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**An idiographic and nomothetic assessment of coping with daily stressors: Issues of consistency and effectiveness**

**Dolan, Carol Ann, Ph.D.**

**The University of North Carolina at Greensboro, 1986**

**U·M·I**  
300 N. Zeeb Rd.  
Ann Arbor, MI 48106



AN IDIOGRAPHIC AND NOMOTHETIC ASSESSMENT OF COPING WITH  
DAILY STRESSORS: ISSUES OF CONSISTENCY  
AND EFFECTIVENESS

by

Carol A. Dolan

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Approved by

Jacquelyn W. White  
Dissertation Adviser

APPROVAL PAGE

This dissertation has been approved by the following committee of the Faculty of the Graduate School at The University of North Carolina at Greensboro.

Dissertation  
Adviser

Jacquelyn W. White

Committee Members

Timothy D. Austin

Phillip L. Lamm

Ernest A. Lunsden

Jerry A. Bazzarre

11-11-1986

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This study describes an individual and group assessment of coping with daily stressors. Specific daily stressors, perceived and reported as stressful by subjects were examined in an attempt to better understand the relationship among stressful daily hassles, the types of coping strategies used in these situations, and the outcomes these strategies have on terms of perceived effectiveness. At the individual level, an individual's "typical" coping patterns, their self-perceived degree of effectiveness and the extent to which these patterns were used consistently were examined. On the group level, general patterns of coping strategies, and the relationship between coping and effectiveness were investigated. The multiplist approach to personality assessment was used as a general framework in which a broad range of behaviors (coping strategies), settings (contexts), occasions (25 episodes) and respondents were used in order to generate a thorough system of description, measurement and evaluation of coping with daily stress in the naturalistic settings in which coping occurs.

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## DEDICATION

To Jack - you will always be with me.

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## CHAPTER I

### INTRODUCTION

Current research involving coping indicates that we need to approach the study of coping as a complex process reflecting the nature of the relationship between individuals and their environments.

The cognitive-phenomenological approach by Richard Lazarus and his associates (Coyne & Lazarus, 1980; Folkman & Lazarus, 1980; Kanner, Coyne, Schaefer & Lazarus, 1981; Lazarus & Launier, 1978; Lazarus & Folkman, 1984) is one such approach. It identifies coping as a process of cognitive appraisal and reappraisal of stressful situations. This approach considers antecedent conditions, context, psychological mediators, general modes of coping and specific coping responses.

The present paper describes a combined idiographic and nomothetic assessment of coping with daily hassles. In general, specific daily hassles which are perceived as stressful by subjects were examined in an attempt to better understand the relationship between stressful daily hassles, the types of coping strategies used in these situations, and the outcomes these strategies have in terms of their perceived effectiveness. At the idiographic, or individual level, an individual's "typical" coping responses, their effectiveness, and the extent to which they are used consistently by the subject were examined. Nomothetically, general patterns of coping strategies, and the relationship between coping and effectiveness were examined.

## CHAPTER II

### REVIEW OF LITERATURE

#### Consistency

An important issue in personality psychology is the consistency of behavior. While it is evident to most personality researchers that some degree of consistency, stability, or coherence in behavior does exist, this notion has not received a large amount of support in the research literature (See Epstein, 1979). Although situation theorists maintain that the situation influences individuals' behavior to a greater extent than do person variables, traditional theorists attribute the lack of evidence for consistency to inappropriate methodology. For example, a typical design attempts to find correlations between a general personality attribute and a specific behavior, oftentimes in a contrived laboratory setting, using a large number of subjects. This type of design can easily obscure important information regarding the organization and structure of the personality of individuals.

Recently, other personality assessment techniques have been reported (Epstein, 1979 & 1980; Bem & Funder, 1978; Lamiell, 1981 & 1983b; and the 1982 Nebraska Symposium on Motivation). In a general sense, these methods attempt to assess consistency in behavior while taking into account features of the situation. Individually, each of them focuses on a particular aspect of the consistency issue such as temporal stability (Epstein's aggregation technique), information

processing (Mischel's cognitive prototypes) and the behavior of persons in situations (Bem & Funder's template matching).

A combination of these approaches may be best suited for the search for consistency in behavior. For instance, the consistency in coping and its relationship to the effectiveness of coping might become evident if it were to be studied over time and across situations, both on the individual and group levels, and with regard to the context. This approach can generate specific information about the behavior of individuals and can also be applied to the study of general trends of behavior on the group level.

On the individual level, the study of coping in a variety of situations provides opportunity for discovering consistent patterns of coping behaviors typically used by the individual. The question, then, is whether particular coping strategy types are likely to be regularly associated with certain context types. If so, it would be possible to identify patterns of coping by defining situations along specific contextual dimensions. In addition, the relationship between individuals' patterns of coping and their perceptions of the effectiveness of coping can be investigated.

On the group level, it would be of interest to find that particular patterns of coping behaviors are common to groups of individuals, given information about the situation. And, given that consistency of coping is found, then the nature of the relationship of those coping patterns and subjects' perceptions of the effectiveness of coping can also be investigated.

## Stress

According to Selye (1983), stress is "too well known and too little understood", and is defined in general terms as the nonspecific response of the body to any demand. Selye also lists the ways one usually deals with stress, by 1) removing unnecessary stressors, 2) not allowing neutral events to become stressors, 3) developing proficiency to deal with unavoidable situations, and 4) seeking relaxation or diversion from the demanding situation. From Selye's perspective, the goal is to master stress, not to eliminate it entirely, since it is necessary to the life process.

Kasl (1983) defines stress as an environmental condition, an appraisal by the individual of that condition, the individual's response to that condition, and as some relationship between environmental demands and the individual's ability to meet those demands. Antonovsky (1980) defines a stressor as any demand, which is subjectively perceived and interpreted by the individual as stressful, made by the internal or external environment on an individual that upsets its homeostasis. Menaghan (1983) views stress as an actual or perceived mismatch between persons and their environments. Finally, as a reconciliation of these views, Coyne & Lazarus (1980) approach stress as a process, involving a person-environment transaction in which the demands of the environment exceed the resources of the individual.

These are but a few of the ways in which stress has been conceptualized in recent years. A key feature in these definitions is an emphasis on stressful situations as perceived and interpreted by the

individual. Also, stress represents a wide range of events (internal, external, objective, subjective) and types (chronic, acute), and can be analyzed at different levels (social, psychological, physiological) (Eckenrode, 1984).

The type of stress is an important component in the study of the coping process. The majority of past research and assessment has focused on "acute" stressors, which are defined as urgent aversive conditions that occur within a limited period of time. These types of stressors are often assessed by use of the Holmes-Rahe Social Adjustment Scale (1967), and include major life events such as death of a loved one, loss of job, etc. More recently, researchers have turned to the study of less catastrophic, "chronic" stressors (Campbell, 1983, DeLongis, Coyne, Dakof, Folkman & Lazarus, 1982; Folkman & Lazarus, 1980; Kanner, Coyne, Schaefer & Lazarus, 1981). Chronic stressors are those relentless, aversive and persistent conditions of daily living, including ambient stressors and daily hassles. Ambient stressors are global environmental stressors such as air pollution, noise and crowding (Campbell, 1983). Daily hassles are those stable, commonplace and persistent occurrences of everyday life (Lazarus & Cohen, 1977).

Since daily hassles will be a primary focus in this study, they will be defined more specifically. Daily hassles are those irritating, frustrating and repetitious demands of everyday transactions that represent an imbalance between expectancies and reality. According to Kanner, et al. (1981), daily hassles require relatively minor adaptive responses, yet have been found to have an effect on health, morale and

social functioning. Examples of the many situations that could be considered daily hassles include getting in the longest line at the bank, an inconsiderate co-worker, or a minor argument with a family member.

The relationship between daily hassles and psychological symptoms and health has been explored by Kanner, et al. (1981) and DeLongis, et al. (1981). In the Kanner, et al. study, both daily hassles and major life events were assessed in terms of their impact on psychological symptoms (such as morale and affect). It was found that the Hassles scale, an aggregated daily hassles measure, was a better predictor of psychological symptoms than were major life events scores. In DeLongis, et al., daily hassle measures were better predictors of subsequent levels of physical health. Both of these studies suggest that daily hassles represent an appropriate context for the study of stress, coping and their adaptational outcomes.

"We need to assess more systematically individual and group differences in the context of hassles, since more than life events, these are often apt to reveal the sources of stress that people experience and the kinds of problems with which they must cope". (Kanner, et al., 1981, p. 23)

### Coping

The relationship between coping and stress is one that has important implications for psychology, particularly in relation to social functioning and health. Researchers have proposed a variety of conceptualizations of the nature of the coping process, including coping as the method of adaptation that occurs in extreme situations (White, 1974), or as a basic way to manage problems (Haan, 1977). In general,

coping can be viewed as the responses an individual makes to stress. One of the more thorough treatments of the coping process has been described by Lazarus and his colleagues. Roskies & Lazarus (1980) state that coping isn't just a response to something, but is an active force shaping what is happening and what will happen. In other words, coping can be defined as a process of managing demands that are appraised by the individual as exceeding his/her resources (Lazarus & Folkman, 1984).

Research on coping can be categorized as those studies that treat coping as a trait, or those that study coping as behavior styles. By conceptualizing coping as a trait, one attempts to classify people in order to make predictions about their coping behaviors in stressful situations. The implication that persons behave in a consistent manner across situations and over time has not been supported by the research evidence (Folkman & Lazarus, 1980).

"If the assessment of coping traits really allowed us to predict what a person would actually do to cope in any stressful encounter, research would be a simple matter....Existing measures of what we call coping traits do not represent the complexity and variability that characterize actual coping processes." (Lazarus & Folkman, 1984, pp. 288-289.)

A more reasonable approach to coping would focus on the multidimensional and dynamic properties of the coping process, rather than coping as a unidimensional, stable trait. Using multiple situations and observations could well enhance evidence for consistency in coping.

Coping styles refer to broad ways of relating to people and situations that are stress-producing. In general, this approach tends to yield idiographic portraits, which do not lend themselves to interpersonal comparisons and group analyses. A summary of coping styles that takes into account the complexity of the coping process would provide a sound basis for the study of the relationship between coping and the outcomes of the coping process.

Two areas of study, individual differences and moderator variable research, have made an attempt to identify personality variables that are related to the coping process. Among the individual differences studied are hardiness (Kobasa, 1979; Kobasa, 1982; Kobasa & Pucetti, 1983; Kobasa, Maddi & Courington, 1981), resilience (Murphy & Moriarty, 1976) and vulnerability (Garmezy, 1981). These three terms, in essence, refer to one's ability to resist the negative effects of stress on such adaptational outcomes as health, morale and social functioning.

Internal locus of control has been identified as a moderator variable related to less severe effects of stress on physical health and psychological symptoms (Lefcourt, Martin, & Saleh, 1984; Lefcourt, Miller, Ware & Sherk, 1981; Johnson & Sarason, 1978; Parkes, 1984; Sandler & Lakey, 1982). Johnson & Sarason (1978) also found response to challenge, or an active approach to problem solving to be a moderator of stress. Others include social support (Ganellen & Blaney, 1984), social interest (Crandall, 1984), sense of humor (Martin & Lefcourt, 1983) and commitment (Kobasa, 1982).



The individual differences and moderator variable literature provide useful correlational information regarding the relationship between personality variables and one's general ability to cope with stress. However, these studies do not address the antecedent conditions of a coping episode, modes of coping, specific coping responses or the outcomes of the coping process. In addition, both the study of coping as a style and the study of coping as trait show little predictive value. Consistency in coping is only inferred from some other moderator or trait variable.

What is needed in coping research is a study of the process as it occurs in individuals, across different situations and over time.

"By assessing how a person copes in diverse transactions, it becomes possible to evaluate the sensitivity of an individual's coping patterns to changes in the environment, and its stability across such transactions." (Cohen & Lazarus, 1979, p. 113).

### Effectiveness

Also of key importance to the study of coping and stress is how adaptational outcomes such as morale, social functioning and somatic health are effected. Morale is basically one's satisfaction or happiness with oneself and the conditions of one's life. Social functioning involves several areas such as employability, marital satisfaction, community involvement and sociability. Somatic health is more difficult to define, since it is often impossible to identify the onset of illness, or whether subjective (patient's perceptions) or laboratory (medical diagnosis) criteria are used to identify illness.

