

Introduction and Conceptual Overview

Joyce A. Arditti

Case Example: Nick

Nick, a 16-year-old, moved with his family from a large city in the Northwestern United States to a Southern rural town during the summer before his eleventh-grade year. Nick is a second-generation member of a Chinese family; his grandparents immigrated during the 1950s; his father, whose job transfer caused the move, is an engineer and his mother an elementary schoolteacher. Up to the point of the move, Nick's medical and psychological histories had been "unremarkable to date." In his home city, he was an avid gaming enthusiast, and a natural on the baseball field. Nick was well liked by his circle of friends who accepted his bisexual orientation without judgment. In contrast to his large, racially diverse high

school in his home city, his new school was small, and comprised 550 predominantly white students. Cliques among students were well formed and hard to penetrate. In his new environment, Nick had trouble making friends, was terribly homesick, and kept his sexual orientation a secret for fear of being bullied. By the end of the fall semester, Nick's grades had dropped to an all-time low and he was spending most of his time in his room alone, either sleeping or gaming. He had not touched a baseball in months. Additionally, he was having a great deal of stomach pain and was diagnosed with a bleeding ulcer, causing him to miss a great deal of school. Nick's family realized he was in trouble.

As we can see from the case examples on pages 1 and 2, both Nick's and Martina's family are in trouble, and affected by an array of problems stemming from caregiver stress, economic inadequacy, adolescent development, social exclusion, and health challenges. Whether Nick or Martina and their families will be able to effectively deal with the problems they are faced with depends on a number of individual, family, and societal factors including how they define their situation, their ability to respond to family demands, resources and

assets at their disposal, individual competencies and strengths, social support, and societal tolerance and understanding regarding the conditions and situations with which each family is confronted. For example, whether Nick will thrive, survive, or deteriorate during his junior year and beyond is contingent on his ability to get the help he needs, find support, and transform his experience into something that has meaning and ultimately enhances his development. How might this happen? First, Nick is lucky: he is

Case Example: Martina

Mexican-born Martina is an 81-year-old widow with an array of medical needs. She has painful arthritis and is showing the early signs of dementia. Martina lives with her daughter, Lisa, and her four grandchildren aged 4 to 14. Lisa is a single mother who does shift-work at a local poultry factory near an urban center. She, Martina, and the kids live in a third story two-bedroom apartment in a tough neighborhood punctuated with occasional gang-related violence. Once a caring grandmother and a help to Lisa and the children, Martina has increasingly become a “burden” to the family. Martina has trouble walking and caring for herself and personality changes include irritability and forgetfulness. For example, recently after making dinner, Martina left the stove on overnight. Now,

14-year-old Johnny is left in charge of Martina and the children while Lisa works evenings. However, Johnny has taken up with a new set of friends and rather than holding down the fort, he is out most nights on the streets leaving Martina and the younger children to fend for themselves. Lisa is at a breaking point – she is unable to carry the load of caring for her children, work, and dealing with Martina’s caregiving and health needs. Lisa is also grieving the loss of the loving mother she once had, before Martina’s dementia. While Martina has Medicare coverage, Lisa’s earnings are barely enough to get by. Based on Lisa’s commitment to keeping her family together and caring for her mother at home, Lisa has taken an extra shift on weekends to make ends meet.

smart and has loving and supportive parents and siblings who believe in him. Nick’s family has health insurance and financial resources and are able to get him in to see a counselor who understands the challenges Nick is facing and is nonjudgmental about Nick’s bisexuality. Nick also receives the medical attention he needs for his ulcer. He begins to feel better about himself, breaks his isolation, and with his family’s support, decides to try out for the baseball team the spring of his junior year. A new family moves in next door and Nick becomes friends with the teenage daughter, Zoe, who is also into gaming. Nick feels safe with her – she too was a city girl and a non-conformist in her politics and dress. She has a small group of gaming and political friends and Nick decides to “come out” and with his counselor’s help, Nick shares his sexual orientation with his new-found friends and joins their causes for civil rights. Between medical and psychological treatment, making the baseball team, and the support of his friends and family, Nick’s senior year looks bright. Nick’s path is one of transcendence over adversity. But he did not necessarily do it alone.

