



Published in final edited form as:

Curr Dir Psychol Sci. 2005 February ; 14(1): 49–53. doi:10.1111/j.0963-7214.2005.00333.x.

Children of the Affluent:

Challenges to Well-Being

Suniya S. Luthar and **Shawn J. Latendresse**

Teachers College, Columbia University

Abstract

Growing up in the culture of affluence can connote various psychosocial risks. Studies have shown that upper-class children can manifest elevated disturbance in several areas—such as substance use, anxiety, and depression—and that two sets of factors seem to be implicated, that is, excessive pressures to achieve and isolation from parents (both literal and emotional). Whereas stereotypically, affluent youth and poor youth are respectively thought of as being at “low risk” and “high risk,” comparative studies have revealed more similarities than differences in their adjustment patterns and socialization processes. In the years ahead, psychologists must correct the long-standing neglect of a group of youngsters treated, thus far, as not needing their attention. Family wealth does not automatically confer either wisdom in parenting or equanimity of spirit; whereas children rendered atypical by virtue of their parents' wealth are undoubtedly privileged in many respects, there is also, clearly, the potential for some nontrivial threats to their psychological well-being.

Keywords

affluence; risk; contextual influences; socioeconomic status

Children of upper-class, highly educated parents are generally assumed to beat “low risk,” but recent evidence suggests that they can face several unacknowledged pressures. In this article, we describe programmatic research relevant to this issue. We begin by characterizing the samples of youth we have studied across suburban communities in the Northeast. We then provide an overview of findings of problems in various spheres of adjustment and discuss associated implications for research, practice, and policy.

RESEARCH INVOLVING UPPER-CLASS SAMPLES

Since the late 1990s, our group has accumulated data on three cohorts of youth from high-income communities; characteristics of these cohorts are summarized in Table 1. The first, which we refer to as Cohort I, consisted of 264 tenth graders attending a suburban high school serving three contiguous towns.¹ These students were followed annually through their senior year, and as sophomores, we contrasted them with 224 tenth graders in an inner-city school.

Cohort II encompassed 302 middle school students from another high-income town, whom we studied when they were in the sixth and seventh grades (Luthar & Becker, 2002). Cohort III, subsequently recruited from the same community as Cohort II, incorporated all children

Address correspondence to Suniya S. Luthar, Teachers College, Columbia University, 525 West 120th St., Box 133, New York, NY 10027-6696.

¹We are currently examining effects of varying affluence across neighborhoods subsumed in wealthy townships.

attending the sixth grade during the 1998–1999 academic year, and these students were then followed annually (11th-grade assessments had been completed at the time of writing this report). In parallel, we obtained annual assessments of an inner-city middle school sample, enabling further comparisons of youngsters from widely disparate sociodemographic settings.

EVIDENCE OF ADJUSTMENT DISTURBANCES

The first set of questions addressed with Cohort I was focused on substance use and related problems (Luthar & D'Avanzo, 1999), and descriptive analyses showed many signs of trouble among the suburban students. These youngsters reported significantly higher use of cigarettes, alcohol, marijuana, and hard drugs than did their inner-city counterparts, and also showed elevations in comparison with national norms. Suburban teens also reported significantly higher anxiety and somewhat higher depression than did inner-city youth. In comparison with normative samples, girls in the suburbs were three times more likely to report clinically significant levels of depression.

Also disturbing were findings on correlates of substance use. Among affluent (but not inner-city) youth, substance use was linked with depression and anxiety, suggesting efforts to self-medicate; this “negative affect” type of substance use tends to be sustained over time, rather than remitting soon after the teen years. In addition, among suburban boys (but not other subgroups in the study), popularity with classmates was linked with high substance use, suggesting that the peer group may endorse and even encourage substance use among affluent teenage boys.

In Cohort II, we saw no evidence of disturbance among the sixth graders, but among the seventh graders, some problems were beginning to emerge (Luthar & Becker, 2002). Among the older girls, for example, rates of clinically significant depressive symptoms were twice as high as those in normative samples. Whereas no boys in the sixth grade had used alcohol or marijuana, 7% of seventh-grade boys reported having drunk alcohol until intoxicated or using marijuana about once a month. Finally, results supported the earlier findings on correlates of substance use, which had significant links with depression and anxiety in this middle school sample, and with peer popularity among the seventh-grade boys.

In Cohort III, as well, preliminary data showed that suburban sixth graders scored below national norms on depression and anxiety, and also had lower scores than inner-city comparison youth. Once again, however, some signs of trouble began to emerge by the seventh grade, with popular students, for example, reporting significantly higher levels of substance use than others (Luthar & Sexton, 2004). We are currently examining different developmental pathways to problems and to well-being from pre- through midadolescence.

