, J. (1975). A crisis framework applied to macrosociological family changes: Marriage, divorce, and occupational trends associated with World War II. *Journal of Marriage and the Family*, 27, 889–902. <https://www.jstor.org/stable/350840>

Lum, T. Y. S., Lou, V. W. Q., Chen, Y., Wong, G., Hao, L., & Tong, T. (2016). Neighborhood support and aging-in-place preference among low-incomes elderly Chinese city-dwellers. *Journals of Gerontology Series B: Psychological Science & Social Sciences*, 71(1), 98–105. <https://doi.org/10.1093/geronb/gbu154>

Martin, A. S., Distelberg, B. J., & Elahad, J. A. (2015). The relationships between family

- resilience and aging successfully. *American Journal of Family Therapy*, 43, 163–179.
- Masten, A. S., & Monn, A. R. (2015). Child and family resilience: Parallels and multilevel dynamics. *Family Relations*, 64, 5–21. <https://doi.org/10.1080/01926187.2014.988593>
- May, R. (1950). *The meaning of anxiety*. New York, NY: Ronald.
- McCubbin, H. I. (1979). Integrating coping behavior in family stress theory. *Journal of Marriage and the Family*, 41, 237–244. <https://doi.org/10.1111/j.1741-3737.2002.00349.x>
- McCubbin, H. I., Cauble, A. E., & Patterson, J. M. (1982). *Family stress, coping, and social support*. Springfield, IL: Charles C. Thomas.
- McCubbin, H. I., Joy, C. B., Cauble, A. E., Comeau, J. K., Patterson, J. M., & Needle, R. H. (1980). Family stress and coping: A decade review. *Journal of Marriage and the Family*, 42, 125–141. <https://www.jstor.org/stable/351829>
- McCubbin, H., & McCubbin, M. (1988). Typology of resilient families: Emerging roles of social class and ethnicity. *Family Relations*, 37, 247–254. <https://www.jstor.org/stable/584557>
- 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). Springfield, IL: Charles C Thomas.
- McCubbin, H. I., & Patterson, J. M. (1985). Adolescent stress, coping, and adaptation: A normative family perspective. In G. K. Leigh & G. W. Peterson (Eds.), *Adolescents in families* (pp. 256–276). Cincinnati, OH: Southwestern.
- McCubbin, H. I., Patterson, J. M., & Wilson, L. (1981). *Family inventory of life events and changes (FILE): Research instrument*. St. Paul: University of Minnesota, Family Social Science. [https://doi.org/10.1007/978-94-007-0753-5\\_101338](https://doi.org/10.1007/978-94-007-0753-5_101338)
- McCubbin, H. I., Futrell, J. A., Thompson, E. A., & Thompson, A. I. (1998). Resilient families in an ethnic and cultural context. In H. I. McCubbin, E. A. Thompson, A. I. Thompson, & J. A. Futrell (Eds.), *Resiliency in African-American families* (pp. 329–351). Thousand Oaks, CA: SAGE.
- McCubbin, L. D. (2006). The role of indigenous family ethnic schema on well-being among Native Hawaiian families. *Contemporary Nurse*, 23(2), 170–180. <https://doi.org/10.5172/conu.2006.23.2.170>
- McCubbin, L. D., & McCubbin, H. I. (2013). Resilience in ethnic family systems: A relational theory for research and practice. In D. S. Becvar (Ed.), *Handbook of family resilience* (pp. 175–195). New York, NY: Springer.
- McNeil Smith, S., & Landor, A. M. (2018). Toward a better understanding of African American families: Development of the sociocultural family stress model. *Journal of Family Theory & Review*, 10(2), 434–450.
- Moos, R. H. (1986). *Coping with life crises: An integrated approach*. New York, NY: Plenum.
- Olson, D. H., Russell, C. S., & Sprenkle, D. H. (1979). Circumplex model of marital and family systems cohesion and adaptability dimensions, family types, and clinical applications. *Family Process*, 18, 3–28. <https://doi.org/10.1111/j.1545-5300.1979.00003.x>
- Olson, D. H., Russell, C. S., & Sprenkle, D. H. (1980). Marital and family therapy: A decade review. *Journal of Marriage and the Family*, 42, 239–260. <https://www.jstor.org/stable/351836>
- Olson, D. H., Russell, C. S., & Sprenkle, D. H. (1983). Circumplex Model of Marital and Family Systems: VI. Theoretical update. *Family Process*, 22, 69–81. <https://doi.org/10.1111/j.1545-5300.1983.00069.x>
- Oken, B. S., Chamine, I., & Wakeland, W. (2015). A systems approach to stress, stressors and

