

Stress, Stress Theories

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What differentiates the study of stress in sociology from similar work in fields like biology or medicine is the attention given by sociologists to the social distribution of mental health and well-being. Sociological inquiry focuses on how the causes of stress, the resources for coping with stress, and the outcomes of stress vary across sub-groups in the population. As distinct from a psychological or biological approach, the sociological study of stress focuses on how the social condition can determine a number of different stress outcomes. A significant step forward in this endeavor was made by Pearlin et al. (1981) when they formalized a sociological theory of the stress process.

There are three fundamental concepts that form the core of the stress process: stressors, moderators/mediators, and stress outcomes. *Stressors* can be external, environmental or social factors, or internal, biological or psychological factors that challenge an individual to adapt or change. They can be discrete events such as the destruction of one's home by a tornado or chronic problems such as a degenerative neurological illness like Alzheimer's disease. Related, *moderators* are the social or personal resources that attenuate the effects of stressors or change the situations that are producing the stressors. In addition to this buffering effect, research also shows that certain resources can have *mediating effects* on stress outcomes. The three types of moderators/mediators are coping strategies, personal resources and social support. Lastly, *stress outcomes* are the psychological, emotional, or physiological conditions resulting from exposure to stressors, after accounting for the the moderators/mediators.

In a simplified model of the stress process, people's position in the social structure exposes them to stressors, which in turn leads to stress outcomes. Moderators and mediators primarily have effects between the stressors and the outcomes, and the social structure and the stressors. This simplified model hides the reciprocal relationships and agentic processes that exist in practice between stressors and moderators, outcomes and stressors, and also individually among stressors, moderators, and outcomes. Nonetheless it accurately represents the underlying connections among the key stress theory concepts and further inquiry into the complexities of this generalized model can be found in the suggested readings, specifically Pearlin (1999).

There are two broad categories of stressors, event stressors and chronic stressors. *Event stressors* include any sudden and generally unexpected phenomena that result in a stress outcome. Initial work measured the effect of an event stressor by the amount of change it required of an individual (i.e., the larger the magnitude, the more negative the outcome), but subsequent work has shown this to be a poor measure when taken on its own. In defining the effect of an event it is important to take into account whether or not the event was anticipated (e.g., retirement), whether it represents a closure of another stressor (e.g., divorce after a long period of litigation), or even whether the individual deliberately sought the event as a problem-solving strategy to other stressors (e.g., getting fired from a miserable job). Thus, research shows that seemingly negative life events may actually decrease the likelihood of having a negative stress outcome when

considered in context of a person's other life course trajectory. In fact, current work embeds an understanding of life events (both positive and negative) within the life course framework of transitions, trajectories, and pathways.

Chronic Stressors comprise a wide variety of stressors including status strains, role strains, ambient strains, and quotidian strains. As their name suggest, *status strains* are stressors that arise out of a person's position in the social structure (e.g., living in abject poverty). Furthermore, the holding of a status that is stigmatized or devalued by society (e.g., a particular race, gender, sexuality, or religion) can also be a status strain. *Role strains* focus on the stressors that arise from conflicts or demands within an individual's role-set and they provide stress theory's key link between macro-level influences and individual outcomes. Initial research focused only on the negative effect of having many roles, arguing that they create competing demands on the individual, thus acting as stressors. Yet, subsequent research has shown that under certain conditions having many roles can benefit the individual by providing more fungible resources that carry-over from one role to another. *Ambient strains* focus on the stressors that come from an individual's proximal environment, most often measured as their neighborhood. Here the focus is on threats of crime or violence, or on access to resources like schools, hospitals, fire departments, and other public services. *Quotidian*, or daily, strains are perceived to produce the lowest intensity stressors and arise out of the daily hassles of things like waiting in traffic, fighting for a spot on the subway, or cooking. Research suggests that the effect of these strains may stem more from the fact that they are repeated daily than from the individual stressors themselves.