These outcomes have typically been assessed using interindividual standards which compare one individual to another, or which compare groups of individuals. However, it appears that this assessment may not be adequate, since stress differs in type and intensity, and is perceived in different ways by individuals. An intraindividual approach could assess how one individual's health, social functioning and morale are affected by stress, and then be compared interindividually.

Central to the outcome of coping with stress is the perceived effectiveness of one's coping response. According to Menaghan (1983), positive outcomes involve the individual being able to manage stress successfully, and show evidence for effectiveness. Indicators of effectiveness include the perception of helpfulness, reduction of feelings of distress, and a reduction in the problem level. Effectiveness is achieved by using coping behaviors that involve direct action on the environment or self, interpretive reappraisal of the situation, and/or emotion management.

Evidence for effectiveness, according to Menaghan, is not very abundant. Although the relationship between stable coping styles, or specific coping efforts and their relative effectiveness has not received too much attention, coping resources such as locus of control and sense of mastery (general orientations to the world) have been related to effective coping (Johnson & Sarason, 1979; and Pearlin & Schooler, 1978).

By investigating effectiveness and coping over a variety of situations, it would be possible to discern whether there is consistent use of particular strategies deemed more effective by individuals, relative to strategies that are not used in a consistent manner. From Menaghan's perspective, it appears that stability in coping style, like stable coping resources such as locus of control, should be associated with effective coping.

The present study tested hypotheses concerning consistency in coping, and perceptions of effectiveness, in a variety of situations, within specific context types, both on the individual and group levels.

#### Methodological Considerations

The traditional approaches to the study of coping and stress (both of coping as a disposition and of the situational determinants of coping) focus either on the personality correlates of a coping trait, or on specific coping events. Both tend to miss the hidden complexities of the coping process. The interindividual emphasis often uses as its unit of analysis a single antecedent feature, measured once as a stable event, and some outcome factor, and uses large samples for comparisons to be made across individuals. But this tells us nothing about how the coping process is related to the particular outcome for any individual.

Coyne and Lazarus (1980) have summarized several reasons why the traditional laboratory design may not be appropriate in stress and coping research. First, laboratory studies do not provide descriptive information about the sources of stress, available resources, emotional reactions and coping responses that would be available in a naturalistic

setting. Second, they do not provide information on the emergence and development of coping responses, and how health, social functioning and morale are affected. Third, due to ethical constraints, experimental stressors typically differ from stressors in everyday life in complexity, severity, and duration. Fourth, it is difficult in laboratory designs to control key variables without also constraining the subjects' resources and range of coping responses. And fifth, outcomes of lab studies are often generalized to naturalistic settings, without sufficient consideration for external validity. For these reasons, it is clear that a traditional laboratory experiment that precisely controls variables that are assumed to be central to the coping process actually tend to overlook external validity issues.

A preferable methodology would focus on an individual's coping processes, and the conditions under which the coping process develops and changes. In the traditional types of designs,

"the relevant psychological and social processes - how the subjects construe or appraise their ongoing transactions with the environment, how they cope, the kinds of patterns involved - are inferred rather than directly examined". (Coyne & Lazarus, 1980, pp. 146-147.)

The present study directly examined these variables, in the naturalistic settings in which daily hassles occur, and across diverse situations that individuals construe to be stressful. Methodological concerns

The complexity and variability of the ways people actually cope have tended to be underestimated or ignored in much previous research. The main reason for this is that the primary methodological approach is

to treat coping as a "trait" or "style". This approach has been shown to have little predictive value in terms of the actual coping process.

The present study represented an attempt to use the multiplist approach (Houts, et al, 1986), in which multiple behaviors are examined over multiple occasions, in multiple settings, using a variety of subjects. Typically, in research in personality, only one or two of these components are addressed. Some approaches that have attempted to deal with these components include Bem's idiographic method (1983), Epstein's traditional nomothetic trait conceptualization (1979), Mischel's information processing method (1979) and Buss and Craik's approach that looks only at overt behaviors (1984). However, none of these approaches address all four of the multiplist criteria.

Each of these components of the multiplist position is examined to some extent in the present study. Each will be discussed here, in terms of how the multiplist criteria are met.

Sampling of multiple behaviors requires a definition "of the criterion space, to select items as belonging to different parts of this space, to rate items for their prototypicality, and to insure their reliability" (Houts, et al., 1986, p. 76). The coping strategies used in the present study are derived from a great deal of pilot work by Lazarus and associates (Lazarus et al., 1985). The items on the Ways of Coping Scale represent a sample of 66 ways that people cope with stress. Although the entire range of possible behaviors may not be included, the Ways of Coping Scale offers a thorough checklist, and is considered to be very well constructed. The eight factors used are suggested by the

authors, since they were derived from a community sample. The cluster analysis performed on the present data supports this suggestion.

The sample of settings, or contexts, used in prior research often appears to be dictated by convenience. A sample is required that is representative of all situations in which coping behaviors occur. In the present study, 25 situations per subject were sampled, potentially allowing for a wide range of stressful encounters to be described. These situations were denoted as one of three contexts - work/school, family/friends, and health/finances. This designation could have taken any number of forms. For example, Caspi, Bolger & Eckenrode (1986) used 4 contexts: child-related, adult-related, work-related, and non-specific. Pearlin & Schooler (1978) used four types of social roles as sources of daily stress: marriage partner, household manager, parent, and worker. Folkman and Lazarus (1980) used 3 contexts: work, family, and health matters.

In the present study, subjects were asked to assign each episode to one of the three contexts. It was felt that the three contexts used here were perceived as distinct, and encompassed a vast number of potential stressors. Whether or not this classification is optimal was not the primary concern of this study. It was how a set of situations perceived as similar (e.g., work situation) can provide information about the coping strategies used in that context. This classification also allows for a comparison with the Folkman and Lazarus (1980) study, on whose conceptual model the present study was based.

Sampling over time is typically problematic. However, for temporal stability to be adequately assessed, longer time frames are required. In the present study, daily hassles were sampled each daily, or every other day, so that the time frame was on the average two months. Two months would probably not be appropriate in sampling major life stressors, since major life stressors tend to fluctuate in intensity over time. Daily hassles, however, are by definition, short in duration, and their severity does not tend to fluctuate dramatically over this short time span. For the purposes of the present study, the time frame sampled seemed appropriate.

Sampling over subjects tends to be another problematic area. While one wishes to work with a relatively homogeneous group in order to limit between-subject variability, a diverse sample provides more information, and allows for greater generalizability. A great proportion of personality and social research uses college undergraduate subjects. In the stress and coping literature, the tendency is to use non-student subjects, since the kinds and frequencies of stress are more representative than those of the college population. In the present study, a sample of 25 college-educated, white women were used. Some were married, some had children, and all worked full-time, either at a career, or as a graduate student. Although there were many demographics in common (SES, race and sex), there was enough of a mixture of lifestyles to label this sample as professional women. This type of sample is rarely studied in the stress literature, particularly in relationship to coping strategies.

In summary, this study attempted to include a broad range of behaviors, settings, occasions and respondents without losing control of these factors. In so doing, a thorough description of ways people cope was generated, and questions concerning the relationships between consistency in coping and coping effectiveness were addressed. This procedure addressed idiographically within subject variability, and nomothetically, central tendencies regarding coping, consistency and perceived effectiveness for the group.

Using the multiplist approach as a general framework, the present study addressed three questions. First, to what extent are people consistent in the use of coping patterns? Second, in what way does context influence the types of and consistency in coping strategy use? And third, what kind of relationship exists between consistency in coping and perceptions of effectiveness.

#### The Cognitive-phenomenological Approach

The cognitive-phenomenological approach to the study of coping will be summarized, since it is the conceptualization which provides the most comprehensive treatment of the coping process. (See Folkman & Lazarus, 1980; Coyne & Lazarus, 1980; Lazarus & Folkman, 1984.) From this perspective, coping involves cognitive appraisal, which is defined as a "person's continually re-evaluated judgements about the demands and constraints in ongoing transactions with the environment, and his/her resources and options for managing them." (Coyne & Lazarus, 1980, p. 150)



In primary appraisal, the situation is evaluated as stressful, and the distinction is made between harm/loss, threat, and challenge. A harm/loss situation occurs when the individual's well-being is damaged, as defined by his/her values, beliefs and commitments. A threatening situation is characterized by uncertainty and ambiguity, and involves anticipatory coping in order to prevent potential harm. Challenge represents situations in which the individual's attention and expectancies are directed at potential gains.

Once this evaluation is made, secondary appraisal follows, in which the individual assesses his/her coping resources, options and constraints. Secondary appraisal includes such factors as previous experience, generalized beliefs about the self and the world, and availability of coping resources such as morale, energy, problem-solving skills, social supports and material resources. Reappraisal refers to the manner in which evaluative judgements change as a function of the kinds of new information and insights about the situation that become available to the individual.

Coping, then, is not just a response to a stressor, but has causal significance for subsequent outcomes due to changing appraisals of past, present and future person-environment transactions. The functions of coping in these transactions are to alter ongoing transaction, and/or to regulate emotional reactions to stress.

A comprehensive strategy to study coping would include addressing antecedent conditions, cognitive factors, general modes of expression, and specific coping responses. The antecedent conditions include both

situational variables such as duration, uniqueness, severity and ambiguity of the situation, as well as person variables such as values and beliefs that serve as an interpretive system and as a resource for coping. Cognitive factors focus on the impact of stress and the coping alternatives involved in the appraisal process. General modes of expression involve the functions of coping (direct, problem-focused strategies and indirect, emotion-focused strategies, for example). And, the specific coping responses are those particular behaviors that an individual may exhibit in the coping episode.

Folkman & Lazarus (1980) attempted to study coping as a process by examining the appraisal process and coping responses, both general and specific, of individuals in many diverse stressful situations. In this study, 100 subjects reported fifteen stressful events which were described in terms of situational factors, and how they coped with those situations. The situational factors were context (work, health, family matters), person(s) involved (self, co-workers, family) and appraisal of the type of situation (whether the subject could do something to change the situation, had to accept or get used to the situation, needed more information about the situation, or had to hold back from doing something). Coping modes were either problem-focused, such as analyzing the situation, or emotion-focused, such as getting angry. Folkman and Lazarus found that there was a relationship between situation type and coping mode. For example, in work situations, problem-focused coping was used more, whereas more emotion-focused strategies were used in health-related matters. Problem-focused coping was associated with

appraisals that involved information-seeking and changing the situation, and emotion-focused coping was associated with appraisals that involved holding back a response, or acceptance of the situation.

Another purpose of the Folkman and Lazarus study was to discover to what extent persons are consistent in the coping strategies used in stressful situations. Consistency was defined as the relative stability in the coping patterns used across all situations. A coping pattern was defined as the proportion of problem-focused coping (high, medium, or low) and emotion-focused coping (high, medium, or low), for a total of nine combinations. Perfect consistency was the repetition of one pattern across all situations. Not surprisingly, they found individuals were more variable than consistent in their use of these coping patterns. Had they analyzed coping strategies within context types, and looked at individual's specific coping responses, the results might have revealed more consistency in the ways people cope with stress.

The Folkman & Lazarus study is a clear example of the problems involved in assessing consistency in behavior in diverse situations, and in understanding the complexity of the coping process. They used group analyses, averaging the results over 100 subjects, a practice that may reveal general patterns or modes of coping, but that cannot successfully uncover the specifics of the coping process in the individual, or the possible existence of consistent patterns of coping behavior. In addition, their designation of coping patterns was not detailed enough to reveal the complexity of actual coping patterns.

"The greatest dilemma is that, just as we know little about the patterns of coping most people use, we also are not clear

about which patterns of coping work for certain types of persons, how they work, and the specific set of circumstances under which they are effective." (Coyne & Lazarus, 1980, p. 228)

Also, this study failed to address the relative effectiveness or ineffectiveness of particular strategies, and how effectiveness is related to adaptational outcomes.

### The Present Study

The present study had several purposes. First, it examined and described the ways that individuals cope with stressful daily hassles, with a focus on the degree to which they use particular strategies in a consistent manner. Second, the relationship between the degree of consistency exhibited in coping strategies and the degree to which subjects perceive their coping to be effective was examined. Third, these problems were be addressed on both the individual and the group levels.