Perhaps Lisa, Martina and their wider family are not so lucky. Lisa is teetering on the poverty line, and

without the financial resources that Nick’s family has, she will have a tough time meeting the demands of her situation. Lisa’s children are at risk of endangerment unless adequate supervision and developmentally enhancing care can be found. Martina will continue to deteriorate without the proper medical and physical care. Johnny may end up joining one of the gangs in his neighborhood without some kind of intervention to promote his well-being. It is clear he cannot handle the adult-like family responsibilities Lisa has given him. Lisa has too many responsibilities as a single-mother and caregiver to Martina. She needs support and help and since she has no kin to rely on, it will have to come from the outside. Tired and alone, Lisa, herself is at risk for burn-out.

All families have problems. Some of these problems stem from change within and outside the family. Other problems are connected to developmental transitions and challenges inherent in certain caregiving arrangements, such as caring for an elder or infirm family member. Further, problems may be intensified or seemingly irresolvable due to discrimination and social inequality. *Family Problems: Stress, Risk, and Resilience* examines an array of critical challenges faced by contemporary families such as Nick’s and

Lisa's, and digs deep into their origins, effects, and perhaps most importantly how families may still thrive and grow in the face of adversity. Additionally, an essential question posed throughout the book is: when do family issues become "problems"?

What is a Family Problem?

The field of family studies has long considered the issue of family problems, with particular attention to how families cope with stress related to various life transitions and difficult life events. Key trends within family science that emerged during the 1990s have been influential in how we define and conceive of family problems. These developments include a focus on individual and family resilience, as well as feminist and ethnic minority critique that has given way to recognition of the diversity of family experiences (Doherty, Boss, LaRossa, Schumm, and Steinmetz, 2008). The diverse "postmodern" family is fluid and distinct from previous generations, essentially broadening the scope of family problem definition, as well as expert interpretation of the challenges families face in their everyday lives and how best to solve these challenges. There are three broad perspectives that can be applied in thinking about family problems today and these perspectives or *theories* are utilized throughout the book: (1) a constructivist perspective, (2) the family stress perspective, and (3) ecological systems theory.

Constructivist reflections on the nature of family problems

First, a phenomenon is a family problem when it is seen as such by family members themselves or defined by a great many others in the family's social world. This criterion is rooted in "constructivist theory," which emphasizes how people view the relationships and situations they are involved in. For example, some of Nick's difficulties were rooted in his concern that his bisexuality would be viewed as abnormal or different by members of his new school and community. This fear is warranted given the likelihood of negative and homophobic attitudes that more often characterize both rural and Southern regions of the United States (Eldridge, Mack, and Swank, 2006; Snively,

Krueger, Stretch, Watt, and Chadha, 2004). Thus real or imagined discrimination was a force that was adding to the difficulties Nick was having in adjusting to his new life after his move.

From a constructivist perspective, all knowledge systems are "ever-changing human inventions" to help people make sense of their lives (Raskin, 2006, p. 212). Constructivism also involves an increasing emphasis on understanding families in context, in their social world, with a sensitivity to the oppressive power of larger social forces. Power may be manifested to the extent to which people can get others to accept and live according to their preferred discourses. From a constructivist viewpoint, social inequality is in part a byproduct of one's inability to gain this acceptance – thus problems signify a gap in how families experience the world and social pathologizing of that experience.

At the core of constructivism is a central assumption that human beings – individually and through their relationships (e.g., Gergen, 1994), "create meaningful mental frameworks of understanding," which are the basis for self-understanding and comprehending the surrounding world (Raskin, 2006, p. 212). By extension, families construe their interactions with the world and these constructions may serve to organize families around specific problems (Doherty and Baptiste, 2008). In contrast, a hallmark of positivistic social science was the belief that "facts" about the world and more specifically about families were givens that could produce generalizations that could be tested by gathering more facts (Doherty and Baptiste, 2008). Therefore, family health, well-being, and other specific child and family outcomes rested on a certain pattern of facts and objective conditions. Concurrently, deviations from these facts, typically defined in terms of traditional family forms, role functions, and normative developmental trajectories, were characterized as *problems* located within people and within families. Now, with family science's recognition of the postmodern family, the question of whether a particular role variation, family structure, or interactional pattern is defined as a problem is more complex. Family phenomena can be defined one way within the family by its members, and defined outside the boundaries of the family by society in another manner altogether. Consider for example the controversy

that swirls around the notion of the “family bed.” Is sleeping with your child a problem? Medical experts argue that co-sleeping can be physically dangerous for children, emotionally unhealthy, and compromise marital intimacy. Parent advocates cite benefits such as increased bonding and access between parents and child(ren), as well as more confident and secure children. A polarizing illustration such as the family bed illustrates how family and social definitions may be at odds. From a constructivist perspective, people are viewed as actively creating meaning – and as we see from the family-bed example, meaning systems can be wildly different among people and contexts.