- resilience in humans. *Behavioural Brain Research*, 282, 144–154. <https://doi.org/10.1016/j.bbr.2014.12.047>
- Patterson, J. M. (1988). Families experiencing stress. *Family Systems Medicine*, 6, 202–237. <https://doi.org/10.1037/h0089739>
- Patterson, J. M. (2002). Integrating family resilience and family stress theory. *Journal of Marriage and the Family*, 64, 349–360.
- Pearlin, L. (1991). The study of coping: An overview of problems and directions. In J. Eckenrode, *The social context of coping* (pp. 261–276). New York, NY: Plenum.
- Pearlin, L., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior*, 19, 2–21. <https://www.jstor.org/stable/2136319>
- Price, S. J., McKenry, P. C., & Murphy, M. (2000). *Families across time: A life course perspective*. Los Angeles, CA: Roxbury.
- Repetti, R. L., Robles, T. F., & Reynolds, B. (2011). Allostatic processes in the family. *Development and Psychopathology*, 23, 921–938.
- Rodgers, R. H., & White, J. M. (1993). Family developmental theory. In P. G. Boss, W. J. Doherty, R. LaRossa, W. R. Schumm, & S. K. Steinmetz (Eds.), *Sourcebook of family theories and methods: A contextual approach* (pp. 225–254). New York, NY: Plenum.
- Roskies, E., & Lazarus, R. (1980). Coping theory and the teaching of coping skills. In D. Davidson & S. Davidson (Eds.), *Behavioral medicine: Changing health lifestyles* (pp. 38–69). New York, NY: Brunner/Mazel.
- Rutter, M. (1983). Stress, coping, and development: Some issues and questions. In N. Garmezy & M. Rutter (Eds.), *Stress, coping, and development* (pp. 1–41). New York, NY: McGraw-Hill.
- Sarafino, E. P. (2006). *Health psychology: Biopsychosocial interactions* (5th ed). Hoboken, NJ: Wiley.
- Schulz, M. S., Cowan, P. A., Cowan, C. P., & Brennan, R. T. (2004). Coming home upset: Gender, marital satisfaction, and the daily spillover of workday experience into couple interactions. *Journal of Family Psychology*, 18(1), 250–263. <https://doi.org/10.1037/0893-3200.18.1.250>
- Selye, H. (1978). *The stress of life*. New York, NY: McGraw-Hill.
- Serido, J., Almeida, D. M., & Wethington, E. (2004). Chronic stressors and daily hassles: Unique and interactive relationships with psychological distress. *Journal of Health and Social Behavior*, 45, 17–33. <https://doi.org/10.1177/002214650404500102>
- Spence, K. W. (1956). *Behavior therapy and conditioning*. New Haven, CT: Yale University Press.
- Teachman, J., Tedrow, L., & Kim, G. (2013). The demography and families. In G. W. Peterson, & K. R. Bush (Eds.), *Handbook of marriage and the family* (3rd ed., pp. 39–62). New York, NY: Springer.
- Walsh, F. (2006). *Strengthening family resilience*. New York, NY: Guilford Press.
- Walsh, F. (2013a). Religion and spirituality: A family systems perspective in clinical practice. In K. I. Pargament, A. Mahoney, & E. P. Shafranske (Eds.), *APA handbook of psychology religion, and spirituality (Vol 2): An applied psychology of religion and spirituality* (pp. 189–205). Washington, DC: American Psychological Association.
- Walsh, F. (2013b). Community-based practices of a family resilience framework. In D. S. Becvar (Ed.), *Handbook of family resilience* (pp. 65–82). New York, NY: Springer.
- Yeh, C. J., Arora, A. K., & Wu, K. A. (2006). A new theoretical model of collectivistic coping. In P. P. Wong, & L. J. Wong (Eds.), *Handbook of multicultural perspectives on stress and coping* (pp. 55–72). New York, NY: Springer.