Stress and coping behavior: the effects of poverty on women and children

Laura J. Sorensen Lyons
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Abstract
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Schools are playing an increasingly larger role in the lives of students as well as their families because of these added stressors. Information found in this paper can be particularly important for anyone working in the school, especially school counselors who serve as the mediators between home, the school, and the community.
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The following paper reviews research on poverty, its effects on women and their children, and how they cope with the increased level of stress. There are more single headed households now than ever, the majority headed by women. This adds an increased level of stress on both the women and the children they care for. Research also shows that a large number of these families are also coping with the special needs of their children. This stress leads many women and children to cope in some conventional and unconventional ways. Schools are playing an increasingly larger role in the lives of students as well as their families because of these added stressors. Information found in this paper can be particularly important for anyone working in the school, especially school counselors who serve as the mediators between home, the school, and the community.
Stress and Coping Behaviors: The Effects of Poverty on Women and Children

Poverty is something that we don’t like to think about or discuss in our society because we don’t like to admit that it exists in America. Our society is based on capitalism and elitism. Recognizing or even working to eliminate poverty would mean that those on top would have to give up some of what they have. The people who live in poverty not only have to deal with trying to get by day to day, but also the depression and stress that come along with living in poverty.

According to the Shelter House of Iowa City (2005) web site, 11.3% of the U.S. population is living in poverty. This percentage is equals to about 31 million people, and of this amount, 40% are children. Locally, 15% of Johnson County residents are currently living below the poverty level. In Iowa over 50% of the homeless are children (Shelter House of Iowa City, 2005).

As defined by the Institute for Research on Poverty, living in poverty means that a person or family lives below the equated minimum that would fulfill basic nutritional requirements. This threshold is different depending on the size of the family, and age of the children in that family. An example is the poverty threshold for a family of 3 in the year 2004 is approximately $14,776. This means that if the family’s combined yearly income is below this line they are considered to live in poverty (Institute for Research on Poverty, 2005).

As you can see, poverty is a large problem, much larger that most realize or are willing to admit. So what are those who live in poverty dealing with, and how do they cope in their situations? The purpose of this paper is to explore the stressful conditions that arise when living in poverty, and how families cope.
Particularly, the author is interested in the coping behaviors of women and children, as there are more single headed households now than ever. Also discussed will be the factors of illness in the family and the added stress this applies to families already struggling. The author will also explore the supports available to families living in poverty and effective buffers that help families cope with the stress of their environment.

The Effects of Stress Living in Poverty

*Environment and Stress on Children*

The environment that one grows up in can greatly influence someone. In the case of children living in poverty, their environment usually has a negative impact on them. Because it is hard to afford living in a nice place of their own, many women are forced to live with relatives or in shelters. In both of these environments children are confronted with more crowding, noise, family turmoil, and community violence (Evans & English, 2002).

In a study by Evans and English (2002), they compared low-income children with their middle-class peers, and found that the environments that low-income children live in produce more stressors. They argue that their environment produced more physical and psychosocial stressors. They also asked the children to evaluate themselves and found that low-income children rated their psychological well-being lower than their middle-class peers. Other results of this study have shown that lower-income children also have higher blood pressure due to the stress, and have a harder time controlling or regulating their behavior (Evans & English, 2002).
Wadesworth and Berger (2006) conducted a study with adolescents living in poverty. They found that the adolescents dealing poverty related stress engaged in aggressive and anxious or depressed behavior. They found that the more poverty related stress they encountered over time the more these behaviors were present. These behaviors only impaired their coping abilities more. Psychological symptoms of anxiety and depression can in turn hinder adolescents' effectiveness to cope with the stress they encounter daily (Wadesworth & Berger, 2006).

**Parenting Stress Factors**

A study by Middlemiss (2003) tested the stress levels of low-income mothers and how it affected their parenting behaviors. She found that the amount of stress these mothers felt depended on how much social support they were receiving. These women tested with a higher stress level than average, and even more stress if they had little or no social support (Middlemiss, 2003). Another study by Raikes and Thompson (2005) argue that self-efficacy, how confident one is about their ability to deal with the situation, can also have an impact on the amount of stress on an individual. They found that the lower the self-efficacy the higher the parenting stress. They also found that the lower the income the higher the parenting stress (Raikes & Thompson, 2005).