Thus problems, sometimes defined as psychopathology or family pathology, occur not only as a result of social rejection, but when individual, familial, and cultural ways of construing are incongruent or become ineffective. Problems are inherently rooted in meaning because they involve a “felt discrepancy between the way things are and the way they are ... supposed to be” (Mahoney, 2003, p. 45). Lisa’s family is a case-in-point, based on her cultural heritage she believes she should be able to take care of her mother Martina and keep her at home, yet the way things are and the necessities associated with Martina’s care is creating a great discrepancy for her which has become a source of distress. Therefore, problems can be viewed as expressions of a family’s attempt to protect itself, and pursue directions that feel “immediately satisfying” (Mahoney, 2003, p. 45). From this standpoint, *problems are often attempts at solutions* (Mahoney, 2003), and in this manner, important mechanisms of development and systemic reorganization. Lisa’s shift work, which takes her out of the home and leaves vulnerable family members unsupervised, is a problem, but also an attempt on her part to resolve the family’s economic inadequacies.

In sum, constructivism highlights that problems are rooted in discrepant or ineffective meanings and often products of collective definition – particularly in relation to social and cultural norms pertaining to family dysfunction and deviance (Schneider, 1985). However, it is also worth noting that some family conditions fail to be identified as “social problems” and thus remain invisible to society in that they are not deemed important issues of concern (worthy of resources and intervention) (Schneider, 1985). Society and even family

experts may not recognize a problem per se, and yet a certain set of conditions, behaviors, interactions, can be defined within the family, or by one of its members, as problematic. Moreover, family problems of devalued groups (such as the poor, minorities, prisoners) may be particularly invisible and thus collective definition of an issue may dominate, effectively obscuring the families’ experience.

Family stress theory and family problems

A second perspective applied in deciding whether an issue is a “family problem” involves the extent to which the degree of stress reaches a level that is more than the family “can handle.” Family members may become dissatisfied, compromised, or show other signs of disturbance. We can clearly see this happening in Lisa’s family. The fact that Lisa is feeling that she is “ready to snap” suggests the demands of her situation are exceeding her ability to respond to them as well as compromising the healthy functioning of the family and the well-being of its members. This perspective focuses on how change, loss, and disturbance can create stress (Boss, 2002). Lisa’s stress is further intensified by the loss she feels due to the changes in her mother’s mental and physical health.

Traditional approaches to studying family problems draw heavily from a family stress framework, which historically pathologized hardship and adversity. The study of family stress began in the 1930s, during the Great Depression. Its classic formulation was embodied by Ruben Hill’s ABC-X model (1949), developed as a result of his research on war-torn families. This work established the study of families in crisis, and a conceptual and empirical tradition for the study of distressed families that remained virtually unchanged until the early 1980s. A central deficiency of Hill’s model was its static nature and dysfunctional definition of crisis. A second model of family stress was subsequently developed, the double ABC-X model (McCubbin and Patterson, 1982), which highlighted the adjustment process of the family and how an imbalance of resources and demands, as well as the family’s inability to stop change, gave rise to distress. This model of family stress became the predominant framework for considering family problems for the next decade. However, deficiencies still persisted in

that the model was static and mechanistic and considered change as pathological. Personal and environmental factors were considered to exist separately and prior to their connection to the “stressor event,” and as a result, there was an overemphasis on action and reaction or cause and effect (Smith, 1984). Dynamic processes and positive adaptations were thus ignored.

The Family Adjustment and Adaptation Response (FAAR) model (Patterson, 1988) represents family stress theorizing that considered active processes and varied adaptations, including the possibility of positive family adjustment. Families are viewed as actively engaging in ways to balance *family demands* with *family capabilities*. Demands can be normative (e.g., stress associated with parenting and adolescence), and non-normative (e.g., change events such as an act of violence or, as in Nick’s case, the family move across the country). Demands can also encompass ongoing family strains, which tend to be unresolved, such as Lisa’s caregiving burden, and daily hassles (e.g., minor day-to-day disruptions) (Patterson, 2002). Family capabilities include tangible (e.g., income) and intangible (psychological coping or social support) resources of the family.