In the coping strategy description segment of the study, each individual, and the entire sample, was examined in terms of the types of coping behaviors they engage in when faced with a stressful daily hassle. A typical pattern of coping was derived for each subject, as well as a composite for all subjects. It was expected that the composite for all subjects would not provide as much information about coping strategies as would the individual profiles, since a great deal of unique information is lost when averaged across all subjects. In addition, coping patterns within specific situations or context types were identified. These contexts (work/school, family/friends, and

health/finance) were expected to have an influence on the kinds of coping behaviors people engage in. So, it was expected that the individual profiles and group composite within-context types would be different from those profiles generated by averaging across all situations.

Consistency in coping was defined by the amount of agreement to be found in the rank ordering of specific coping strategy types. If one person, for example, were to show the same ranking (by frequency of use) of strategies in all situations, then she would be considered to be very consistent. If there was little or no agreement among situations in the rank of strategies used, that individual would not be considered to be consistent in coping. For each subject, then, an overall consistency index was generated, as well as one for each context type. Since each context type represented a more circumscribed range of situations, it was expected that the consistency indices within context types would be higher than the overall index and would provide a clearer picture of the relationships between situations and consistency in coping behavior.

For all subjects, the relationship between consistency and effectiveness was examined. Effectiveness was determined by obtaining a rating from each subject of the degree to which she felt her coping efforts were effective in each reported stressful episode. A positive relationship was predicted between consistency (agreement of ranked strategy use over all situations) and effectiveness scores (an overall score for each subject). In addition, a similar, yet stronger, positive

relationship between consistency scores within context type and effectiveness scores within context type was predicted.

## CHAPTER III

### METHOD

#### Subjects

Twenty-five female subjects participated in this study. They were part of a group of twenty-eight acquaintances from the professional and academic community who were asked to volunteer as subjects. The three subjects who did not complete the study cited personal time limitations as their reason for dropping out. No specific restrictions were placed on this sample concerning age, education level, or socioeconomic status.

All of the subjects were college graduates, eight with bachelors degrees, and seventeen with advanced degrees. Eleven worked in full-time employment and fourteen were working full-time on graduate degrees. Of the sixteen married subjects, nine had children. The average age of the sample was thirty-three years of age, with a range of 26 to 48 years of age.

The Schedule of Recent Experience (Amundson, Hart & Holmes, 1981) was administered to each subject prior to the start of the study. This scale is an index of major life stress occurring during the previous year (Appendix A). It was felt that a extremely high score on this instrument may be indicative of a person with such severe levels of major stress that any assessment of daily stressors would not be appropriate. The average SRE score was 290, which is fairly typical of a normal population. Persons who scored at the high end of the range

did not appear to be different from the average subject, in terms of coping strategy scores and self-perceived effectiveness ratings.

### Procedure

There were two phases of the study. The first was an instruction session, in which subjects gave their consent to participate, received full instructions and filled out initial questionnaires and forms. The second phase involved a six to eight week period in which subjects completed 25 Daily Hassle Event Report sets.

This study was defined for the subjects as an investigation into the the relationships among daily hassles and coping strategies in everyday situations, as reported by the subjects in a descriptive self-report manner. In addition to completing the questionnaires and forms at the initial meeting, subjects were informed that they would be required to fill out 25 event report sets over the next six to eight weeks. This would involve identifying and describing situations that the subjects interpret as stressful daily hassles. Subjects were then informed that all of the information that they supply would be kept confidential, that results would be made available to them, and that there was no deception or potential harm involved in the study. They then were asked to read and sign the consent form.

Subjects then completed a Subject Information Form (Appendix B). This form includes questions about age, occupation, education level, and marital status. This information was used to describe the characteristics of the sample.



Next, subjects were given the Ways of Coping scale (Folkman & Lazarus, 1980). This scale is comprised of 66 strategies people use in coping with stress, such as "I try to analyze the problem in order to understand it better", "Go on as if nothing is happening" or "I let my feelings out somehow". At the initial meeting, subjects were given instructions that were designed to identify the strategies subjects generally use in a non-specific stressful daily hassle situation. The instructions were as follows.

Below is a list of ways people cope in a wide variety of stressful situations. Please indicate, by circling the appropriate number, the strategies that you generally use in daily hassle situations. Please think of how you typically cope, in general, with daily stress as you answer this questionnaire.

Each of the 66 coping strategies was rated on a 4-point scale (Never used, Used somewhat, Used quite a bit, and Used a great deal). (See Appendix C).

After the questionnaires and ratings were completed, subjects then received detailed instructions regarding the Daily Hassle Event Report sets. These were to be completed over the subsequent six to eight weeks by the subject, either every day or every other day, for a total of 25 report sets. Each set is comprised of a Narrative Page, categorization of the situation into context type, and ratings of the Ways of Coping scale. At the initial meeting, subjects were given several examples of how an event report was to be completed.

On the Narrative Page (Appendix D), subjects were instructed to identify and briefly describe "the most bothersome" event of the day, or previous day. A summary of the event, including what led up to the event, how long the event lasted, how severe was the stress involved, who was involved, the subjects' initial reaction, other responses they may have used, and the degree to which they felt that what they did was effective, was included on the narrative page. Describing the event in this narrative format enabled the subject to recall the relevant details of the event while she completed the subsequent items.

Subjects were also asked to specify the context in which the stressful daily hassle occurred. The contexts were 1) work/school, 2) family/friends, and 3) health/finances. In addition, subjects were asked to rate their perception of the effectiveness of their coping responses. Effectiveness was rated on a 5-point scale, with 1 = Not at all effective to 5 = Extremely effective.

Next, subjects were to use the Ways of Coping Scale to rate each specific daily hassle situation in terms of the extent to which each strategy was used in that particular situation (Appendix E).

Below is a list of ways people cope with stressful encounters. Keeping in mind the most bothersome event of the day that you have described on the narrative page, rate each of the strategies that you used. Be sure to keep the specific event you have just described in mind as you answer.

Each of the 66 ways of coping on the scale were rated on a 4-point scale (Not used, Used somewhat, Used quite a bit, Used a great deal).

In summary, the instruction session was designed to inform the subjects of the nature of the study and to have them complete the questionnaires and forms. These were 1) consent form, 2) Subject Information form, 3) Schedule of Recent Experience, and, 4) Ways of Coping Scale.

The Daily Hassle Event sets were explained thoroughly at the instruction session. Over the subsequent six to eight weeks, subjects completed 25 of these sets. The sets included the Narrative Page and the Ways of Coping scale for each specific episode.

## CHAPTER IV

### RESULTS

The results of this study are presented in six parts. In the first two parts, descriptive coping strategy profiles are presented - both for individual subjects and for the group. The next three parts involve consistency in coping patterns - both for individual subjects and for the group. The last section focuses on perceived effectiveness as it relates to consistency and coping strategies.

The basis for using the eight coping strategies (listed and described in Appendix F) is a series of factor analyses performed on the Ways of Coping scale (Folkman, Lazarus, Dunkel-Schetter, DeLongis & Gruen, 1985). The Folkman, et al. analyses used a community sample, and yielded the eight strategies to be used in this study. In order to ensure that the factors derived by Folkman, et al. were appropriate for the present sample, a cluster analysis was performed on the present data. Results of this cluster analysis indicated that there was ample agreement between the factors and clusters derived. Of the 50 items that fell into identifiable factors in the Folkman, et al. analysis, 42 items (or 84%) fell into comparable clusters in the present analysis. Rather than generate a sample-specific set of coping strategies, the high degree of agreement (84%) seemed to warrant use of the original strategies, both to validate the prior research as well as to allow for reasonable comparisons among studies.

Many different types of daily hassles were described by subjects as being the most stressful episode on a daily basis. Examples of such stressors included minor disagreements with spouse, co-worker, child or friend, the appearance of an unexpected bill, a job- or school-related deadline to meet, coming down with a cold, etc. The types of hassles reported were diverse, yet appeared to be typical of the hassles described in other research. For example, the Hassles Scale (Kanner, et al., 1980) is comprised of 117 hassles that represent household, health, time pressures, inner concerns, environmental concerns, financial responsibility, work, and future security. The 625 events reported in the present study appear to reflect these categories. Thirty-eight percent were designated as work/school hassles, thirty-four percent occurred in the family/friends context, and twenty-eight percent were designated as health/finance hassles.

#### Group Coping Profile

A group "coping profile" was generated by calculating the means and standard deviations for each strategy across all subjects. A group coping profile was generated for all episodes, and for each of the three contexts. The group profile means, standard deviations and strategy ranks are presented in Table 1, for all episodes, and Table 2, for contexts, and in Figure 1. The profile indicates that subjects tended to use problem solving, self-controlling and seeking social support to the greatest extent. Positive reappraisal, escape-avoidance and confrontive coping were used the least frequently. There was very little context differences in the rank ordering of strategy use. At

work/school, subjects show the exactly the same pattern - that problem solving, self-controlling and seeking social support were used to a great extent, and positive reappraisal, escape-avoidance and confrontive coping were used the least. The Spearman rank-order coefficient between the total strategy use and strategy use in the work/school context was 1.00. With family/friends, this coefficient was .98. With health/finances, problem solving is the most frequently used strategy, with accepting responsibility, distancing, seeking social support and self-controlling all comparable as commonly used strategies. The Spearman rank-order correlation coefficient between total strategy use and strategy use in the health/finances context was .83.

#### Individual Coping Profiles

Each of the twenty-five subjects completed twenty-five event reports for a total of 625 events. A coping profile was generated for each subject. Graphic representations for each subject's coping profile by context are presented in Figures 2 to 26 and Tables 3 to 27.

The individual variability found in subjects' coping strategy use was quite evident in the graphic representations. Most subjects used problem solving the most, and positive reappraisal the least, yet there were many context differences. In order to examine these individual differences, several subjects' coping profiles will be described in greater detail. The role of individual differences in understanding the coping process are addressed in the discussion section of this paper.

The coping profile for Subject 09 (Figure 10) is most like the group profile (Spearman  $r=.95$ ). She reported using problem solving the most, along with seeking social support and self-controlling. Like the group profile, she also used positive reappraisal, confrontive coping and escape-avoidance the least. Within contexts, the work/school and the family/friends contexts mirrored the group profile. With health/finance, escape-avoidance was used more than in the other two contexts.

Subject 14 (Figure 15) used problem solving the most over all contexts, but also used confrontive coping, distancing and accepting responsibility quite frequently. The strategy used least frequently over all contexts was positive reappraisal (Spearman  $r=.46$ ). At work/school, problem solving and seeking social support were used frequently, along with confrontive coping. With family/friends, this subject did not resemble the group profile at all. Instead of using problem solving, self-controlling and seeking social support the most, she tended to use accepting responsibility, confrontive coping and distancing. With health/finances, she reported using distancing and problem solving with the greatest frequency.

Over all contexts, Subject 12 (Figure 13) used problem solving, distancing, and accepting responsibility most, and positive reappraisal, seeking social support and escape-avoidance least (Spearman  $r=.71$ ). At work/school, she was similar to the group except that she used more distancing and accepting responsibility than social support. Confrontive coping, which was used very infrequently at work/school and

not at all with health/finance was the most frequently used strategy with family/friends. Accepting responsibility, which was a frequently used strategy in work/school and health/finance situations was used infrequently with family/friends.

Subject 6 (Figure 7) was most dissimilar to the group profile (Spearman  $r=.05$ ). Unlike the group, escape-avoidance and confrontive coping were used most frequently, along with seeking social support. Distancing, accepting responsibility and positive reappraisal were used least. At work/school, she tended to use problem solving confrontive coping and escape-avoidance (rather than seeking social support and self-controlling), and used distancing the least. With family/friends, accepting responsibility and escape-avoidance were both used along with problem-solving. With health/finances, social support and escape-avoidance were used frequently, and problem solving was used least. It should be noted that this subject also showed the least degree of consistency and the highest means for coping strategy use over all episodes, perhaps indicative of someone who attempts as many coping responses as possible in stressful situations.

