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## Brief Report

### Use of the Family Adjustment and Adaptation Response Model to Understand the Impact of Stress in Children

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## Introduction

Family stress has been defined as a “Pressure or tension in the family system -- a disturbance in the steady state of the family” [1]. The disturbance in the family can be a result of various stressor events. According to Boss [1], family stressors can be classified based on the source, type, duration, and density of the stressor. The source of family stress could be internal or external. Types of stressors can include the following: normative or catastrophic, developmental or situational, predictable or unexpected, ambiguous or clear, volitional (chosen or wanted; for example, pregnancy) or non-volitional (not chosen; for example, an earthquake). The duration of the stressor can be acute or chronic, and stressors may be cumulative or isolated.

Risk factors that could cause illness and affect health per se and be related to behavior problems in preschool children. “Risk factors are variables or factors that are associated with a high probability of onset, greater severity, and a longer duration of major mental health problems” [2]. Risk factors faced by children may differ from those faced by adults. Risk factors in children may be divided into two main categories. The first category includes everyday stressors such as hassles and strains. The second category involves the family and social stressors. This second group includes individual factors, family conditions, parenting styles, maternal factors, social support and the role of the school or day care centers.

## Hassles

Hassles are the “Irritating, frustrating, distressing, demands that to some degree characterize everyday transactions with the

environment” [3]. “Hassles” are minor occurrences or events that may affect an individual’s life in day to day situations [4]. They may be perceived (appraised) as challenging, or they may be perceived as a threat to the individual [5]. Hassles can be perceived as a challenge; and when they are viewed positively in this way, they are called as “Uplifts” [5]. Examples include viewing a stressful situation or an event, such as taking an examination, as a challenge, viewing it positively and doing one’s best in that particular situation. Alternatively, when viewed negatively, hassles can be considered a threat and be and be potentially harmful to the individual.

## Strains

Strains are stressful circumstances or events that occur for a prolonged period of time and cause continuous pressure on the individual until the problem or the stressor is solved. Some examples of strains include marital conflict, role overload, and presence of a chronic illness such as diabetes. Strains are often considered more difficult to handle than stressors, because they are persisting for a long period of time, are usually difficult to resolve immediately, and may seem to be more stressful with the accumulation of stressors and hassles [6,7].

The second category of risk factors may consist of the following factors. These include the individual, family conditions, parental styles, maternal and biological factors. Firstly, family factors greatly contribute to the overall growth and development of the child. They include the presence of a dysfunctional family (i.e., a family that already has existing risk factors like an impending divorce, marital discord, marital dissatisfaction, family size, and

instability). Other factors such as the role of social support and child care centers are discussed.

### **Individual Factors**

Factors in the child such as anoxia at birth, premature birth, low birth weight, neonatal cerebral involvement, other birth complications, gender and more.

### **Family Conditions**

Family factors include low socioeconomic status of the family, or extreme poverty, lack of social support, impending divorce, marital discord, marital dissatisfaction, family size, and family instability. Other factors include substance abuse, single mothers, and dissatisfaction with life as a whole, unemployment.

### **Parenting Styles**

According to Baumrind [8], parenting styles involve three main approaches: authoritative, authoritarian, and permissive. Whereas authoritative parenting is controlling and demanding, the latter two styles are characterized by parenting that is inconsistent, uninvolved, with lack of engagement and disagreement over child rearing practices. Parenting that is characterized by inconsistency and disruption is associated with the development of aggressive and antisocial behavior in children [4], which in turn increases the risk for problems in conduct and antisocial behavior. Determinants of parenting practices include culture [9]; socioeconomic status [10]; maternal age, maternal education, and father absence [11].

### **Maternal Factors**

Maternal factors can also play an important role in overall development of the child. Some of them include the personality of the mother, depression, unwanted pregnancy, lack of a supportive husband, too many responsibilities, perceptions towards motherhood, child rearing and family planning practices, and low maternal age at delivery. Studies conducted on preschool and school age children have shown strong relationships between maternal psychopathology and the occurrence of emotional and behavioral disturbances in children [12,13].

### **Social Support**

According to Schaefer et al. [14] social support serves three important functions: to provide emotional support, such as attachment; to provide tangible support, such as loans or gifts; and to provide informational support, such as advice or providing feedback. The availability of social support for both adults and children help them to deal effectively with the stress they face in their day to day lives [15]. For children, a supportive family environment is vital for the development and overall well-being of the child [16]. One perspective of the influence of socio-economic

status on behavioral outcomes of children suggests that maternal education [17-19] and the attitudes of childrearing [20] may affect adjustment in children.

For mothers from a poor socioeconomic background, support from members of the family, and other kinds of extended support, such as friends, serves as a protective factor against stressful life events, and aids in positive parent-child relations [21,22]. This conclusion is based on findings “That the positive relation between life change scores and impairment is strongest in the lower class” [21]. Increased social support and less use of punishment has been shown to improve parenting practices [23], and increased satisfaction from social support has been shown to assist mothers in responding more sensitively to the needs of their children [24].