A growing emphasis on meaning and the family’s “world view” is apparent in the FAAR model. From the FAAR framework, consistent with family stress theory, the process of adapting to major stressors involves changing prior values and beliefs in order to make sense of what is affecting the family (Patterson, 1993). If family demands significantly and persistently exceed family capabilities, families experience crisis, which is a period of disorganization in which the family cannot function or carry out its normal responsibilities. Or families may poorly adapt in their attempts to strike a balance between demands and capabilities, making them *vulnerable*. For example, if Lisa started drinking to the point of dependence to cope with the imbalance of demands and capabilities in her family, we can predict a poor outcome and family vulnerability.

The contextual model of family stress

Marriage and family therapist and scholar Pauline Boss advanced a Contextual Model of Family Stress, which draws from ecological theory (next section) and also builds on elements of Hill’s original ABC-X model. Boss (2002) conceptualized family stress processes as

Box 1.1 Daily Hassles

Research has found that “normal stressors,” that is, the ongoing strains and repeated hassles of everyday life, have been found to figure more prominently in predicting negative health outcomes and pain (De Benedittis and Lorenzetti, 1992; DeLongis, Coyne, Dakof, Folkman, and Lazarus, 1982), depression in adolescents (Dumont and Provost, 1999), and certain aspects of family functioning (Crnic and Greenberg, 1990) than major life events (e.g., divorce or relocation). Hassles are the “irritating, frustrating, distressing demands” that characterize everyday life and can involve practical problems (e.g., losing things, traffic jams), disappointments, feeling as if one has “too much to do,” and stress stemming from the ongoing care of children and aged parents (Kanner, Coyne, Schaefer, and Lazarus, 1981, p. 3). Beginning in the late 1970s, Richard Lazarus and his colleagues published a series of theoretical papers proposing

the significance of relatively minor stresses on health outcomes. The central ideas behind this scholarship were that minor stresses are *cumulative* and *proximal* – that is, they build up and people’s experience of them is direct and immediate (for example, think of how you felt the last time you were stuck in traffic and late for an appointment or had an argument with a family member).

Some hassles may be situationally determined and infrequent (as in the case of bad weather and a canceled airline flight), while others are more repetitive because the individual remains in a context that is characterized by predictable demands – as in the case of parents with young children (Crnic and Greenberg, 1990). Protective factors such as family support, self-esteem, positive experiences and effective coping strategies help individuals tolerate or minimize the effects of daily hassles and normative stress (Dumont and Provost, 1999; Kanner *et al.*, 1981; Lazarus, 1990).

influenced by *internal* and *external* contexts. External contexts are those components outside of the family, such as war or economic recession, over which the family has no control. According to Boss, these outside “macro” influences can profoundly affect how family members perceive, experience, and manage stress. Elements that the family can control and change to reduce stress were labeled the internal context by Boss. These include family boundaries, or definitions about who is in and out of the family, and family rules and roles. For example, a lack of clarity about whether a family member is in or out of the system (such as in the case of a parent’s incarceration, Chapter 4; a family member’s mental illness, Chapter 3, or dementia, Chapter 10; or in the case of military deployment, Chapter 13) is a source of boundary ambiguity and can cause stress to the family unit (see Boss, 1999, for more information about the concept). Family perceptions and values about stressful experiences are also elements of the internal context. According to Boss, stressor events that are ambiguous and contain a great deal of uncertainty are the most difficult to resolve and therefore cause a great deal of stress for family members. Family members’ ability to tolerate uncertainty, and empower themselves to gather information, solve problems, and move ahead, even in the face of ambiguity, are all internal contextual strengths in response to stress.

In sum, more contemporary variations of family stress theory, such as the FAAR or the Contextual Model of Family Stress, are flexible and have expanded to acknowledge more varied responses to adversity and crisis. Furthermore, family stress frameworks increasingly pay attention to individual, family, and community interpretations of reality (Boss, 2003). Finally, a growing recognition of enhancing and protective family processes has served to draw greater attention to family success and competence (Patterson, 2002). Modern variations of family stress theory often focus on intervening psychological and relational processes that determine in part how a particular stressor event connects with a family outcome. For example, *the family stress model* (K. Conger, Rueter, and Conger, 2000) focuses on how the experience of poverty (stressor event) leads to emotional distress and strained spousal relationships (intervening processes), which in turn are linked to less effective parenting (outcome).