WHY MIGHT “PRIVILEGED” YOUTH BE TROUBLED?

In exploring pathways to maladjustment in affluent suburbia, we considered two sets of potential antecedents in our study of Cohort II. The first encompassed *achievement pressures*. Statistical analyses showed, in fact, that children with very high perfectionist strivings—those who saw achievement failures as personal failures—had relatively high depression, anxiety, and substance use, as did those who indicated that their parents overemphasized their accomplishments, valuing them disproportionately more than their personal character (Luthar & Becker, 2002).

The second potential antecedent was *isolation from adults*, both literal and emotional. Among upper-middle-class families, secondary school students are often left home alone for several hours each week, with many parents believing that this promotes self-sufficiency.

Similarly, suburban children's needs for emotional closeness may often suffer as the demands of professional parents' careers erode relaxed "family time" and youngsters are shuttled between various after-school activities. Again, results showed that both literal and emotional isolation were linked to distress as well as substance use.

We next sought to explore family functioning in greater depth among sixth graders in Cohort III and, simultaneously, their inner-city counterparts. A common assumption is that parents are more accessible to high- than to low-income youth, but our data showed otherwise (Luthar & Latendresse, in press). We considered children's perceptions of seven aspects of parenting, and average ratings on four of these dimensions were similar for the two sets of students: felt closeness to mothers, felt closeness to fathers, parental values emphasizing integrity, and regularity of eating dinner with parents. Inner-city students did fare more poorly than suburban students on two of the remaining three dimensions—parental criticism and lack of after-school supervision—but at the same time, they did significantly better than suburban students on the last dimension, parental expectations.

Results also revealed the surprising unique significance of children's eating dinner with at least one parent on most nights. Even after the other six parenting dimensions (including emotional closeness both to mothers and to fathers) were taken into account, this simple family routine was linked not only to children's self-reported adjustment, but also to their performance at school. Striking, too, were the similarities of links involving family dining among families ostensibly easily able to arrange for shared leisure time and those who had to cope with the sundry exigencies of everyday life in poverty.

Subsequent analyses with Cohort III students and their inner-city counterparts when they were in the seventh grade revealed similarities in peer-group influences as well (Luthar & Sexton, 2004). Early adolescents at both socioeconomic extremes showed admiration for classmates who openly flouted authority. In the suburban context, high peer status was linked with overt displays of low academic effort, disobedience at school, aggressiveness among girls, and substance use among boys, and in the urban context, high peer status was associated with aggression and substance use among both boys and girls. Also noteworthy were startlingly strong links between physical attractiveness and peer popularity among affluent girls. This variable alone explained more than half the variation in their popularity scores, suggesting particularly high emphasis on physical appearance among this subgroup of girls (the links between attractiveness and popularity were substantially weaker among inner-city girls and among both groups of boys). All in all, the substantive message was that affluent adolescents, just like their inner-city counterparts, valued some peer attributes that could potentially compromise overall competence or well-being.

DOES REBELLION AMONG AFFLUENT TEENS REALLY "MATTER"?

All adolescents might be drawn to overt forms of rebellion, but it is quite plausible that wealthy youth, unlike their poor counterparts, can dabble in drug use or delinquency without any substantive damage to their life prospects, given various safety nets (i.e., concerned adults and access to high-quality treatment services). To examine this possibility, we returned to our high school Cohort I data, as older teens reflect more variability on such forms of behavioral deviance than middle school students do. Once again, our findings showed that youth at the socioeconomic extremes were more similar than different (Luthar & Ansary, in press). In both settings, we found a distinct subgroup of teens who manifested multiple behavior problems—substance use, delinquency, poor interest in academics—and had school grades that were significantly lower than the average. Although the findings on urban adolescents were unsurprising in light of prior empirical evidence, the results on affluent youth were noteworthy in indicating that, despite the resources ostensibly available

to them, nearly 1 of every 10 teenagers in this cohort exhibited high levels of behavior disturbances across multiple domains, and concurrently experienced significant risk for poor grades during the sophomore year of high school.

We also examined substance use among this subgroup of suburban sophomores annually through the remainder of high school (McMahon & Luthar, 2004). Twenty percent of these students showed persistently high substance use across time. Furthermore, across all three assessments, this group also showed relatively high levels of depression and physiologically manifest anxiety (e.g., nausea, difficulty breathing), as well as poor grades and negative teacher ratings. For as many as one in five of these affluent youth, therefore, high substance use, coexisting with depression, anxiety, and both behavioral and academic problems, was sustained up to the age of 18 years.