To complicate things more for women living in poverty, Lloyd and Rosman (2005) found that a large number of these women also have to deal with children that have special needs. They defined chronic illness as: asthma, mental retardation, cerebral palsy, autism, attention deficit disorder, muscular dystrophy, cystic fibrosis, sickle-cell anemia, diabetes, arthritis, and congenital heart disease.
These women in poverty that also have the added stress of caring for special needs children have been found to have higher levels of depression and parenting stress in comparison with women that have normally developing children (Lloyd & Rosman, 2005).

Lloyd and Rosman (2005) explored ecological factors that influence the maternal mental health state in these families living in poverty. These ecological factors are family resources, service utilization, and maternal employment. They found that family resources like time, money, and supports were all much lower for these women than women not living in poverty. They were also in need of more services, poverty related services and disability related services. Research showed a linear relationship between the number of services a family accessed and the amount of maternal/caregiver stress. They also found that there was a lower level of employment among women with children that have special needs. The reasons for this can vary from not finding adequate child care that can accommodate the child’s special needs, an employer that allows women to put their children first, or jobs that provide benefits to help these families’ medical problems (Lloyd & Rosman, 2005).

Coping Strategies of Those Living in Poverty

Coping Strategies of Women

For many women, there are a few different types of coping strategies that they engage in, some are positive (active) while others are negative (avoidant). In a study by Wadsworth et al (2005), they state that poverty increased one’s vulnerability to stress because it decreases an individual’s coping resources as well as social support.
First the author will define the types of coping strategies, avoidant and active. Avoidant coping involves things like, substance abuse, taking problems out on others, spending a lot of time alone, and sleeping a lot. Avoidant coping behaviors provide short-term relief of stress and anxiety. They do not, however, help very much as you are only escaping or avoiding the situation, not making a change. Active coping involves things like talking to friend, relative, or professional, getting information about the problem, seeking services for a problem, and making a plan of action to fix a problem. Active coping behaviors actually may produce a short-term increase in the amount of stress or anxiety that an individual feels, but have the best long term effects as they allow for a plan of action and solution for resolving the problems (Rayburn et al, 2005).

One negative, or avoidant, coping strategy that women living in poverty engage in is eating disorders. Thompson (2004) found that eating disorders are not exclusive to middle and upper class white women. Eating disorders are seen among victims of sexual abuse, Latinas and African American women, lesbians, and women living in poverty. The women in her study faced many different kinds of trauma and oppression, things like racism, sexual abuse, poverty, sexism, emotional and physical abuse, and heterosexism. For all of these groups of women, they develop an eating disorder in order to cope in some way.

As far as the women living in poverty, they developed eating disorders because it was one of the few things they could control in their lives. They also developed eating disorders like bingeing as a way to calm them, much like using a drug. For most women of poverty, drugs are expensive and food is cheap in comparison. They found that they could still function and take care of their
children while bingeing, in contrast to using drugs or other substances where they
would not be able to function well enough to care for their children (Thompson,
2004).

*Coping Strategies of Children*

A study by the National Institute of Child Health and Human
Development Early Child Care Research Network (2005) compared four groups
of children; never poor, poor during the child’s first 3 years, poor from 4-9 years,
and chronically poor. They were interested the affects of poverty at different
stages in a child’s life, both duration as well as timing (NICHD Early Child Care
Research Network, 2005). They found that children from families that were
chronically poor scored the lowest on cognitive and language development, and
children from families that were never poor scored the highest out of the four
groups. They also found that mothers and teachers of children in the late and
chronically poor group reported more externalizing and internalizing behavioral
problems (NICHD Early Child Care Research Network, 2005).