### **School/Child Care**

According to the US Bureau of the Census, increasing numbers of women with dependent children are employed outside the home. In the United States, labor force participation of mothers with children younger than 6 years of age doubled from 30% to 59% between 1970 and 1990. In 1975, 34% of mothers with children below 6 years of age were in the workforce. In 1999, the corresponding figure was 61% [25]. Factors affecting maternal employment include socioeconomic status, education, fertility, household composition, availability of child care and nursing, and other caretaking responsibilities of women for children.

Much depends on the quality of the day care, and on the age, characteristics, and family circumstances of the child [26]. A child care facility must have the following minimum requirements to achieve the maximum possible positive outcomes in children ([http://www.childrensworld.com/parent\\_resources/checklist.html](http://www.childrensworld.com/parent_resources/checklist.html)). Some of the following include: accreditation by the National Academy of Early Childhood Programs, proper teacher/child ratios, adequate practice of hygiene, a clean and safe environment, written emergency procedures, presence of activities and learning programs that are developmentally appropriate and geared to the needs of children of different ages, abilities, and learning styles, and policies for continuous communication between the parents and the care givers about the progress of the child. When a child care facility fails to meet the above requirements, they can produce constant stress on the family, and the child as manifested by problems in behavior.

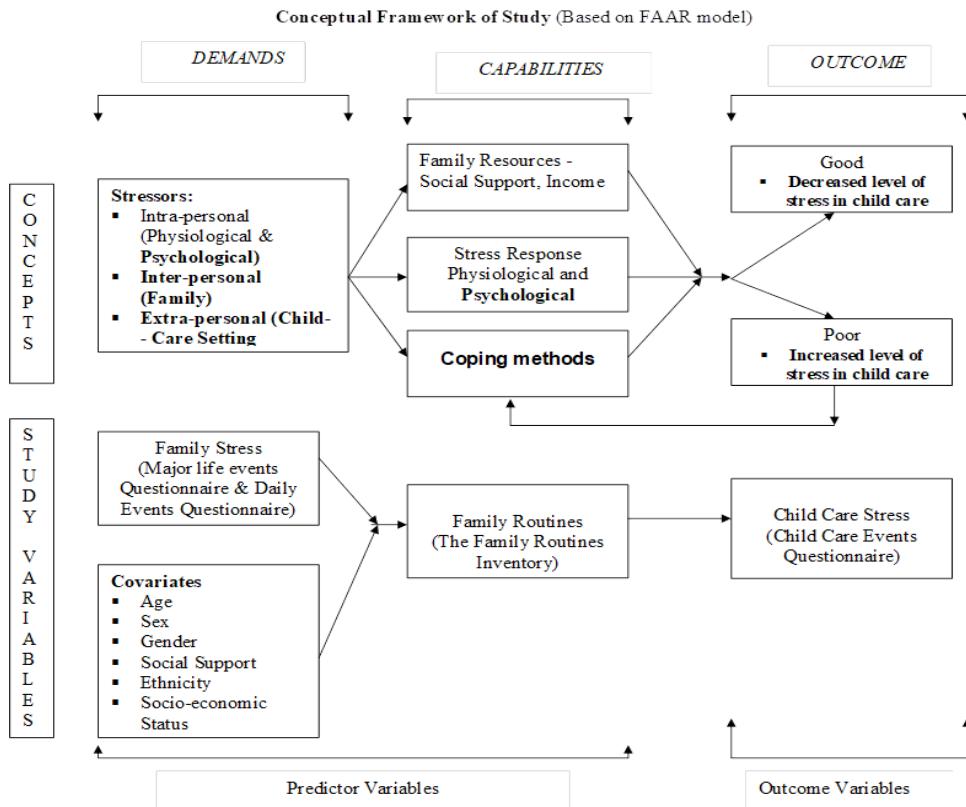
### **Conceptual Framework: Family Adjustment and Adaptation Response Model**

The Family Adjustment and Adaptation Response (FAAR) model [27] can be used to understand a family's response to stressful life events. The three domains that are emphasized in this model are: sources of stress, mediators of stress, and outcomes of stress. The sources of stress (stressors) are called the demands

which, can emerge from the individual members, the family unit or from the community. The mediators of stress are the capabilities of the family in the form of family resources and coping behaviors. The outcome of the family to achieve a balanced functioning is called family functioning or family adaptation. Both can range on a continuum from good to poor. In general, good outcomes reflect good physical and mental health of the family members, optimal functioning of the members and a family that can accomplish its life-cycle tasks. On the other hand, poor outcomes can result in

some form of mal-adaptive functioning, which can be manifested in a variety of ways amongst the members of the family.

The FAAR Model has not been used to predict or explain stress in child care in preschool-aged children associated with family stress. However, it has been used quite often in the family literature to help explain resilience in children's adaptation to negative life events and stressed environments [28]. The extent to which the FAAR model is capable of accounting for some of the stress displayed by pre-school children is presented in (Figure 1).



**Figure 1:** Conceptual frame work of the study.

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