IMPLICATIONS FOR INTERVENTIONS

All is not necessarily well among children of the affluent. Across three suburban cohorts, a nontrivial proportion of youth reported diverse adjustment problems, and disconnectedness in families and pressured lifestyles constituted discernible challenges (for parallel evidence among adult samples, see Csikszentmihalyi, 1999; Kasser, 2002; Myers, 2000).

Why do affluent youth have these problems—despite all the mental health services ostensibly available? One possibility is that although high-income parents are generally willing to place overtly troubled youth in psychotherapy or on medication, they are less eager to delve into the less “conspicuous” problems in their children, in themselves, or in family processes more generally. Research has shown, for example, that parents in general tend to be aware when their children are depressed, but tend not to seek professional help unless symptoms include those that inconvenience adults, such as disobedience or asthma (Puura et al., 1998).

Upper-class parents can be particularly reluctant to seek help for the less visible problems because of privacy concerns, as well as embarrassment. Affluent adults are often very concerned about keeping family troubles private; this is not surprising, as misfortunes of the wealthy tend to evoke a malicious pleasure in people who are less well-off (a phenomenon called *schadenfreude*; see Feather & Sherman, 2002). Upper-class parents also can feel more compelled than most to maintain a veneer of well-being, feeling that “those at the top are supposed to be better able to handle their problems than those further down the scale” (Wolfe & Fodor, 1996, p. 80).

Then there are realities of everyday lives that impede change. In the subculture of affluent suburbia, overscheduled days are often the norm for young people, with high school students participating in numerous activities, which can then be logged on college applications. The careers of many parents, similarly, do in fact demand long work hours: Job sharing and flexible hours are not an option for chief executive officers or university presidents. At the same time, these careers do bring many personal rewards, including the gratification of mastering substantial professional challenges, and of providing well for stellar educations and leisure activities for the next generation. Few people would blithely repudiate such rewards.

Also relevant is practitioners' perseverance—or lack thereof—in pursuing nascent signs of trouble. School psychologists, for example, often hesitate to express concerns to high-income parents, anticipating resistance and sometimes even threats of lawsuits. Consequently (and paradoxically), wealthy youth can end up having less access to school-based counseling services than do students who are less well-off (Pollak & Schaffer, 1985). Clinicians may also minimize problems they see among the wealthy. The same symptoms

are more often viewed as signs of mental illness among the poor than among the affluent; by corollary, the rich are more often dismissed as “not needing help” even when they report distress commensurate with that of others typically judged to be needing assistance (Luthar & Sexton, 2004).

Even if affluent youth do, in fact, receive high-quality psychiatric care, it should be emphasized that this is no substitute for strong attachments with parents. Decades of work on children's mental health policies have established that psychotherapy to address crystallized maladjustment is largely unproductive as long as the child's everyday life continues to present major challenges to adjustment (Knitzer, 2000).

In the future, an expedient first step toward addressing these issues would be to raise awareness of the potential costs of overscheduled, competitive lifestyles (Luthar & Sexton, 2004). This can be done effectively via books comprehensible to the lay public, such as those by Kasser (2002) and Myers (2000). Although obviously not panaceas, such dissemination efforts could begin to sensitize caregivers to risks in the context of affluence—risks that they (like developmental scientists) may have been only faintly aware of in the past.

Consideration of these issues is important not only for the families themselves, but also for society in general. Many children of highly educated, affluent parents will likely come to assume positions of influence in society, and their own equanimity of spirit may have far-reaching ramifications. Depression vastly impairs productivity. And people who are unhappy, with a fragile, meager sense of self, can be more acquisitive than philanthropic, focused more on gaining more for themselves than on improving the lot of others (Diener & Biswas-Diener, 2002).

CONCLUSIONS

Until the 1970s, developmental scientists had largely ignored children in poverty, and it is critical to correct the neglect of another group of youngsters heretofore invisible in psychological science: those in high-income families. Systematic research is needed on the generalizability of research results obtained thus far. Scientists need to establish, for instance, whether elevated distress or pressured lifestyles occur in wealthy metropolitan locations, and not just in suburban communities. It will also be important to determine whether these problems are discernible in nationally representative samples (assuming, of course, that high-income families are appropriately represented in them). Also critical are prospective studies that can indicate (a) whether problems such as depression or drug use generally represent temporary blips of adolescent angst among the wealthy or are early signs of continuing problems and, conversely, (b) if factors such as prolonged isolation and pressure within families do, in fact, set apart those teens who carry adolescent adjustment disturbances into adulthood. Finally, practitioners and parents must be alert to the risks potentially attached to wealth and status. The American dream spawns widespread beliefs that Ivy League educations and subsequently lucrative careers are critical for children's long-term happiness. In the sometimes single-minded pursuit of these goals, let us not lose sight of the possible costs to mental health and well-being of all concerned.