It is not explicitly stated in this study, but one can conclude that these
internalizing and externalizing behavioral problems are ways for these children to
cope with living in poverty. Control over their own behavior is often the only
thing they can control in their lives. Substance abuse, crime and violence, and
promiscuous sexual behavior are other possible coping strategies for older
children and adolescents. I did not research the relationship between these things,
but it is logical to conclude that this is possible. It would make sense to rebel
against the institution of our society that confines them to a life of poverty.
Wadsworth and Berger (2006) found two types of coping among adolescents, primary control coping and secondary control coping. Primary coping involves problem solving as well as emotional expression and regulation. Secondary coping involves the adapting of the individual to the situation. This includes acceptance, positive thinking, distraction, and cognitive reconstruction. These methods of coping can help buffer the effects of poverty on children and adolescents (Wadesworth & Berger, 2006).

Solutions and Help Available

*Help for Women Living in Poverty*

It is obvious that family income is an important factor in the amount of stress that women experience while living in poverty. Raikes and Thompson (2005) found that self-efficacy and social support can help modify or buffer this parenting stress. With this in mind, we can help women learn how to better cope and deal with the stress of living in poverty by having free programs available to them through the school districts in which their children are enrolled. In these programs they can have access to a variety of resources and supports. Some resources available could include but would not be limited to counseling for students and their family, school supplies and clothing donations, transportation, and parent support groups. Other benefits that the families would receive from these programs would include learning how to have more confidence in themselves and help them learn positive and healthy coping behaviors. They would also have more ability to foster a positive and nurturing relationship with their family members and the parents would become more involved in their children’s academic performance at school.
The Iowa City Community School district has a program that provides all these services to families and more. The ICCSD Family Resource Center Program (2006) has served over 1,000 children and 1,091 adults in the 2005-2006 school year. In a survey from that same year 92% of parents receiving their services agreed or strongly agreed that the Family Resource Center provided support to deal with difficult issues with their family members (Iowa City Community School District Family Resource Center Program, 2006).

**Help for Children Living in Poverty**

Guest and Biasini (2001) state that the best help for children living in poverty is also to have social supports available to them when needed. Social supports provide “meaningful and enduring relationships that provide nurturance, security, and a sense of interpersonal commitment” (Webster-Stratton, 1990, p.307 as cited in Guest & Biasini, 2001, p. 549). Social supports can also increase a child’s self-esteem, which can lead to improved school performance and drive to achieve goals. Ideally the parents of these children would provide these, but that is not always possible, especially if the parents themselves are in need of social supports. Lack of social support can have many negative effects like dropping out of school, gang involvement, drug use, etc (Guest & Biasini, 2001). Also, as concluded by Raikes and Thompson’s (2005) research on parenting stress, by helping to eliminate or buffer the stress of parent’s living in poverty, we can help ensure a more supportive and nurturing environment for the children of these parents.

Wadsworth and Berger (2006) recommend that children and adolescents be taught how to manage their stress reactivity and psychological symptoms.
They believe that simply teaching kids coping skills will not be enough. They suggest a cognitive behavioral treatment for depression as well as teaching coping skills (Wadsworth & Berger, 2006). For these families in poverty, traditional counseling is out of the question. Community mental health centers might be able to offer these services for free or on a sliding scale. Another option would be the family resource programs available through the schools. The ICCSD Family Resource Center Program (2006) has counseling available to both students and parents.

Conclusion

A possible solution to this problem could be having the school counselors and teachers more involved with the children and making them aware of the situations that these children experience. School counselors, teachers, and social workers need to work together to implement programs for these at risk children, and organize a support system for their parents. This issue needs to be attacked on all levels, both working with the children, as well as the parents. Without working on all levels, that is school, children, and parents, the problem will only continue.

It is important to address the issue of poverty and its effects on both women and children because they make up a large number of our population. We have ignored and denied the problem of poverty in our country long enough. For many women living in poverty, it is a cycle that they cannot get out of without assistance. Many of them are born into poverty and they will also die in poverty. This seems bleak because there are not enough social supports for these women and their children, and our system is set up to prevent those on the bottom from
moving up. Our welfare system is inadequate to help these families move out of poverty. Poverty and receiving welfare assistance in our country is tabooed. This taboo prevents our government and people from knowing the reality of poverty and implementing effective programs to help those living in poverty. The solution is educating the people on the issues, and working together to form social supports for families in poverty.
References


