The Challenge of Prosperity: Affluence and Psychological Distress Among Adolescents

by Cheryl Rampage, PhD

Ours is the most affluent society in the history of the world, and yet wealth does not protect children from being at risk. Everyone knows someone whose child has seriously faltered, who has fallen into addiction, depression, or a more amorphous sort of "failure to thrive." Current research shows that affluence itself is a risk factor in adolescent development – not just having money, but how having money can distort values, parenting practices, and interpersonal relationships (Levine, 2006).

Affluence is actually a protective factor for young children, and predicts higher birth weight, earlier achievement of developmental milestones and language acquisition, better physical health, and higher academic achievement. However, at early adolescence, affluence changes from a protective factor to a risk factor. By 10th grade, 20% of affluent girls experience clinically significant levels of depression (triple the national average). Anxiety among affluent boys and girls is 25-30% higher compared to other teens. Compared to their

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Our mission is to strengthen and heal families from all walks of life through clinical service, community outreach, education and research. non-affluent counterparts, affluent girls are 15% more likely to use alcohol, and affluent boys are 35% more likely to use alcohol. Popular boys from affluent suburban homes are at the greatest risk for substance abuse (Bograd, 2005; Luthar, 2003).

Unfortunately, affluence as a risk factor far outlasts adolescence. Depression and anxiety are not outgrown, and early experience of these maladies predicts lifelong vulnerability. Substance abuse can take on a life of its own, so what may have started as self-medicating, or solution behavior, can become a full-blown addiction.

Risk factors associated with affluence

Two risk factors related to affluence are associated with problems in adolescent development. The first is achievement pressures, or the child's sense of obligation to be the best academically, socially, athletically, and physically. When this push comes from inside the child, from passion and engagement, it can lead to achievement and satisfaction. However, when the push comes from parents, it can actually reduce children's motivation, commitment and passion.

The problem does not seem to be parents' high expectations, but rather love that is conditional on achievement. When an athletic loss or a poor test score leads to the withdrawal of love by being angry, demeaning or rejecting, the parent is communicating that the child is loved because of what she does, rather than because of who she is. The pressures that affluent parents place on their

Examples of high structure parenting practices for adolescents:

- Having regular household chores and responsibilities
- Having limited access to money, credit cards, and the acquisition of material goods as a means of trying to "feel good"
- Being required to attend regular family dinners several times each week
- Allowing limited privacy
- Participating with the family in social service activities

Examples of high warmth parenting practices for adolescents:

- Letting them know that they are loved, through word and action
- Creating opportunities to have fun together
- Listening to them talk about their inner experience without judgment
- Expressing faith and confidence in them louder and more often than criticisms and doubts
- Not letting parental anxieties spill over to affect them

children are likely to be covert and manipulative rather than overt. The parent hires a math tutor so the child doesn't spoil his GPA by getting a single B, or hires a personal coach to increase the child's chances of making the varsity team as a freshman. When parents over-focus on excelling and being perfect rather than participating, and on winning rather than engagement, they actually discourage the child from trying. As a result, 25% of boys and 15% of girls from affluent families report that they are "under-achievers" (Kindlon, 2001).

The alternative scenario is the adolescent who keeps trying, and may become a driven, joyless, anxious, over-achiever who will do whatever it takes to succeed.

The second risk factor is isolation from parents. This isolation can be both physical and emotional. Emotional isolation can occur even in "close" families. It occurs because children figure out what their parents really want to hear, and will often edit out those elements that would disappoint, disturb, or anger the parent. In addition, although adolescence is very much about developing peer relationships and becoming independent, these very appropriate moves towards autonomy can create distance from parents.

Still, the very best predictor for healthy adjustment in both male and female adolescents is closeness to parents. A large study commissioned by the U.S. Department of Health and Human Service (1999) found that girls' closeness to mothers lessens their vulnerability to depression, and girls' closeness to fathers lowers the likelihood that they will use drugs. For boys, both mother and father closeness play a role in reducing depressive symptoms. Additional findings from this study underscore the essential importance of closeness to parents. For example, other adult influences and relationships did not compensate for distance from parents, and parents could not compensate for each other (that is, having a really great relationship with one parent did not mitigate the consequences of being distant from the other).

The disturbing fact is that, among teens, closeness to parents is inversely correlated to affluence. Multiple factors influence this finding: affluent parents often work long hours and may travel on business. Affluent children are engaged in a high number of extracurricular activities, which erodes the availability of family time (Kindlon, 2001; LeBeau, 1988). Affluent teens may also feel that they don't really matter in their families' lives if they are never asked to contribute economically, if they have few household chores, and they if are not needed for babysitting younger siblings because there are paid caregivers. Even affluent families' homes may serve to limit emotional closeness. In 1950, the average new house in this country was 983 square feet in size. By 2005, that average had mushroomed to 2,414 square feet (National Public Radio, 2006). During this same time period, the average number of children per family declined from 2.4 to 1.8. So families today have only 3/4 as many children as they did half a century ago, but live in houses more than twice as large (U.S. Census, 2006). Teens who have their own bedroom and bath, their own telephone, television, computer, and automobile, have the capability of isolating themselves from their families to an unhealthy degree.

The physical isolation that is possible because of large houses and busy lives makes emotional isolation more likely, too, and it is the emotional isolation that puts adolescents at greater risk. Between 1981 and 1997, the amount of time families spent talking to each other went down by 50% (Kindlon, 2001). A lot of that loss was at the traditional family dinnertime, which has become more a special event than an everyday routine. This phenomenon is not entirely one-sided: it is not only that teens may wish to distance themselves from parents, but also that parents may find after their busy day they don't have much energy left to connect to an adolescent who seems to prefer being alone anyway.

Mitigating the risks of affluence

Mitigating the risks associated with affluence requires parenting practices with a high degree of warmth and structure. Parents today tend to do very well on the warmth dimension, hugging their children and telling them they are loved far more than was true a generation ago.

The structure side of the parenting prescription is more complex. It is not that affluent teens lack structure; in fact, being engaged in an endless string of activities, lessons, and tutoring sessions is part of the problem. Ideally, parents provide the initial structure of the child's life, and then, as the child develops and grows, he or she takes over that function more and more. While no sensible parent would allow a four-year-old to wash her own hair unsupervised, neither would that same parent dream of checking to see whether their fifteen-year-old got all the shampoo out. There are thousands of similar examples in the course of parenting – decisions that parents once made for their children because the children were not yet competent to make, but at some point were handed over to the children to make for themselves. Ideally, by the time adolescents go off to college, they are fully capable of organizing their own day-to-day lives, prioritizing their responsibilities, and managing their social relationships.

However, affluent parents stay more involved in structuring and managing their children's lives for a longer time than do not-so-well-off parents, and are more likely to try to manage their children's involvement with sports, academics, and social relationships. Affluent parents over-function for their children in order to protect them from failure. The problem with this is that learning from failure is one of the greatest character-building experiences a person can have. On the other hand, being rescued from every failure creates a fear of failure, and leads to anxiety and risk aversion. Making one's own decisions and learning from the consequences is the basic methodology of constructing a self. The structuring provided by parents needs to be driven by the child's needs and level of competence, and parents should withdraw the structure as the child demonstrates mastery.

Parents can contribute to children's development in the following ways: 1) by first providing structure and then handing responsibility over to children as they are competent to manage it, 2) by clearly communicating that parental love is not contingent on accomplishment, and 3) by steadfastly communicating love even through the infamous storms and drama of adolescence.

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