Ecological theory and family risk

Ecological theory suggests the importance of environmental contexts and proximal processes in understanding behavior and patterns of adaptation (Cicchetti, 2006). Proximal processes typically involve those day-to-day relationships that are most important to the developing individual and bear directly on critical psycho-social outcomes. Psychologist Urie Bronfenbrenner (1979) conceptualized developmental contexts as resembling a set of Russian dolls, which are nested inside each other, with the smallest at the core.

These contexts, or ecological layers, can be visualized as concentric circles of context set in time. Risk and protective factors unfold over time, and the contexts are continually changing. According to Bronfenbrenner, there were five contexts of development. The smallest of the contexts is labeled the microsystem, which encompasses the relationships and interaction in the child or developing individual’s immediate environment. It is within the microsystem that proximal family processes are particularly important in driving development. Mesosystems are “systems of microsystems” and involve interrelations among contexts containing the developing person. A common example would involve interaction between parents and schoolteachers. Research has found that strong and positive interactions between home and school enhance school achievement (Comer and Haynes, 1991), although this relationship varies according to race and ethnicity and is strongest for White (European American) families (Lee and Bowen, 2006). The child or developing person may not be directly involved with mesosystems, but is affected by them. Exosystems typically involve broader contexts, which affect the developing person, but with whom that person is not directly involved. The policies and practices associated with Lisa’s job (i.e. late-night shifts) *indirectly* affect her children and her mother. Changes in Lisa’s life stemming from her workplace impact her family. Finally, the macrosystem, or outside circle, refers to overarching cultural prototypes. These include the attitudes and ideologies and values and customs of a particular culture or subculture. Families are embedded in a broad sociocultural network that either supports them or stigmatizes them. Stigma and discrimination are “risks” at the macrosystem level.

In thinking about family problems, ecological theory gives us a framework to consider multiple influences and the balance of risk and protective factors connected to a particular individual, family, or situation. Risk factors are those features or characteristics associated with the family and its environment that contribute to vulnerability and maladaptive, psychopathological outcomes (Cicchetti, 2006). As evident in both Nick's and Lisa's stories, risk factors tend to co-occur rather than occur in isolation. For example, Lisa's family is impacted by multiple risks such as living in an unsafe neighborhood, the absence of stable and high-quality care for both Martina and the children, Lisa's work schedule and low wages, and Johnny's and Martina's developmental status. Risk factors are considered in light of any protective factors, which function to counterbalance the negative impact of risk factors (Luthar, 2003). Nick's supportive relationships with his parents and counselor were important protective factors that contributed to his ability to overcome his social isolation. Lisa's history of a loving relationship with her mother may serve to enhance the chances that she will take the necessary steps to find ways to help care for Martina.

According to ecological theory, these risk and protective factors are thought to occur on multiple systemic levels or *developmental contexts*. Contexts represent a cluster of characteristics that may constrain or enable development; these characteristics may be subject to change or fixed. For example, age is a factor that is subject to change, while prenatal exposure to toxins is fixed. Contexts may include the family, peers, and the multiple social institutions that surround the developing individual. Societal attitudes and norms can also be thought of as a context because deviation from them gives rise to stigma, discrimination, and stereotypes. Stereotypes are false generalizations applied to all members of a particular group (Pennington, 2009). For example, like other non-heterosexuals, Nick's experience moving was made more difficult because of social stigma and negative stereotyping pertaining to his bisexuality, also known as "biphobia" (see Ochs and Rowley, 2005). Hence, biphobia is a contextual factor that can be thought of as *constraining* Nick's development. His new friendship with Zoe, the girl next door, and the support derived from it may be thought of as *enabling* or enhancing his

development. In sum, ecological theory helps us identify what risk and protective factors are important, why certain problems change individuals and families, and how family problems connect with developmental outcomes and family relationships. Ecological theory suggests that family relationships are best understood by examining the changing and reciprocal interactions between individuals and the multiple contexts within which they live (Lerner, Noh, and Wilson, 1998).

