THE IMPACT OF FAMILY STRESS ON YOUNG CHILDREN

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My interviews with parents about their experiences raising children have taught me that it is important to understand the stressors in their lives, both general stressors and those specifically associated with parenting. Most research in this area has focused on the impact of stress on individuals. Furthermore, the early work examined the impact of major stressors such as loss (Brown & Harris 1993). From our work with families, we know that daily hassles, such as feeding young children or getting children to bed and to sleep, can generate significant parental stress. For years we have known that children raised in high-risk families are at increased risk for the development of psychopathology. More recently it has been learned that risk factors appear to exert their impact through stress that is associated with these risk factors and it is this increased level of stress that interferes with effective parenting (Baker, Heller et al. 2000). Consequently, the more risk factors in a family, the more stress and the greater impact on the child (Rutter 1989).

A. Impact on parents

Common stressors

Although all families are unique, they tend to share certain stressors. In a survey of perceptions of stressors, Daley (2002) found that most parents identified not having enough time with their children as a major stressor. They reported lives that were busy with activities but lacked the “down” time to simply enjoy their children. The period in the morning trying to get themselves to work and their children to childcare or school on time is often very stressful for both parents and children. In addition, mothers experience stress related to trying to manage jobs as well as run households and attend to their children’s needs.

Temperamentally challenging children create stress for families as they are often less responsive to ordinary parental direction (Bates, 1994). Parents can easily become conflicted over management strategies and this conflict creates further stress for parents and children. Similarly, increased parental concern about children with a chronic physical illness or very low birthweight may make consistent parenting approaches more difficult (Sykes et al. 1997).

Unique stressors

Stressors that are unique to a family include traumas and losses that may be current or may have occurred earlier in a parent’s life but are still actively troublesome in the parent’s mental life and functioning. Current losses may trigger memories of earlier experiences and generate stress that causes depression, anxiety and anger. These issues may preoccupy parents often making them seem withdrawn or disinterested in their children and thus less available emotionally to their children. Mental illness in parents has a similar effect (Field 1994). In certain families high levels of stress may be compounded by a lack of resources (e.g. families living in poverty, single parents).

Effects of stressors on parental functioning

Common stressors and daily hassles affect parenting in a number of ways. For example, stress may make parents more irritable and likely to react impatiently with children. Parents may become irritated with one another, thus, increasing levels of parental conflict. When parents become unusually irritable or angry in response to common child behaviours and react out of proportion to the situation, children can become confused, anxious and angry. Parental irritability has been found to increase oppositional behaviour in children and this in turn adds to parental stress (Hibbs et al. 1992).

The guilt associated with the perception of not spending enough time with one’s children may make some parents more lenient, thus reinforcing children’s demanding behaviour. This is even more likely to occur when parents are overwhelmed by the combined demands of work, children and other daily stressors.

Interaction of Stress with Parental Insecurity and Stress Reactivity

Parents who are more vulnerable to the effects of stress are more likely to react negatively or ineffectively when stressed. For example, parents with family histories of anxiety, depression and alcohol and substance abuse are more likely to react to stress with increased anxiety, depression or irritability. Parents who have been poorly nurtured or abused in their family of origin may find the normal demands of children overwhelming and may overreact in response to common child behaviours. (For a more complete discussion see Bradley 2000.)

Resources

Stress can be buffered in part by a variety of resources. For example, the capacity to get away from the tasks of child rearing for short periods can help many parents manage ordinary stresses more calmly. A supportive spouse, friend or therapeutic relationship can provide opportunities to discuss stresses and find ways of managing so that the impact on parenting can be minimized. Sufficient funds to take children on entertaining activities can enhance parental enjoyment of children and reduce the burdens inherent in parenting. A support group through a church, an Early Years Centre or other community activities may allow for the sharing of experience and decrease the sense of isolation that can increase stress. Satisfying employment can
provide adequate finances to raise children and enhance self-esteem, thus allowing for more effective coping with stress.

Some parents with high levels of stress reactivity may benefit from medication (e.g. antidepressants) or therapy to reduce their stress reactivity and allow them to respond more patiently to the demands of their children.

**B. Impact on children**

**Direct** -- Children who sustain significant or prolonged stress can react in a variety of ways. The stresses related to physical or emotional abuse are likely to produce oppositional, demanding or aggressive behaviours. Changes in a child’s physiological stress system are likely to occur and may affect their emotional development. Changes in several aspects of cognitive functioning are also common, such as deficits in memory and attention (Cicchetti & Tucker 1994). Traumatic stresses that are not perpetrated by a family member may be buffered by the capacity of the caregiving environment to respond sensitively and supportively.

**Indirect** -- Because children exposed to high levels of direct stress often live in families with stressed parents, some of the adverse effects on children occur because stress interferes with effective parenting such as difficulty setting limits (Ellenbogen & Hodgins 2004).

**Relevance & Conclusions**

Stress is a common experience that needs to be addressed. Some stressors such as parents not spending enough time with their children may require parents to examine their lifestyles so that they can more adequately meet the needs of their children. Other stressors, such as a temperamentally challenging child, indicate the need for a greater understanding of temperament and appreciation of the unique challenges involved in parenting particular children, as well as respite for parents. Awareness of the multiple stresses faced by high-risk families may mean assisting parents to lower their expectations (e.g. where inappropriate expectations increase stress) and to problem-solve to reduce their daily life stresses. Stresses related to parental mental illness require helping the non-ill parent understand the impact of illness-related behaviour on parenting so that the effects on children can be buffered and optimal development promoted.

Although stress is ubiquitous, many parents experience levels of stress that have negative effects on their parenting. Identifying the common and uniquestressors for each parent can make therapeutic intervention more effective.

**References**