It is important not just to know the types of stressors an individual faces, but also the timing and interrelationship of these stressors. Stressors rarely occur in isolation from one another. Often, some primary stressor leads to several secondary stressors, a process known as *stress proliferation*. When the sequence of stressors is considered in conjunction with a person's multiple roles, the concept of a *carry-over effect* is introduced, whereby stressors in one role domain or life stage may have impacts in other domains or stages. For example, facing multiple stressors in childhood may have consequences for adult mental health. Similarly, facing stressors at home may have consequences for anxiety levels at work. The study of sequencing is an increasingly important one in the sociological study of stress, as it can better account for the dynamic link between individuals and society as well as illuminate the long-term consequences of stressors that are often obscured by cross-sectional or short-term studies.

Related to the sequencing of stressors is the sequencing of life events, a concept that is a core component of Life Course Theory. Stress researchers and life course researchers have been combining efforts to investigate how the sequencing of life events and transitions leads to both positive and negative outcomes. Two competing arguments exist as to why the timing of life events produces stressors. One argument is that there are societal norms for when certain transitions should be made relative to others and that when individuals deviate from these paths the society produces stressors. For example, in some societies it is a violation of social norms to have children outside of wedlock, thus if a woman violates this norm it may increase her likelihood of experiencing stressors. The other argument puts less emphasis on the violation of societal norms and more on the belief that certain sequences generate practical, objective obstacles, which in turn create stressors. For example, having a child outside of marriage normally

necessitates being both a full-time parent and a full-time mother, something which may or may not generate stressors depending on other factors. In the end, this union of methods, theories, and concepts between life course theorists and stress theorists holds promise for understanding the role of the stress process over a much longer time horizon.

The second major component to the stress model is the role of moderators/mediators like coping strategies, personal resources and social support. *Coping strategies* are the changes people make to their behavioral or psychological state in response to the stressors they encounter. Coping strategies may be focused on changing the situation that is causing the stressors (e.g., finding a new job after being fired), on preventing a stressor from occurring (e.g., marriage counseling to prevent divorce), on re-interpreting the stressors in a different light (e.g., looking at increased job responsibility as an opportunity instead of a burden), or on managing the stress outcomes (e.g., including meditation in one's daily routine). In order to make use of these coping strategies individuals need coping resources which can be either personal or social.

Personal resources include a sense of self-mastery or control over one's life and environment, as well as one's self-esteem. More of the research on personal resources has focused on self-mastery and less of it on self-esteem, but both have been shown to directly reduce the severity and prevalence of stress outcomes as both mediators and moderators. More work, however still needs to be done to understand the interaction effect these personal resources have with social support and coping strategies, as well as their potential to condition the types of social support and coping strategies one receives.

Social Support has been the most widely studied resource and continues to show strong, significant direct and buffering effects on stress outcomes. Social support comes chiefly in the forms of instrumental assistance, informational assistance, and emotional assistance from other people. Three major conclusions can be drawn from the literature on social support:

- being a member of a closely knit group has direct positive mental health benefits, but does not act as a moderator on stress outcomes;
- perceived emotional support (whether or not real) has both direct and buffering effects on the severity and significance of negative life events for stress outcomes;
- having an intimate relationship that encourages confiding in one another has the largest effect on attenuating stress outcomes.

The biggest shortcoming with the work on social support is with how the concept is measured. Progress has been made in treating social support as a type of social network with defined measures of range, density, composition, and availability, but this is not standardized. Furthermore, it is largely measured only from the perspective of the individual under observation without acknowledging that these are reciprocal, social relationships. Along similar lines, future work on social support needs to consider the reciprocal relationship between support and stressors, as having too many stressors or too long a duration of stressors may lead to a weakening of one's social support network.

The final step in the stress process model is the *stress outcome*, which can be any health or mental health illness. Most often sociologists study generalized depression, anxiety, or drug/alcohol abuse, but there is a push to study the co-morbidity of multiple health and mental health outcomes. Aneshensel et al. (1991) were the first to note the importance of studying multiple outcomes in a single study. In their words, "single outcome studies...are clearly inadequate for identifying the impact of social factors on

overall psychological well-being across subgroups of the population” (176). This conclusion is made all the more important given that one of the primary contributions of the sociological study of stress is its focus on the social distributions of mental health and well-being. Much more work is needed on this part of the stress model, but it promises to make an important contribution to researchers in fields outside of sociology.

SEE ALSO: Life Course Perspective, Role Theory, Social Support, Stress and Health, Stressful Life Events, Stress and Migration, Stress and Work

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