Resilience: going beyond family problems

Social and behavioral scientists who study family problems are increasingly asking questions about why "some stay healthy and do well in the face of risk ... and others do not?" (Ganong and Coleman, 2002, p. 346). Family scholars have long been focused on difficulties and problems, with less attention being paid to family strengths and positive adaptations to adversity. All three perspectives or theories of family problems described above support a focus on resilience. Throughout this book, the consideration of family problems goes beyond family pathology, or *what is wrong* with families, and also highlights *what families are doing right* in the face of adversity. An emerging literature is beginning to document the resilience of parents, their children, and families as a whole. The term "resilience" refers to "patterns of positive adaptation in the context of significant risk or adversity" (Masten and Powell, 2003, p. 4) and represents two judgments about an individual. The first judgment is an inference that a person is doing "OK"; the second is that there is or has been significant adversity (Masten and Powell, 2003). A family-resilience framework extends these judgments from the individual to the family and suggests that even under extreme hardship and duress, positive family outcomes are possible (Luthar, 2006; Masten, 2001; Walsh, 2006).

A family-resilience perspective identifies protective factors and processes within the family system that seem to "buffer" or lessen a family's vulnerability to adversity, as well as enhance their ability to adapt and demonstrate competence under stress (R. Conger and Conger, 2002). For example, qualitative research on Chicago's urban poor affirmed resilience processes

among even the most “hard luck” families. Within contexts of extreme disadvantage, resilient families were characterized as very resourceful, placed a high value on the parenting role (especially motherhood), protected their children from harm and promoted their well-being, and were committed to collective responsibility and strength of character (Jarrett, 2010). Further, family boundaries in resilient families tend to be broad and flexible. This means that family members may share breadwinning and nurturing roles as needed (for example, one family member may take care of the young children of the extended family so that more members may work and pool resources). Given that many family problems are experienced within contexts of extreme disadvantage, one can infer that family resilience can help, and also, to the extent that the seeds of family strength are present in a given family, resilience may be cultivated. Lisa’s commitment to her family and cultural identity are important sources of resilience. Although she is spread thin due to her workload, if she is able to get help from neighbors, friends, schools, or agencies, it may tip things in a positive direction. Similarly, Nick’s ability to persevere in the face of change and exclusion, along with his parent’s help, is a source of resilience.

Overview of Book

The theories discussed in this chapter are utilized throughout this book in the discussion of family problems. For example, a social construction perspective is at the heart of van Eeden-Moorefield and Benson’s chapter on gay, lesbian, bisexual and transgender families: “We’re Here, We’re Queer, and We Count: Perspectives on Queer Families” (Chapter 2). An ecological perspective guides Roy *et al.*’s discussion of challenges faced by young, low-income fathers (Chapter 6), Dolbin-MacNab and Hayslip’s chapter on grandparents raising grandchildren (Chapter 9), and Ryan and colleagues’ chapter on multisystemic therapy with multiproblem families (Chapter 19). Family stress theory is an underlying foundation of Chapter 7 (“Do What You Gotta’ Do’: How Low-Income African American Mothers Manage Food Insecurity”) by Jarrett, Bahar, and McPherson. These authors focus our attention on positive family coping

in response to the stress of food insecurity. Ramey, Lanzi, and Ramey (Chapter 12) provide a new way of thinking about family stress by not only specifying how various physical, social-emotional, and societal stressors contribute to poor child outcomes, but also how family stress can be an opportunity for growth. These authors remind us that stress can serve an important function in families: “without challenges to development, resilience may be virtually impossible to promote” (this volume, p. 196).

In addition to these major perspectives on family problems, other theories or “lenses” are introduced to help us understand specific topics such as a typology of intimate partner violence (Hardesty and Crossman, Chapter 14), childhood adultification (Burton *et al.*, Chapter 11), familism and the care of aging family members (Piercy, Chapter 10), adult role models and adolescent development (Kerpelman *et al.*, Chapter 16), and a human rights lens for analyzing family policy (Anderson and Letiecq, Chapter 18). While theories help us understand family problems, no one perspective explains everything, and the authors in this collection of chapters rely on a variety of concepts to help readers understand the nature of a particular family problem or set of challenges.