Subject 8 (Figure 9) is very similar to the group profile in that she used problem solving, social support and self-controlling most, and positive reappraisal and escape-avoidance with the least frequency (Spearman  $r=.88$ ). She also used similar strategies across contexts, except for highest problem solving at work, and more distancing with family/friends. This subject was the most consistent in her coping strategy use over all contexts.



### Consistency - Individual Analyses

Kendall's W (coefficient of concordance) was computed for each subject as an index of the consistency with which she used the eight coping strategies in all 25 episodes. This procedure ranks the eight coping strategies from one to eight in each episode, calculates the mean rank for each strategy type over all episodes, and then computes Kendall's W and its corresponding chi-square statistic. W ranges between zero and one, with zero signifying no agreement and one signifying complete agreement. A small probability value indicates a high degree of concordance. (SPSS-X Manual, p. 684).

For each subject, a total coefficient of concordance was calculated, based on all twenty-five episodes (Table 28). In addition, context coefficients of concordance were computed for each of the three context types (Tables 29, 30, 31).

As expected, total Kendall's W's for all but one subject showed a significant level of agreement. Within contexts, the chi-squares associated with the measurement of consistency, W, were found to be significant, and W's were higher within contexts than the total W's. In the work/school context, all but two subjects showed significant levels of consistency, and all but three subjects' consistency scores were higher than their total consistency scores. Twenty of the twenty-five subjects were significantly consistent in the family/friends episodes, and all but four subjects showed higher W's in this context than the total consistency score. In the health/finance context, fifteen of the twenty-five subjects were statistically consistent, and all but two had

higher W's within this context than their total W score. Fewer subjects were consistent in the health/finances context, most likely since a wider variety of stressful episodes fell into this category than in the work/school and family/friends contexts.

#### Consistency - Group Analyses

A group total Kendall's W was calculated by including all episodes from all subjects (the interindividual average). The group total W, and the group per context W's are presented in Table 32. An intraindividual W was calculated by averaging the twenty-five subjects' individual W's. These intraindividual average group W's (total and per context) are also presented in Table 32, and are larger than the interindividual group consistency scores.

The Pearson correlation coefficients between the consistency measure (W) and the coping scores, for all episodes and for episodes within each context are presented in Tables 33 and 34. Over all episodes, the self-controlling and the problem solving coping strategy scores are significantly correlated with consistency scores. This relationship indicates that subjects who use these two strategies to a greater extent are likely to be more consistent in their coping strategy use. Within the work/school context, more frequent use of the problem solving, self-controlling and distancing strategies is significantly related to more consistent strategy use.

### Consistency - Multivariate Analysis of Variance

To determine the effects of context and strategy on mean coping scores, standard deviations of coping scores, and coefficients of variation (standard deviation/mean), a 3 (context type) X 8 (strategy) repeated measures multivariate analysis of variance was performed. The hypothesis of no overall context effect was tested using Wilk's criterion. The MANOVA indicated that the hypothesis of no context effect was not tenable,  $F$  approximation  $(6,92) = 2.3$   $p = 0.04$ . The MANOVA for the hypothesis of no strategy effect was also rejected,  $F$  approximation  $(21,35) = 16.08$ ,  $p = .0001$ . Similarly the MANOVA for the hypothesis of no context by strategy interaction was not tenable,  $F$  approximation  $(42, 1490) = 1.41$ ,  $p = .04$ . (Table 35). Univariate analyses of variance followed.

For the mean coping strategy scores, a main effect for strategy and a context by strategy interaction were predicted, and obtained (Table 36). Tukey's HSD test indicated that the problem solving strategy was used more than the other strategies, and that positive reappraisal was used the least. The pattern of coping strategy use was basically the same over the three contexts. The interaction between strategy and context indicated that particular strategies were used in specific contexts to a greater or lesser degree. The post hoc Tukey HSD test indicated that problem solving was higher in the work/school context than in the other contexts, and that confrontive coping was highest in the family/friends context.

Significant main effects for context and for strategy, and an interaction effect for context by strategy were found for the second dependent measure, the standard deviations (Table 37). Tukey's HSD for the context main effect showed that the highest degree of variability in coping strategy scores occurred in the family/friends context. Among the strategies, problem solving, accepting responsibility, and seeking social support had the most variability, and escape-avoidance and positive reappraisal had the least variability. Tukey's HSD on the interaction of context and strategy indicated that variability in confrontive coping in the family/friends context was higher than in the health/finance context.

The final analysis of variance on the coefficients of variation of the coping strategies showed a main effect for strategy (Table 38). Tukey's HSD indicated that the more consistent strategies (i.e., those with lower coefficients of variation) were problem solving and self-controlling. Those with higher coefficients of variation were positive reappraisal and accepting responsibility.

### Effectiveness

For each subject, a total effectiveness score and three context effectiveness scores were generated (Table 39). These effectiveness scores were then correlated with each individual's Kendall's W (total and by context) as an index of the relationship between ratings of perceived effectiveness and the consistency measure. Significant positive relationships were predicted for consistency and effectiveness, both over all episodes, and for episodes within context types. The total

(over all contexts) Pearson correlation coefficient was moderate ( $r = .382$ ,  $p < .06$ ). In the work/school context, there was a significant positive correlation between consistency and effectiveness ( $r = .43$ ,  $p < .033$ ). In both the family/friends and the health/finance contexts, there was not a significant correlation between consistency and effectiveness (Table 40).

The correlations between the effectiveness measures and the coping scores are presented, for all episodes (Table 41 and for each context (Table 42). Over all contexts, higher scores in overall coping, distancing, self-controlling, problem-solving and positive reappraisal were significantly related to higher consistency scores. At work/school, distancing and problem solving scores positively related to consistency scores. With health/finances, problem solving, self-controlling and distancing were positively related to consistency scores.

#### Ways of Coping Scale - General versus Specific

At the initial meeting, subjects were given a version of the Ways of Coping Scale with instructions that were worded to assess the ways subjects "typically" cope with daily stressors (Appendix C). These were scored on the eight coping strategies as previously described. A group profile for the general scale was generated. A rank ordering of the eight strategies in the general profile was correlated with the group profile generated from the specific coping scale scores. The Spearman rank order correlation coefficient for this interindividual relationship

was .74, indicating a strong relationship between the general and specific coping measures.

An intraindividual analysis yielded an average correlation of .33. This was derived by averaging the rank order correlation coefficients of each subject's general profile with her coping profile of specific episodes. The correlation coefficients for each subject are listed in Table 43.

## CHAPTER V

### DISCUSSION

#### Consistency in Coping

The results of the present study indicate that individuals are somewhat consistent in the strategies they use in coping with everyday stress. Consistency is defined as the concordance among rankings of the eight coping strategies (confrontive coping, accepting responsibility, self-controlling, seeking social support, planful problem solving, positive reappraisal, escape-avoidance, and distancing). In other words, a perfectly consistent person would have the same rank ordering of strategy use over all twenty-five stressful episodes. The individual coefficients of concordance obtained in this study ranged from  $w=.06$  to  $w=.52$ , with an average of  $w=.27$ . All but one of these coefficients were significant at  $p<.001$ . Within contexts, these coefficients of concordance are higher, indicating more agreement among coping strategy rankings when the episodes are in the same context. Coefficients of concordance in the work/school context ranged from .21 to .67, with an average of .40. With family/friends, the range was .06 to .55, with an average of .33. And, in the health/finances context, the range was .14 to .85, with an average of .44.

It is important to note that the coefficients of concordance obtained in the present study are not extraordinarily high, if one were to use the arbitrary distinction that only correlation coefficients that are greater than .30 are meaningful (Mischel, 1968). With regard to the

"controversy" concerning situational specificity versus behavioral stability, it would appear that people are not very consistent over many types of situations ( $w=.27$ ). Within a specific type of situation, or context, however, there is greater consistency in coping strategy use. The controversy may not need to be resolved in an all-or-none fashion, but rather, through the realization that 1) some people are more consistent than others (Bem & Allen, 1974), and 2) defining the context provides a narrower range of situations in which consistency can be more readily assessed. Every situation could potentially be perceived as totally different from every other, thus lending support to an extreme version of the situational specificity side of the controversy. However, the higher coefficients of concordance within context types compared to those across context types in the present study indicate that some level of generality exists within context type, thus leading to a higher degree of consistency in behavior. This is most likely to be the case because features of episodes within a context are more similar than they would be across all episodes.

Inspection of certain individuals' data may provide explanations of these context effects. The most consistent subject overall was 08 ( $w=.52$ ), who also was very consistent in the work/school ( $w=.63$ ) and the health/finances ( $w=.61$ ) contexts. However, her consistency score in the family/friends context was moderate ( $w=.35$ ) relative to the other subjects. The hassles reported by this subject involved her adaptation to her newly married status. There did not appear to be any major changes in her work/school or health/finances contexts, which may



suggest that consistency is a function of being familiar with the general salient features of a particular context. This is not to say that this subject was any more or less stressed by these daily episodes, or that she perceived herself to be any more or less effective (her average rating of perceived effectiveness was 3.7), only that she used a greater diversity of coping efforts when dealing with her family/friends episodes, than in the work/school and health/finances contexts.

The least consistent subject, 06,  $w=.06$ , also showed that greater variability in coping patterns may be associated with novel situations. She was relatively more consistent in the work environment than either with family/friends or health/finances. Her episode descriptions indicated that she too was getting used to a new spouse, and was in the process of making a major financial change (buying a new home). In general, this subject reported using coping strategies to a greater extent in a stressful situation than did the other subjects. She also rated the effectiveness of her coping efforts slightly higher ( $x=3.5$ ) than the average subject ( $x=3.2$ ).

From these data, it could be suggested that the degree of consistency one exhibits in coping patterns is related to the amount of change occurring in one's life. The process of change does not have to be negative for it to be appraised as stressful. The two subjects previously described attempted many coping strategies in particular contexts in the attempt to deal with some major changes in those contexts. In contexts in which change was not obvious, less variability in coping strategy use was observed. The lack of predictability that

coincides with having to attempt various coping efforts may also be viewed as stressful.

Thus, it appears that the sample, in general, was not extremely consistent, but that consistency did increase within contexts. Individual differences may be linked to the degree to which situations are novel to the subject, creating the need for trial and error in the actual coping behaviors used in a particular episode. Folkman and Lazarus (1984) include novelty as one of the situational factors that influence the appraisal process. Future research should attend explicitly to the assessment of subjects' experience with hassles and their past history of coping with them.

Folkman & Lazarus (1980) concluded that the "population was characterized by more variability than consistency in its patterns of coping" (p. 227), and considered only 5% of the sample could be described as consistent. In their study, a coping pattern was determined by the proportion of problem-focused and emotion-focused coping used in a specific episode. This distinction was derived by designating each of the Ways of Coping items as either problem- or emotion-focused, and scoring subjects in each episode as high, medium or low on each dimension, for one of nine possible combinations. In this way, a perfectly consistent person would have to repeat one pattern of problem-focused and emotion-focused coping across all episodes. It should be noted that this study was done prior to the factor analytic studies that yielded the eight coping strategies in the present study.

By using the rank ordering of the eight coping strategies, the multidimensional character of the coping process was more precisely assessed. In any given stressful episode, an individual typically used several strategies, to varying degrees. The more consistent subjects would typically use the same general coping pattern. Folkman and Lazarus' (1980) definition of consistency does not allow for moderate levels of variability within a general pattern of coping.

According to the results of the analyses of variance on group consistency, the coping patterns used by the group do not differ significantly among context types, although the context by strategy interaction was significant. The interaction indicates that the general pattern may not be different among contexts, only particular strategy types in particular contexts. For example, confrontive coping is higher in the family/friends context than in the work/school or health/finances contexts. Problem solving is highest at work/school, and lowest with family/ friends. These interactions indicate that particular features of these contexts provide cues for the use of certain coping strategies. Work/school situations may be highly structured, thus creating an environment in which subjects tend to use their problem solving skills. At home, with family/friends, the need for problem solving may decrease, and is replaced by confrontive coping. These results are similar to those of Folkman & Lazarus (1980), who found more problem-focused coping at work, and more emotion-focused coping with family matters.