Acknowledgments

Preparation of this manuscript was supported by grants from the National Institutes of Health (RO1-DA10726, RO1-DA11498, RO1-DA14385), the William T. Grant Foundation, and the Spencer Foundation.

Recommended Reading

- Csikszentmihalyi M. 1999 (See References)
 Kasser T. 2002 (See References)
 Luthar SS. The culture of affluence: Psychological costs of material wealth. *Child Development*. 2003; 74:1581–1593. [PubMed: 14669883]
 Luthar SS, Sexton C. 2004 (See References)
 Myers DG. 2000 (See References)

REFERENCES

- Csikszentmihalyi M. If we are so rich, why aren't we happy? *American Psychologist*. 1999; 54:821–827.
- Diener E, Biswas-Diener R. Will money increase subjective well-being? *Social Indicators Research*. 2002; 57:119–169.
- Feather NT, Sherman R. Envy, resentment, Schadenfreude, and sympathy: Reactions to deserved and undeserved achievement and subsequent failure. *Personality and Social Psychology Bulletin*. 2002; 28:953–961.
- Kasser, T. *The high price of materialism*. MIT Press; Cambridge, MA: 2002.
- Knitzer, J. Early childhood mental health services: A policy and systems development perspective. In: Shonkoff, JP.; Meisels, SJ., editors. *Handbook of early childhood intervention*. 2nd ed.. Cambridge University Press; New York: 2000. p. 416–438.
- Luthar SS, Ansary NS. Dimensions of adolescent rebellion: Risks for academic failure among high- and low-income youth. *Development and Psychopathology*. in press.
- Luthar SS, Becker BE. Privileged but pressured: A study of affluent youth. *Child Development*. 2002; 73:1593–1610. [PubMed: 12361321]
- Luthar SS, D'Avanzo K. Contextual factors in substance use: A study of suburban and inner-city adolescents. *Development and Psychopathology*. 1999; 11:845–867. [PubMed: 10624729]
- Luthar SS, Latendresse SJ. Comparable “risks” at the SES extremes: Pre-adolescents' perceptions of parenting. *Development and Psychopathology*. in press.
- Luthar, SS.; Sexton, C. The high price of affluence. In: Kail, RV., editor. *Advances in child development*. Vol. 32. Academic Press; San Diego, CA: 2004. p. 126–162.
- McMahon TJ, Luthar SS. Substance use, psychopathology, and social competence: A longitudinal study of affluent, suburban, high school students. 2004 Manuscript submitted for publication.
- Myers, DG. *The American paradox: Spiritual hunger in an age of plenty*. Yale University Press; New Haven, CT: 2000.
- Pollak JM, Schaffer S. The mental health clinician in the affluent public school setting. *Clinical Social Work Journal*. 1985; 13:341–355.
- Puura K, Almqvist F, Tamminen T, Piha J, Kumpulainen K, Raesaenen E, Moilanen I, Koivisto AM. Children with symptoms of depression: What do adults see? *Journal of Child Psychology and Psychiatry and Allied Disciplines*. 1998; 39:577–585.
- Wolfe JL, Fodor IG. The poverty of privilege: Therapy with women of the “upper classes.”. *Women & Therapy*. 1996; 18:73–89.

TABLE 1

Characteristics of the Samples

Source and sample	N	Minority ethnicity in sample (%)	Eligible for free or reduced lunch in school (%)	Median annual family income in region (census)	Adults with graduate or professional degrees in region (%; census)
Luthar & D'Avanzo (1999)					
Suburban Cohort I: 10th graders followed through high school	264	18	1	\$80,000–\$102,000	24–37
Comparison sample: inner-city 10th graders	224	87	86	\$35,000	5
Luthar & Becker (2002)					
Suburban Cohort II: 6th and 7th graders	302	8	3	\$120,000	33
Luthar & Latendresse (in press)					
Suburban Cohort III: 6th graders followed annually through high school (ongoing)	314	7	3	\$125,000	33
Comparison sample: inner-city 6th graders followed through 8th grade	300	80	79	\$27,000	6