Part themes

Chapters in this volume address the challenges and strengths of a diverse spectrum of families in varied structural arrangements, cultural orientations, socio-economic conditions, and developmental contexts. The chapters are organized in four parts based on common themes or concerns. A brief introduction precedes each chapter in order to highlight relevant themes, substantive issues, or theoretical concepts.

Social inequality and marginalization

Part I critically examines how social inequality may underpin family problems, and includes chapters that illustrate how marginalization processes are an important feature of the family’s experience. Social inequality and marginalization have bearing on how challenges are defined and responded to, and outcomes pertaining to child and family well-being. Social inequality is typically reflected by *disproportionality*, that is, the overrepresentation of a particular group of people

with certain problems, lifestyle, or sets of issues such as involvement in the child welfare system (Dunbar and Barth, 2007). This disproportionality translates into unequal patterns of goods, wealth, opportunities, rewards and punishments, or burdens. Social inequality may connect with injustice (Dorling, 2011) and different social positions (e.g., one's occupation) or statuses (e.g., race and gender) (Grusky 2001).

Marginalization is the process by which social inequality is constructed and perpetuated (Arnold, 1995). It has been said that marginalization is the most "dangerous form of oppression" (Young, 1990, p. 53). Marginalization occurs when people are systematically excluded from meaningful participation in economic, social, political, cultural, and other forms of human activity that are normally available to members of a given community and society. Marginalized persons are thus denied the opportunity to "fulfill themselves as human beings" (Jenson, 2000, p. 1). This part includes chapters that touch on the issue of social inequality, marginalization and family problems, either by virtue of the characteristics of the group of people or families being discussed, the challenges they face, or a combination of both. Topics include the stigma of mental illness by Natalie Gela and Patrick Corrigan; parental incarceration by Ann Loper and colleagues; gay, lesbian, bisexual, and transgendered families by Brad van Eeden-Moorefield and Kristen Benson; family health disparities by JINETTE Comeau and William Avison; and low-income fathers by Kevin Roy, Ron Palkovitz, and Damian Waters.

As you read through the chapters in Part I, ask yourself how social inequality and marginalization may undermine child and family well-being. Sometimes exclusionary practices and processes may not be readily apparent, but operate "behind the scenes" (e.g. health disparities, poverty). Also, consider the ways in which families adapt to their circumstances and find ways to transcend their circumstances and participate fully as parents, family members, and citizens within the communities that they live.

Parenting and caregiving in diverse contexts

Part II of the volume is focused on how family members care for each other in diverse contexts. We often hear family scholars talk about "diversity," but

what does it really mean? Historically, diversity referred to variations of the traditional family, with all other family types considered deviant or dysfunctional (van Eeden-Moorefield and Demo, 2007). Although a more contemporary focus on family diversity acknowledges the multitude of family types and processes, there is still much debate about the family due to the dramatic and widespread changes in family structure, roles, and functions that have occurred over the past few decades. Primary among these changes are the increased separation of child-bearing and child-rearing from marriage – that is more children than ever before are in single-parent households, or being reared by other family members and caregivers. Single women in particular make up an increased and growing percentage of those having children. A second major change impacting families involves the aging of our society. Due to declining mortality and morbidity and advances in medicine, older people are living longer than ever before. The increased health and life expectancy of elders raises questions about their role in society, their care, and, increasingly, their ability to provide assistance to their families.

In Part II, family diversity is considered as it pertains to parenting and the provision of family caregiving. Caregiving is broadly defined to encompass caring for another adult. Even a pluralistic and tolerant view of family diversity does not negate that certain family problems involving the care of children and elders exist. The chapters in this part examine the care of children and family members in a wide array of developmental contexts. Part II includes topics such as foster care by Lenore McWey and Armeda Stevenson Wojciak, caregiving for aging and disabled adults by Kathleen Piercy, grandparents raising grandchildren by Megan Dolbin-MacNab and Bert Hayslip; low-income single mothers by Robin Jarrett and colleagues; and childhood adultification by Linda Burton and colleagues.

Many of us pay "lip service" to the idea of family diversity. As you read through the chapters, ask yourself what values and biases you may have about the "best family" for children and adults to live in. Consider the essential ingredients of caring family relationships and how families might compensate for less than optimal circumstances.