In both sets of analyses, the coefficients of concordance and the analyses of variance, address the issue of consistency. On the individual level, the coefficients of concordance allow us to identify individuals who cope with daily stress in consistent ways. The coefficients of concordance provide an index of the overall consistency of the entire group. Comparing the interindividual coefficients of concordance (derived by entering all subjects into one analysis) with the intraindividual coefficients of concordance (derived by averaging the twenty-five individual coefficients), it is clear that higher consistency scores can be obtained using the intraindividual approach.

The analyses of variance address the consistency issue on the group level. This sample of subjects was relatively consistent over contexts, although some strategies were used to a greater or lesser extent in particular contexts. The problem solving strategy was used more in all three contexts than any of the other strategies. Also, positive reappraisal was the least-used strategy in all three contexts. A sample of college-educated professional women may be more likely to exhibit this pattern than would a sample of less educated women from a lower socioeconomic class.

Both individual and group analyses should be conducted in studies that involve the issues of consistency and the coping process. The individual analysis identifies actual coping patterns, and can be a source of information about consistency and contextual differences in coping. The group analysis identifies the general trends in coping that

occur in a given sample and offers evidence for a general level of consistency.

The correlation coefficients (Tables 33 and 34) regarding coping strategy use and levels of consistency indicate that the problem solving and self-controlling strategies are significantly correlated with consistency over all episodes. At work/school, these two strategies and distancing are significantly correlated with consistency. With family/friends, only confrontive coping shows this positive relationship with consistency. This finding suggests that a major difference between one's home and work environments lies in one's ability or need to regularly express one's emotions rather than distance oneself or attempt to control one's emotions. No significant correlations were found in the health/finance context, perhaps because of the wider range of situations that made up this context designation. It is reasonable to assume that the work/school environment is the most structured of the three context types, thus perhaps leading to a greater degree of similarity among stressful episodes described by subjects in this context, as well as the highest level of interindividual consistency of the three contexts. Family/friends could potentially subsume a wider range of situations, and did show the least amount of interindividual consistency, as well as the highest amount of variance in coping strategy scores. Again, the degree of novelty in situations can play a role in the type of strategies used. Self-controlling and distancing at work/school may imply that subjects are used to these types of hassles, and refuse to get emotionally involved in resolving them. The

health/finances context had a wide range of situations, yet not as much variability in coping strategy use as the family/friends context. Perhaps this was due to the level of complexity that typically occurred in these contexts. Hassles in the health/finance context may have been diverse, yet they appear to be situations in which the problem is clearly defined (e.g., getting a bill, becoming ill, etc.). In the family/friends context, interpersonal relationships are involved, and tend to be more complex. In addition, there may be more ambiguity in the situations, due to unpredictable responses from the other person(s) involved.

#### Effectiveness

Over all episodes, there exists a marginally significant positive relationship between consistency and perceived effectiveness ( $r=.38$ ,  $p<.06$ ), and a significant positive relationship between consistency and perceived effectiveness in the work/school context ( $r=.43$ ,  $p<.03$ ). It was predicted that all three contexts would show this relationship, and that the context-wise correlation coefficients would be higher than the overall correlation coefficient. This turned out to be partly the case. It is noteworthy that overall, subjects who use coping strategies to a greater degree of regularity also reported perceiving their coping behaviors to be more effective. Although this coefficient exceeds the .05 level of significance, a stronger correlation would be more likely to occur under two circumstances: 1) a larger sample size, and 2) a more precise index of effectiveness. Likewise, the absence of a linear relationship between effectiveness and consistency in the family/friends

and health/finances contexts is partially due to the same circumstances. In addition, confrontive coping, which was the only coping strategy that was positively related to consistency in the family/friends context also had a negative relationship with effectiveness in this context ( $r = -.26$ ). Although this strategy is used regularly, most subjects report it as not an effective strategy. This is consistent with other research that suggest confrontive styles of interaction are disruptive to ongoing relationships (Howard, Blumstein & Schwartz, 1986).

Over all episodes, four coping strategies (distancing, self-controlling, problem solving and positive reappraisal) were positively related to perceived effectiveness. At work/school, distancing and problem solving showed this relationship, and with health/finances, distancing, self-controlling and problem solving were significantly related to perceived effectiveness.

In the present study, the measurement of effectiveness was imprecise. Subjects were asked to rate how effective they felt their coping efforts in the specific stressful episode were. Effectiveness had been defined as the degree to which what they did was helpful, reduced feelings of distress, and reduced the problem level (Menaghan, 1983). Due to the nature of daily hassles, the measurement of effectiveness should be more inclusive.

Roth & Cohen (1986) proposed three important factors to be considered when evaluating effectiveness. The first was the time at which the evaluation is made. In the present study, the effectiveness rating was made after the episode had occurred, and subjects had had

some time to assess their coping efforts. Given that daily hassles are typically short in duration, a post-episode evaluation was a reasonable time frame for rating perceived effectiveness.

The second factor was the degree of controllability of aspects of the coping episode. Coping does not necessarily imply a successful conclusion to the stressful episode. There were many episodes in which a subject may have felt she had no control over what occurred. The definition of effectiveness given to the subjects considered this problem by asking them to rate the effectiveness of their coping efforts given the constraints of the specific situation. It may be useful in future research to include an evaluation of perceived controllability in the assessment of effectiveness.

The third factor involved the fit between coping and the demands of the situation. In the present study, the use of the context designation showed that some frequently-used coping strategies may not be perceived as effective in one context, but may be in another context. For example, confrontive coping was perceived as ineffective in the family/friends context, although it was used frequently. Problem solving was used the most frequently in all contexts, but was related to high ratings of effectiveness only in the work/school and health/finances contexts. These kinds of findings indicate that what a person does to cope, and the degree to which they perceive that to be effective, are dependent on the context in which it occurs.



### Conclusion

The present study has 1) presented a description, measurement and evaluation of coping with daily stressors, 2) provided evidence for the presence of some consistency in coping strategy use, which is higher if context is taken into account, and 3) described the relationship between coping consistency and perceptions of effectiveness. These goals were accomplished by studying stress that occurs in subjects' daily experience, by using self-reports of actual stressors, and by including both idiographic and nomothetic treatments of the data.

Much past research on stress has focused on major life stressors. However, the study of daily hassles can provide a clearer picture of the multidimensional nature of the coping process. In addition, it can be useful for a better understanding of ways in which stress affects health/illness outcomes.

Subjects in the present study reported on everyday stressors in their lives. Although this method of study has been criticized because of the potential for biases, the subjective nature of the coping appraisal process can best be assessed by sampling actual stressful episodes as perceived by the subject. Moskowitz (1986) reports on a comparison of self-reports, reports by knowledgeable informants and behavioral observation data. Moskowitz concluded not only that self-reports are an adequate method of assessment, but also that they "can be used to assess characteristics that are defined to have stability, coherence and generality across situations and to assess characteristics that are defined within situation and time parameters" (p. 309). The

present data used self-reports in such a way as to indicate generality across situations and time, as well as to identify context-specific coping patterns, using episodes that were appraised as stressful by each subject.

Research in the area of stress and coping can be enhanced when both group and individual analyses are included. While important generalities are identified by the nomothetic analyses, many of the subtleties inherent in the coping process can be further investigated by including the idiographic analyses. In the present study, inclusion of the idiographic analyses provided important additional information regarding consistency. The interindividual consistency scores, derived in the traditional nomothetic fashion, was lower than the intraindividual consistency scores, which require individual analyses.

In order to adequately address the concerns of the multiplist approach, both group and individual levels of analyses are required. In reference to current personality theory, Bem (1983) stated that the "successful theory will probably treat process nomothetically, and treat content idiographically" (p. 573). In the present study, general coping patterns and the relationship between consistency in coping and effectiveness were described on the group level. Particular individual differences involving specific coping patterns in each of the context types were described, providing a source of information for speculation about coping that may not have been available if only a nomothetic analysis were used.

In reference to the relationship between the general and specific coping profiles, it is clear that the interindividual and intraindividual analyses provide entirely different results. The interindividual approach is exemplary of traditional personality assessment in which group analyses are used to make generalizations about groups of individuals. However, this type of analysis does not address the ways that individuals actually behave in specific situations. For a thorough understanding of coping as a process, the ways individuals cope must be assessed. As the interindividual analysis demonstrates, there is not a very strong relationship between the general or "typical" coping patterns reported by subjects and the patterns they report in specific coping episodes. This provides further support for the view that the traditional personality assessment approach is not sufficient or appropriate for the study of the coping process. Individuals need to be assessed over many occasions, in a variety of contexts, and over time.

Lazarus and Roskies (1980) identified what was needed in the stress and coping research. In addition to the formulation of a system to describe, measure and evaluate coping, they proposed the study of the development of coping strategy use, and the importance to clinical treatment by taking into account individual differences in values, lifestyles, beliefs, etc. The present study provides a more solid basis for the description, measurement and evaluation system. Only with a sound understanding of coping can the developmental and clinical issues be addressed.

In their review of approach-avoidance and coping with stress, Roth and Cohen (1986) concluded that people may have preferences in one type of coping response over another, yet the use of several strategy types is not mutually exclusive. In the present study, consistency in coping strategy use was found to exist at a moderate level. Although subjects had particular preferences in their coping efforts, any number of strategies were typically used in stressful episodes, reflecting the complex multidimensional nature of the coping process.

In general, coping patterns used by subjects in a consistent manner were also perceived to be effective. A more thorough treatment of the nature of effectiveness in the coping process would provide a basis for understanding the outcomes of this process including social functioning, morale, and somatic health.

## BIBLIOGRAPHY

- Amundson, L.E., Hart, C.A. & Holmes, T.H. (1981). Manual for The Schedule of Recent Experience. Seattle: University of Washington Press.
- Antonovsky, A. (1979). Health, stress and coping. San Francisco: Jossey-Bass.
- Bem, D.J. (1983). Toward a response style theory of persons in situations. In M.M. Page (Ed.), 1982 Nebraska Symposium on Motivation. Lincoln, Nebraska: University of Nebraska Press.
- Bem, D.J. (1983). Constructing a theory of the triple typology: Some (second) thoughts on nomothetic and idiographic approaches to personality. Journal of Personality, 51, 566-577.
- Bem, D.J. & Funder D.C. (1978). Predicting more of the people more of the time: Assessing the personality of situations. Psychological Review, 85, 485-501.
- Buss, D.M. & Craik K.H. (1984). Acts, dispositions, and personality. In B.A. Maher & W.B. Maher (Eds.), Progress in experimental personality research (Vol. 13). New York: Academic Press.
- Campbell, J.M. (1983). Ambient stressors. Environment and Behavior, 13, 355-380.
- Caspi, A., Bolger, N. & Eckenrode, J. (1986). Linking person and context in the daily stress process. Journal of Personality and Social Psychology. In press.
- Cohen, F. & Lazarus, R.S. (1979). Coping with the stresses of illnesses. In G.C. Stone, F. Cohen & N.E. Adler (Eds.), Health Psychology: A Handbook. San Francisco: Jossey-Bass.
- Coyne, J.C. & Lazarus, R.S. (1980). Cognitive style, stress perception, and coping. In I.L. Kutash & L.B. Schlesinger (Eds.), Handbook on Stress and Anxiety. San Francisco: Jossey-Bass.
- Crandall, J.E. (1984). Social interest as a moderator of life stress. Journal of Personality and Social Psychology, 47, 164-174.
- DeLongis, A., Coyne, J.C., Dakof, G., Folkman, S. & Lazarus, R.S. (1982). Relationship of daily hassles, uplifts, and major life events to health status. Health Psychology, 1, 119-136.