Family challenges over the life course

As we have discussed, development implies an unfolding pathway, or change of some sort and is best understood in the contexts in which it occurs. Contexts of development include family, peers, and multiple social institutions that surround the developing individual. Here we extend our view of development beyond the individual to consider how families change over time, deal with challenges associated with specific life events and intimate relationships, and locate family problems in broader socio-historical and economic systems (Bengtson and Allen, 1993). This broader view of development is the basic premise of a “life course perspective” which recognizes the structural diversity of families, the interdependence (connections) of family members, and the timing of processes and events in lives (Elder, 1984). A life course perspective also recognizes the linkages between childhood and adolescent experiences and later experiences in adulthood, although there is considerable diversity in the ways in which individuals and families may respond to experiences over time. Variation originates from the different ways in which families give meaning to their experiences, as well as by virtue of gender, race, ethnic and socioeconomic differences (Bengtson and Allen, 1993). Family scholars have become increasingly interested in how meaning is constructed around the changes that come with age, intergenerational relationships, and an array of family transitions and challenges that stem from normative events (e.g., parenting young children; adolescent development, aging) as well as the discontinuous effects of a changing social environment (e.g., military deployment during war).

In Part III, “Family Challenges Over the Life Course,” we are reminded that intimate and family relationships can be developmental contexts for both harm and resilience. The topics in this section include young children and parental resilience and stress, by Sharon Ramey and colleagues; resilience in military families by Adrian Blow and colleagues, intimate partner violence by Jennifer Hardesty and Kim Crossman; elder abuse by Karen Roberto and colleagues; and the challenges of romantic relationships among adolescents by Jennifer Kerpelman and colleagues.

As you read through the chapters in this part, think about how social structures and norms create or uphold certain family problems. Consider how the

timing of certain experiences and stressors enhances vulnerability during particular developmental periods. Conversely, what contextual factors and family processes seem to promote resilience throughout the life course?

Policy and practice response to family problems

The call for evidence-based policy and practice has become commonplace across a wide range of fields that connect to families such as education, child welfare, mental health, juvenile justice, youth programs, and health care (Tseng, 2012). The term “evidence-based” generally implies that policy, programs, and interventions are informed by rigorous scientific evidence. Sometimes, evidence-based policy and practice also means including clinical expertise and client perspectives so that that clinical outcomes or the quality of life can be optimized (APA Presidential Taskforce, 2006). Thus research and scholarship on family problems can be very useful to the extent that it can be translated by policymakers and practitioners and disseminated to those who work closely with at-risk youth and families. Moreover, federal, state, and local governments, as well as other funding organizations are under increased political and economic pressure to demonstrate “accountability” and effectiveness of prevention and intervention programs targeting the needs of children, youth, and families (Small, Cooney, and O’Connor, 2009). Vital connections between research, policy, and practice are necessary to ensure innovation and relevance. Suggestions to improve collaboration and inspire innovation could include the development of partnerships between researchers and community members, as well as embracing emancipatory approaches to research aimed at social change and the empowerment of vulnerable populations (see for example, Small, 2005).

The chapters that follow in Part IV, “Policy and Practice Responses to Family Problems,” all utilize scientific research in the development of innovative practice and policy responses to some of the most pressing contemporary family problems. Anne Farrell, Gary Bowen, and Samantha Goodrich focus on a community capacity approach to strengthening vulnerable families. Stacy Ryan and colleagues outline a strength-based approach to multisystemic therapy

for working with troubled youth in multiproblem families. Other topics include the use of community-based programs for Latino immigrant families by José Rubén Parra-Cordona and colleagues; harm-reduction approaches to addressing substance abuse by Patt Denning; and analyzing family policy from a human rights perspective by Elaine Anderson and Bethany Letiecq.

As you read through the chapters, consider the ways that the social scientific research is applied to help address a specific family problem. What kind of information is most necessary in designing a program or intervention? In addition to research, think about how

theories guide policy and practice. Since most family problems are multifaceted, notice how theories may be integrated and synthesized to fit a particular situation.

In sum, this volume is designed to serve as a core textbook for students in an array of disciplines (family studies, sociology, psychology, social work, counseling, human services) who study families and development. The cutting-edge knowledge presented here, authored by distinguished scholars at the forefront of their field, can help inform not only how we think about family problems and family strengths, but also inform intervention, community programs, and social policy aimed at enhancing the well-being families and children.

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