- Dohrenwend, B.P. & Shrout, P.E. (1985). "Hassles" in the conceptualization and measurement of life stress variables. American Psychologist, 40, 780-785.
- Eckenrode, J. (1984). Impact of chronic and acute stressors on daily reports of mood. Journal of Personality and Social Psychology, 46, 907-918.
- Epstein, S. (1979). The stability of behavior I: On predicting most of the people much of the time. Journal of Personality and Social Psychology, 37, 1097-1126.
- Epstein, S. (1983). A research paradigm for the study of personality and emotions. In M.M. Page (Ed.), Nebraska Symposium on Motivation. Lincoln, Nebraska: University of Nebraska Press.
- Folkman, S. & Lazarus, R.S. (1980). An analysis of coping in a middle-aged community sample. Journal of Health and Social Behavior, 21, 219-239.
- Folkman, S., Schaefer, C. & Lazarus, R.S. (1979). Cognitive processes as mediators of stress and coping. In Hamilton, V. & Warburton, D.M. (Eds.), Human stress and cognition. Chichester, England: Wiley.
- Ganellen, R.J. & Blaney, P.H. (1984). Hardiness and social support as moderators of the effects of life stress. Journal of Personality and Social Psychology, 47, 156-163.
- Garmezy, N. (1981). Children under stress: Perspectives on antecedents and correlates of vulnerability and resistance to psychopathology. In A.I. Rabin, J. Aronoff, A.M. Barclay & R.A. Zucker (Eds.), Further explorations in personality. New York: Wiley.
- Haan, N. (1982). The assessment of coping, defense and stress. In L. Goldberger & S. Breznitz (Eds.), Handbook of Stress: Theoretical and Clinical Aspects. New York: The Free Press.
- Holmes, T.H. & Rahe, R.H. (1967). The social adjustment rating scale. Journal of Psychosomatic Research, 11, 213-218.
- Houts, A.C., Cook, T.D. & Shadish, W.R. (1986). The person-situation debate: A critical multiplist perspective. Journal of Personality, 54, 52-105.
- Howard, J.A., Blumstein, P. & Schwartz, P. (1986). Sex, power, and influence tactics in intimate relationships. Journal of Personality and Social Psychology, 51, 102-109.

- Johnson, J.H. & Sarason, I.G. (1978). Life stress, depression, and anxiety: Internal-external control as a moderator variable. Journal of Psychosomatic Research, 22, 205-208.
- Johnson, J.H. & Sarason, I.G. (1979). Recent developments on research on life stress. In V. Hamilton & D.M. Warburton (Eds.), Human Stress and Cognition: An Information Processing Approach. New York: Wiley.
- Kanner, A.D., Coyne, J.C., Schaefer, C. & Lazarus, R.S. (1981). Comparison of two modes of stress measurement: Daily hassles and uplifts versus major life events. Journal of Behavioral Medicine, 4, 1-39.
- Kasl, S.V. (1983). Pursuing the link between stressful life experiences and disease: A time for reappraisal. In C.L. Cooper (Ed.), Stress Research: Issues for the Eighties. New York: Wiley.
- Kobasa, S. (1979). Stressful life events, personality, and health: An inquiry into hardiness. Journal of Personality and Social Psychology, 37, 1-11.
- Kobasa, S.C. (1982). Commitment and coping in stress resistance among lawyers. Journal of Personality and Social Psychology, 42, 707-717.
- Kobasa, S.C., Maddi, S.R. & Courington, S. (1981). Personality and constitution as mediators in the stress-illness relationship. Journal of Health and Social Behavior, 22, 368-378.
- Kobasa, S.C. & Puccetti, M.C. (1983). Personality and social resources in stress resistance. Journal of Personality and Social Psychology, 45, 839-850.
- Krantz, S.E. (1983). Cognitive appraisals and problem-directed coping: A prospective study of stress. Journal of Personality and Social Psychology, 44, 638-643.
- Lamiell, J.T. (1981). Toward an ideothetic psychology of personality. American Psychologist, 36, 276-289.
- Lazarus, R.S. (1981). The stress and coping paradigm. In C. Eisdorfer, D. Cohen, A. Kleinman & P. Maxim (Eds.), Models for clinical psychopathology. New York: Spectrum.
- Lazarus, R.S., Averill, J.R. & Opton, E.M., Jr. (1974). The psychology of coping: Issues of research and assessment. In G.V. Coelho, D.A. Hamburg, & J.E. Adams (Eds.), Coping and adaptation. New York: Basic Books.

- Lazarus, R.S. & Cohen, J.B. (1977). Environmental stress. In I. Altman & J.F. Wohlwill (Eds.), Human Behavior and the Environment: Current Theory and Research. New York: Plenum.
- Lazarus, R.S., Cohen, J.B., Folkman, S., Kanner, A. & Schaefer, C. (1980). Psychological stress and adaptation: Some unresolved issues. In H. Selye (Ed.), Selye's guide to stress research (Vol. 1). New York: Van Nostrand Reinhold.
- Lazarus, R.S., DeLongis, A., Folkman, S. & Gruen, R. (1985). Stress and adaptational outcomes: The problem of confounded measures. American Psychologist, 40, 770-779.
- Lazarus, R.S. & Folkman, S. (1984). Coping and adaptation. In W.D. Gentry (Ed.), Handbook of Behavioral Medicine. New York: Guilford Press.
- Lazarus, R.S. & Folkman, S. (1984). Stress, Appraisal and Coping. New York: Springer.
- Lazarus, R.S., Kanner, A.D. & Folkman, S. (1980). Emotions: A cognitive-phenomenological analysis. In R. Plutchik & H. Kellerman (Eds.), Emotion: Theory, Research and Experience. (Vol. 1). New York: Academic Press.
- Lazarus, R.S. & Launier, R. (1978). Stress-related transactions between person and environment. In L.A. Pervin & M. Lewis (Eds.), Perspectives in interactional psychology. New York: Plenum.
- Lefcourt, H.M., Martin, R.A. & Saleh, W.E. (1984) Locus of control and social support: Interactive moderators of stress. Journal of Personality and Social Psychology, 47, 378-389.
- Lefcourt, H.M., Miller, R.S., Ware, E.E. & Sherk, D. (1981). Locus of control as a modifier of the relationship between stress and moods. Journal of Personality and Social Psychology, 41, 357-369.
- Lewinsohn, P.M. & Talkington, J. (1979). Studies of the measurement of unpleasant events and relations with depression. Applied Psychological Measurement, 3, 83-101.
- Martin, R.A. & Lefcourt, H.M. (1983). Sense of humor as a moderator of the relation between stressors and mood. Journal of Personality and Social Psychology, 45, 1313-1324.
- Meneghan, E.G. (1983). Individual coping efforts: Moderators of the relationship between life stress and mental health outcomes. In H.B. Kaplan, Psychosocial Stress: Trends in Theory and Research. New York: Academic Press.



- Mischel, W. (1979). On the interface of cognition and personality: Beyond the person-situation debate. American Psychologist, 34, 740-754.
- Mischel, W. (1984). Convergences and challenges with the search for consistency. American Psychologist, 39, 351-364.
- Moskowitz, D.S. (1986). Comparison of self-reports, reports by knowledgeable informants, and behavioral observation data. Journal of Personality, 54, 294-317.
- Murphy, L.B. & Moriarty, A. (1976). Vulnerability, Coping and Growth from Infancy to Adolescence. New Haven, CT: Yale University Press.
- Page, M.M. (Ed.) (1983). 1982 Nebraska Symposium on Motivation. Lincoln, Nebraska: University of Nebraska Press.
- Parkes, K.R. (1984). Locus of control, cognitive appraisal, and coping in stressful episodes. Journal of Personality and Social Psychology, 46, 655-668.
- Pearlin, L.I. & Schooler, C. (1978). The structure of coping. Journal of Health and Social Behavior, 19, 2-21.
- Roskies, E. & Lazarus, R.S. (1980). Coping theory and the teaching of coping skills. In P.O. Davidson & S.M. Davidson (Eds.), Behavioral Medicine: Changing Health Lifestyles. New York: Brunner/Mazel.
- Roth, S. & Cohen, L.J. (1986). Approach, avoidance, and coping with stress. American Psychologist, 41, 813-819.
- Sandler, I.N. & Lakey, B. (1982). Locus of control as a stress moderator: The role of control perceptions and social support. American Journal of Community Psychology, 10, 65-78.
- Schaefer, C., Coyne, J.C. & Lazarus, R.S. (1981). The health related functions of social support. Journal of Behavioral Medicine, 4, 381-405.
- Selye, H. (1983). The stress concept: Past, present and future. In C.L. Cooper (Ed.), Stress Research: Issues for the Eighties. New York: Wiley.
- Shalit, B. (1977). Structural ambiguity and limits to coping. Journal of Human Stress, 3, 32-45.
- SPSS-X User's Guide. (1983). New York: McGraw-Hill.

- Stone, A.A. & Neale, J.M. (1984). New measure of daily coping: Development and preliminary results. Journal of Personality and Social Psychology, 46, 892-906.
- White, R. (1974). Strategies of adaptation: An attempt at a systematic description. In G. Coelho, D. Hamburg, & J. Adams, (Eds.). Coping and Adaptation. New York: Basic Books.
- Wrubel, J., Benner, P. & Lazarus, R.S. (1981). Social competence from the perspective of stress and coping. In J.D. Wine & M.D. Smye (Eds.), Social competence. New York: Guilford Press.

APPENDIX A  
Schedule of Recent Experience (SRE)

Instructions: Next to each Life Event, indicate how many times in the past year each of the events has occurred.  
(Number in parentheses indicates the scale value for each item.)

Death of spouse (100)  
Divorce (73)  
Marital separation from mate (65)  
Detention in jail or other institution (63)  
Death of a close family member (63)  
Major personal injury or illness (53)  
Marriage (50)  
Being fired at work (47)  
Marital reconciliation with mate (45)  
Retirement from work (45)  
Major change in health or behavior of family member (44)  
Pregnancy (40)  
Sexual difficulties (39)  
Gaining a new family member (39)  
Major business readjustment (38)  
Major change in financial state (37)  
Death of a close friend (36)  
Changing to a different line of work (35)  
Major change in the number of arguments with spouse (37)  
Taking on a mortgage greater than \$10,000 (30)  
Foreclosure on a mortgage or loan (29)  
Major change in responsibilities at work (29)  
Son or daughter leaving home (29)  
In-law troubles (29)  
Outstanding personal achievement (28)  
Wife beginning or ceasing work outside the home (26)  
Beginning or ceasing formal education (26)  
Major change in living conditions (25)  
Revision of personal habits (24)  
Troubles with the boss (23)  
Major change in work hours or conditions (20)  
Change in residence (20)  
Changing to a new school (20)  
Major change in type and/or amount of recreation (19)  
Major change in church activities (19)  
Major change in social activities (18)  
Taking on a mortgage or loan less than \$10,000 (17)  
Major change in sleeping habits (16)  
Major change in number of family get-togethers (15)  
Major change in eating habits (15)  
Vacation (13)  
Christmas (12)  
Minor violations of the law (11)

## Appendix B

## Subject Information

Identification code \_\_\_\_\_

Age \_\_\_\_\_

Marital Status: Single \_\_\_\_\_

Married \_\_\_\_\_

Married, with children \_\_\_\_\_

Separated/divorced \_\_\_\_\_

Separated/divorced, with children \_\_\_\_\_

Education level: High school \_\_\_\_\_

Some college \_\_\_\_\_

College degree \_\_\_\_\_

Advanced degree \_\_\_\_\_

Occupation \_\_\_\_\_

PLEASE NOTE:

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These consist of pages:

APPENDIX C: 61-62

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APPENDIX E: 64-65

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## Appendix D

## Narrative Page

Subject number \_\_\_\_\_ Date of episode \_\_\_\_\_ Report number (1-25) \_\_\_\_\_

Context: Work/school \_\_\_\_\_ Family/friends \_\_\_\_\_ Health/finances \_\_\_\_\_  
(check one)

A. Description: Objectively describe the episode. Include who was involved, what led up to the episode, how long the episode lasted, and other relevant information.

B. Reaction: What was your first response to this particular daily hassle? What else did you do during this episode?

C. Resolution: Was this situation resolved? How did it turn out?

D. Effectiveness: Rate what you did in this situation in terms of its effectiveness (circle one). Effectiveness refers to the degree to which your response was helpful, served to reduce feelings of distress, and/or served to reduce the problem level.

1.....2.....3.....4.....5

Not at all  
effective

Slightly  
effective

Moderately  
effective

Very  
effective

Extremely  
effective

## Appendix F

## Coping Strategy Descriptions

## Confrontive coping

Express feelings or anger, stand up for your rights, try to get person responsible to change, or do anything in response just for the sake of doing it.

## Distancing

Go on as if nothing happened, make light of the situation, refuse to think about it, try to forget, go along with fate or bad luck, or try to look on the bright side.

## Self-controlling

Try to keep feelings in or from interfering, keep others from knowing how bad things are, try not to react too hastily, rehearse what to say or do, think of how an admired person would handle the situation and use that as a model.

## Seeking social support

Talk to persons who can help or who have the necessary information, ask a friend or relative for advice, talk to others about your feelings, accept sympathy or understanding from others.

## Accepting responsibility

Criticize yourself, realize you brought problem on yourself, promise yourself things will be different in the future, apologize or do something to make up.

## Escape-avoidance

Wish the situation would go away, hope for a miracle, avoid people in general, get away, eat or drink or smoke or sleep more than usual, fantasize on how things may turn out.

## Planful problem-solving

Analyze the situation, make a plan of action and follow it, concentrate on the next step, come up with several possible solutions change something so things would work out, draw on past experiences.

## Positive reappraisal

Come out of the situation better than you went in, change something about yourself, do something creative to get the situation to work out in a positive way, change in a good way.

## Appendix G

## Tables

Table 1

Group Profile of Coping Strategy Means, Standard Deviations,  
and Ranks - Total

	X	s	rk
Coping	.43	.28	
Confrontive	.31	.45	6
Distancing	.38	.43	5
Self-controlling	.47	.48	2
Seeking social support	.45	.55	3
Accepting responsibility	.43	.64	4
Escape-avoidance	.26	.34	7
Planful problem solving	.83	.71	1
Positive reappraisal	.18	.34	8



Table 2

Group Profile of Coping Strategy Means, Standard Deviations  
and Ranks - by Context

	Work/school			Family/friends			Health/finance		
	X	s	rk	X	s	rk	X	s	rk
Average Coping	.39	.25		.45	.30		.44	.30	
Confrontive	.26	.40	6	.43	.55	5	.23	.34	7
Distancing	.33	.40	5	.40	.39	6	.45	.50	4
Self-controlling	.48	.44	2	.50	.50	2	.42	.49	5
Seeking social support	.42	.51	3	.47	.55	3	.47	.61	2
Accepting responsibility	.37	.58	4	.46	.65	4	.45	.68	3
Escape-avoidance	.22	.31	7	.25	.33	7	.33	.42	6
Problem solving	.93	.65	1	.71	.67	1	.85	.75	1
Positive reappraisal	.15	.27	8	.24	.42	8	.15	.30	8

Table 3

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 01	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.25	.07	.30	.10	.24	.06	.22	.04
Confrontive	.07	.26	.00	.00	.07	.19	.12	.31
Distancing	.40	.36	.55	.54	.38	.32	.32	.23
Self-controlling	.18	.26	.41	.35	.16	.15	.05	.12
Seeking social support	.23	.43	.00	.00	.26	.42	.35	.52
Accepting responsibility	.24	.33	.18	.24	.46	.47	.14	.21
Escape-avoidance	.04	.09	.02	.05	.00	.00	.08	.12
Problem solving	.58	.57	1.14	.60	.24	.42	.44	.37
Positive reappraisal	.08	.13	.16	.13	.00	.00	.08	.18

Table 4

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 02	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.33	.18	.30	.12	.36	.24	.34	.17
Confrontive	.49	.65	.39	.44	.69	.99	.38	.21
Distancing	.17	.23	.20	.20	.19	.28	.10	.19
Self-controlling	.22	.29	.14	.23	.32	.36	.18	.27
Seeking social support	.62	.58	.61	.77	.61	.51	.64	.46
Accepting responsibility	.60	.61	.47	.42	.64	.59	.71	.87
Escape-avoidance	.10	.15	.13	.14	.08	.18	.07	.14
Problem solving	.78	.55	.69	.48	.70	.35	1.00	.81
Positive reappraisal	.10	.25	.01	.05	.21	.40	.08	.11

Table 5

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 03	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.29	.10	.29	.10	.25	.04	.46	.09
Confrontive	.23	.39	.28	.45	.11	.17	.25	.35
Distancing	.33	.30	.33	.31	.25	.31	.50	.24
Self-controlling	.30	.28	.32	.27	.26	.37	.29	.00
Seeking social support	.21	.35	.22	.36	.14	.34	.33	.47
Accepting responsibility	.17	.32	.06	.17	.50	.47	.13	.18
Escape-avoidance	.14	.15	.15	.14	.10	.15	.19	.27
Problem solving	.77	.55	.85	.57	.47	.51	.92	.35
Positive reappraisal	.12	.21	.09	.18	.24	.28	.00	.00

Table 6

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 04	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.39	.15	.45	.19	.34	.08	.36	.15
Confrontive	.33	.45	.30	.36	.57	.60	.07	.09
Distancing	.31	.28	.30	.34	.37	.14	.24	.21
Self-controlling	.31	.27	.55	.31	.18	.19	.18	.11
Seeking social support	.51	.42	.85	.41	.24	.25	.41	.36
Accepting responsibility	.54	.57	.31	.35	.39	.26	1.04	.81
Escape-avoidance	.50	.38	.36	.38	.53	.43	.63	.48
Problem solving	.53	.34	.50	.31	.63	.43	.45	.23
Positive reappraisal	.06	.11	.10	.14	.03	.06	.04	.11

Table 7

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 05	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.23	.07	.22	.06	.20	.06	.26	.10
Confrontive	.13	.32	.06	.08	.00	.00	.35	.52
Distancing	.19	.24	.04	.07	.15	.19	.42	.27
Self-controlling	.16	.20	.24	.26	.16	.19	.07	.08
Seeking social support	.19	.30	.28	.26	.29	.42	.00	.00
Accepting responsibility	.10	.25	.14	.33	.09	.27	.03	.09
Escape-avoidance	.14	.17	.13	.17	.13	.17	.16	.20
Problem solving	.42	.39	.56	.53	.27	.28	.42	.27
Positive reappraisal	.04	.09	.05	.10	.05	.11	.02	.05

Table 8

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 06	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.93	.21	.88	.20	.94	.23	.98	.22
Confrontive	.91	.61	.98	.66	.83	.64	.97	.52
Distancing	.55	.56	.27	.45	.58	.40	.90	.89
Self-controlling	.90	.39	.93	.34	.85	.41	.97	.47
Seeking social support	.92	.70	.90	.75	.83	.75	1.17	.57
Accepting responsibility	.82	.87	.56	.50	1.02	1.11	.75	.71
Escape-avoidance	.98	.45	.97	.38	.92	.47	1.13	.56
Problem solving	.84	.71	1.10	.50	.89	.86	.43	.49
Positive reappraisal	.67	.48	.50	.28	.82	.61	.57	.30

Table 9

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 07	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.75	.18	.74	.13	.83	.20	.64	.15
Confrontive	.51	.56	.33	.48	.71	.60	.36	.49
Distancing	.51	.31	.62	.30	.46	.33	.50	.30
Self-controlling	1.26	.55	1.41	.60	1.30	.45	1.06	.64
Seeking social support	.49	.54	.26	.42	.64	.66	.48	.41
Accepting responsibility	.38	.56	.39	.72	.43	.60	.29	.37
Escape-avoidance	.42	.38	.21	.21	.46	.33	.55	.52
Problem solving	1.73	.43	2.02	.32	1.77	.26	1.36	.51
Positive reappraisal	.40	.51	.41	.44	.56	.61	.14	.27



Table 10

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 08	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.55	.13	.59	.13	.59	.12	.45	.08
Confrontive	.42	.38	.59	.44	.39	.33	.21	.17
Distancing	.55	.35	.49	.27	.86	.41	.42	.30
Self-controlling	.71	.35	.84	.34	.60	.47	.61	.21
Seeking social support	.73	.55	.80	.46	.50	.45	.81	.72
Accepting responsibility	.36	.58	.32	.46	.54	.78	.28	.62
Escape-avoidance	.09	.15	.08	.15	.13	.19	.06	.13
Problem solving	1.63	.57	2.00	.46	1.25	.54	1.40	.45
Positive reappraisal	.13	.18	.10	.18	.26	.19	.05	.10

Table 11

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 09	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.47	.11	.41	.09	.52	.13	.48	.08
Confrontive	.23	.31	.10	.18	.40	.45	.20	.20
Distancing	.31	.39	.21	.17	.40	.30	.32	.58
Self-controlling	.62	.43	.80	.44	.59	.41	.48	.42
Seeking social support	.65	.45	.73	.42	.56	.43	.65	.54
Accepting responsibility	.42	.59	.22	.41	.59	.57	.44	.74
Escape-avoidance	.26	.41	.02	.04	.25	.44	.49	.47
Problem solving	1.03	.82	1.21	.79	1.15	.79	.78	.89
Positive reappraisal	.11	.28	.13	.18	.07	.15	.14	.43

Table 12

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 10	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.56	.20	.48	.17	.44	.28	.61	.18
Confrontive	.40	.39	.27	.25	.67	.47	.38	.39
Distancing	.50	.39	.47	.36	.42	.40	.53	.41
Self-controlling	.71	.39	.86	.36	.61	.49	.69	.38
Seeking social support	.81	.85	.47	.46	.38	.75	1.02	.93
Accepting responsibility	.17	.32	.25	.43	.13	.25	.16	.32
Escape-avoidance	.33	.41	.08	.17	.09	.12	.46	.45
Problem solving	1.07	.50	1.23	.49	.85	.71	1.07	.46
Positive reappraisal	.19	.19	.20	.19	.29	.20	.17	.19

Table 13

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 11	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	1.19	.23	1.13	.13	1.08	.20	1.37	.25
Confrontive	.78	.55	.69	.55	.93	.69	.71	.37
Distancing	1.09	.68	.90	.47	.72	.56	1.69	.63
Self-controlling	1.31	.45	1.13	.33	1.29	.34	1.52	.61
Seeking social support	1.23	.68	1.42	.61	1.17	.76	1.10	.71
Accepting responsibility	1.24	1.04	1.50	.79	.42	.69	1.91	1.03
Escape-avoidance	.70	.43	.67	.44	.61	.30	.83	.56
Problem solving	2.19	.63	2.00	.81	2.06	.57	2.54	.34
Positive reappraisal	.91	.52	.95	.40	.78	.65	1.02	.49

Table 14

Individual Profiles of Coping Strategy Means (X), StandardDeviations (s) - Total and by Context

Subject 12	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.42	.19	.43	.23	.40	.14	.42	.21
Confrontive	.31	.64	.83	.12	.88	.92	.00	.00
Distancing	.51	.52	.65	.71	.44	.38	.38	.30
Self-controlling	.40	.41	.60	.40	.25	.44	.29	.30
Seeking social support	.29	.42	.38	.46	.29	.37	.17	.44
Accepting responsibility	.45	.60	.43	.47	.22	.53	.75	.79
Escape-avoidance	.29	.38	.18	.35	.36	.32	.36	.49
Problem solving	.89	.54	.90	.54	.81	.57	.95	.39
Positive reappraisal	.10	.24	.10	.22	.04	.10	.16	.37

Table 15

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 13	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.43	.12	.41	.08	.50	.13	.40	.13
Confrontive	.06	.10	.05	.08	.06	.12	.07	.13
Distancing	.36	.36	.40	.43	.38	.29	.29	.37
Self-controlling support	.75	.41	.87	.24	.88	.53	.43	.33
Accepting responsibility	.32	.51	.25	.43	.34	.63	.39	.54
Escape-avoidance	.32	.22	.28	.18	.39	.25	.29	.25
Problem solving	1.18	.58	1.20	.60	1.02	.34	1.33	.77
Positive reappraisal	.11	.21	.06	.07	.25	.32	.02	.05

Table 16

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 14	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.33	.10	.39	.12	.31	.08	.29	.07
Confrontive	.42	.50	.47	.50	.61	.65	.24	.38
Distancing	.41	.36	.38	.43	.33	.24	.48	.37
Self-controlling	.25	.30	.40	.38	.19	.23	.13	.18
Seeking social support	.32	.40	.47	.36	.31	.54	.17	.30
Accepting responsibility	.32	.57	.08	.17	.71	.70	.33	.66
Escape-avoidance	.24	.24	.29	.26	.13	.11	.26	.28
Problem solving	.57	.59	.90	.70	.19	.22	.46	.46
Positive reappraisal	.04	.11	.07	.15	.00	.00	.03	.10

Table 17

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 15	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.17	.07	.17	.09	.16	.06	.18	.08
Confrontive	.08	.15	.06	.12	.13	.19	.06	.12
Distancing	.19	.23	.19	.28	.25	.25	.13	.15
Self-controlling	.13	.17	.13	.20	.20	.20	.07	.08
Seeking social support	.17	.37	.09	.09	.02	.06	.40	.60
Accepting responsibility	.46	.69	.47	.72	.44	.87	.47	.51
Escape-avoidance	.07	.09	.04	.06	.05	.09	.13	.09
Problem solving	.36	.33	.48	.37	.17	.20	.42	.33
Positive reappraisal	.01	.03	.02	.05	.00	.00	.00	.00



Table 18

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 16	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.15	.07	.15	.06	.18	.06	.08	.04
Confrontive	.23	.34	.17	.36	.35	.35	.08	.17
Distancing	.04	.07	.05	.08	.03	.07	.42	.08
Self-controlling	.10	.15	.05	.12	.19	.18	.00	.00
Seeking social support	.13	.21	.14	.25	.18	.20	.00	.00
Accepting responsibility	.08	.25	.09	.30	.10	.24	.00	.00
Escape-avoidance	.02	.06	.02	.08	.03	.05	.00	.00
Problem solving	.36	.36	.49	.47	.28	.22	.21	.16
Positive reappraisal	.01	.04	.00	.00	.01	.05	.04	.07

Table 19

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 17	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.48	.13	.48	.13	.47	.12	.50	.15
Confrontive	.41	.41	.46	.54	.54	.41	.21	.19
Distancing	.45	.39	.40	.60	.46	.23	.48	.34
Self-controlling	.49	.37	.50	.36	.41	.40	.55	.38
Seeking social support	.42	.53	.63	.52	.30	.66	.35	.36
Accepting responsibility	.63	.70	.13	.23	1.17	.78	.53	.53
Escape-avoidance	.40	.38	.27	.25	.33	.28	.59	.53
Problem solving	.83	.70	1.38	.88	.65	.48	.48	.33
Positive reappraisal	.06	.13	.05	.15	.03	.06	.09	.17

Table 20

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 18	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.28	.14	.27	.11	.36	.29	.24	.06
Confrontive	.29	.57	.13	.19	1.17	1.08	.06	.10
Distancing	.15	.17	.14	.14	.29	.25	.00	.00
Self-controlling	.24	.21	.29	.23	.07	.08	.19	.08
Seeking social support	.20	.31	.15	.26	.50	.49	.11	.10
Accepting responsibility	.72	.63	.81	.63	.19	.24	.92	.72
Escape-avoidance	.41	.37	.40	.37	.34	.45	.58	.32
Problem solving	.31	.33	.38	.37	.08	.10	.17	.00
Positive reappraisal	.02	.06	.02	.07	.00	.00	.00	.00

Table 21

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 19	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.26	.08	.26	.08	.27	.07	.15	.04
Confrontive	.18	.29	.14	.28	.33	.32	.08	.12
Distancing	.08	.15	.05	.10	.19	.25	.00	.00
Self-controlling	.43	.30	.43	.29	.55	.34	.14	.00
Seeking social support	.58	.43	.55	.42	.58	.44	.83	.71
Accepting responsibility	.26	.45	.29	.52	.25	.32	.00	.00
Escape-avoidance	.10	.17	.11	.21	.04	.07	.13	.00
Problem solving	.50	.34	.59	.32	.42	.29	.00	.00
Positive reappraisal	.07	.13	.09	.14	.05	.12	.00	.00

Table 22

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 20	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.20	.06	.23	.06	.19	.05	.21	.10
Confrontive	.16	.21	.26	.30	.15	.17	.03	.07
Distancing	.07	.15	.05	.13	.05	.12	.17	.20
Self-controlling	.11	.18	.14	.22	.13	.20	.03	.06
Seeking social support	.35	.41	.38	.46	.41	.44	.13	.22
Accepting responsibility	.34	.43	.46	.53	.33	.37	.20	.45
Escape-avoidance	.14	.20	.05	.14	.10	.17	.38	.20
Problem solving	.43	.46	.62	.54	.23	.32	.67	.51
Positive reappraisal	.01	.04	.02	.05	.01	.04	.00	.00

Table 23

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 21	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.51	.23	.61	.27	.51	.23	.35	.16
Confrontive	.29	.33	.50	.56	.23	.22	.22	.26
Distancing	.62	.43	.64	.57	.67	.39	.28	.26
Self-controlling	.40	.39	.43	.41	.41	.41	.24	.30
Seeking social support	.43	.45	.75	.69	.34	.31	.28	.48
Accepting responsibility	.19	.34	.13	.21	.21	.38	.25	.43
Escape-avoidance	.29	.28	.60	.25	.23	.22	.00	.00
Problem solving	.70	.51	.78	.54	.73	.53	.39	.35
Positive reappraisal	.58	.37	.52	.32	.61	.42	.48	.08

Table 24

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 22	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.35	.24	.30	.12	.48	.36	.28	.15
Confrontive	.17	.24	.17	.30	.27	.21	.07	.17
Distancing	.39	.39	.35	.21	.52	.50	.30	.42
Self-controlling	.42	.61	.30	.35	.86	.87	.13	.15
Seeking social support	.25	.33	.25	.35	.27	.34	.22	.42
Accepting responsibility	.51	.72	.41	.75	.59	.75	.53	.74
Escape-avoidance	.17	.29	.09	.15	.22	.33	.18	.36
Problem solving	.70	.60	.85	.47	.60	.53	.65	.77
Positive reappraisal	.21	.31	.23	.37	.38	.34	.03	.10

Table 25

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 23	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.39	.09	.39	.12	.34	.08	.45	.05
Confrontive	.27	.30	.31	.29	.27	.23	.24	.39
Distancing	.71	.53	.67	.53	.48	.47	.98	.53
Self-controlling	.74	.42	.43	.29	.76	.38	.94	.45
Seeking social support	.41	.45	.50	.59	.57	.47	.19	.24
Accepting responsibility	.26	.54	.63	.89	.12	.24	.17	.42
Escape-avoidance	.06	.12	.00	.00	.11	.15	.04	.09
Problem solving	1.06	.71	1.22	.73	.70	.50	1.35	.79
Positive reappraisal	.08	.16	.09	.12	.04	.10	.11	.22



Table 26

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 24	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.15	.07	.14	.06	.18	.07	.13	.05
Confrontive	.01	.17	.00	.00	.03	.10	.00	.00
Distancing	.15	.25	.13	.26	.17	.27	.13	.25
Self-controlling	.22	.22	.14	.18	.32	.23	.07	.14
Seeking social support	.16	.24	.02	.06	.21	.28	.33	.24
Accepting responsibility	.31	.51	.39	.61	.35	.49	.00	.00
Escape-avoidance	.14	.20	.19	.27	.09	.14	.16	.19
Problem solving	.16	.31	.37	.42	.06	.15	.00	.00
Positive reappraisal	.06	.14	.00	.00	.08	.16	.11	.21

Table 27

Individual Profiles of Coping Strategy Means (X), Standard  
Deviations (s) - Total and by Context

Subject 25	Total		Work/school		Family/ friends		Health/ finance	
	X	s	X	s	X	s	X	s
Average Coping	.62	.25	.43	.10	.83	.22	.66	.20
Confrontive	.31	.53	.06	.15	.78	.65	.00	.00
Distancing	.60	.49	.46	.43	.78	.61	.60	.35
Self-controlling	.41	.39	.27	.30	.62	.46	.31	.29
Seeking social support	.75	.82	.27	.30	1.39	.66	.63	1.08
Accepting responsibility	.74	.96	.41	.91	1.17	1.12	.70	.54
Escape-avoidance	.19	.27	.11	.24	.24	.29	.28	.28
Problem solving	1.16	.60	1.08	.46	.96	.61	1.70	.64
Positive reappraisal	.31	.42	.20	.27	.49	.60	.26	.23

Table 28

Individual Coefficients of Concordance and Chi-Square Statistics


---

All episodes (N=25)

Subject	W	Chi-square	
<hr/>			
01	.2553	44.68	***
02	.3300	57.74	***
03	.2329	40.76	***
04	.2624	45.92	***
05	.2003	35.04	***
06	.0611	10.69	
07	.4724	82.67	***
08	.5201	91.01	***
09	.2413	42.23	***
10	.4022	70.39	***
11	.3281	57.42	***
12	.2559	44.78	***
13	.4576	80.08	***
14	.1277	22.35	**
15	.2162	37.84	***
16	.2760	48.30	***
17	.1863	32.60	***
18	.2734	47.85	***
19	.3002	52.53	***
22	.1947	34.07	***
23	.1995	36.31	***
24	.1919	33.58	***
25	.3854	67.45	***
26	.1025	17.94	*
28	.2503	43.81	***

---

( \* $p < .02$ , \*\* $p < .005$ , \*\*\* $p < .0001$ )

Table 29

Individual Coefficients of Concordance and Chi-Square Statistics


---

Work/school			
Subject	Cases	W	Chi-square
<hr/>			
01	7	.6704	32.85***
02	9	.3386	21.33**
03	17	.2965	35.29***
04	9	.3949	24.88***
05	9	.2960	18.65**
06	8	.2638	14.77*
07	7	.5886	28.84***
08	11	.6259	48.19***
09	8	.5155	28.87***
10	5	.6247	21.86**
11	8	.3494	19.56**
12	10	.4100	28.70***
13	10	.6639	46.47***
14	10	.2845	19.91**
15	9	.2800	17.64*
16	11	.2537	19.54**
17	8	.4141	23.19*
18	17	.3443	43.38***
19	17	.3493	41.56***
22	7	.3074	15.06*
23	6	.2638	11.08
24	8	.3260	18.26*
25	6	.5504	23.12**
26	9	.2121	13.36
28	11	.3880	29.27***

---

( \* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$ )

Table 30

Individual Coefficients of Concordance and Chi-Square Statistics


---

Family/friends			
Subject	Cases	W	Chi-square
<hr/>			
01	7	.3040	14.89*
02	9	.3009	18.96**
03	6	.1769	7.43
04	9	.4484	28.25***
05	8	.2735	15.31*
06	10	.0549	3.85
07	11	.4718	36.33***
08	6	.3545	14.89*
09	8	.2624	14.70*
10	4	.5141	14.39*
11	9	.5202	32.77***
12	8	.3384	18.95**
13	8	.4672	26.17***
14	6	.2572	10.80
15	8	.2375	13.30
16	10	.3941	27.59***
17	9	.4036	25.43***
18	4	.5520	15.46*
19	6	.3402	14.29*
22	13	.2466	22.44*
23	16	.2640	31.18***
24	8	.2375	13.30
25	10	.3576	25.03***
26	12	.1912	16.06*
28	9	.2999	18.89**

---

( \* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$ )

Table 31

Individual Coefficients of Concordance and Chi-Square Statistics


---

Health/finance			
Subject	Cases	W	Chi-square
<hr/>			
01	11	.2948	32.70**
02	7	.4814	23.59**
03	2	.5692	7.97
04	7	.4620	22.64**
05	8	.5044	28.25***
06	7	.1623	7.95
07	7	.5044	24.71***
08	8	.6149	34.43***
09	9	.2032	12.80
10	16	.4556	51.02***
11	8	.4902	27.45***
12	7	.5082	24.90***
13	7	.3877	18.90**
14	9	.1404	8.85
15	8	.3280	18.37**
16	4	.4405	12.33
17	8	.2031	11.37
18	3	.8491	17.83*
19	2	.8623	12.07
22	5	.5746	20.11**
23	3	.2421	5.08
24	9	.2067	13.02
25	9	.5562	35.04***
26	4	.3876	10.85
28	5	.5449	19.07**

---

( \*p < .05, \*\*p < .01, \*\*\*p < .001)

Table 32

Group Kendall's Coefficient of Concordance (W) - Total  
and by Context

	Intersubject 'W'	Chi-square	Cases	Intrasubject 'W'
All episodes	.1551	679.85	625	.2690
Work/school	.2178	361.26	236	.4005
Family/friends	.1002	151.45	216	.3299
Health/finance	.1883	228.04	173	.4382

(all are significant at  $p < .001$ )

Table 33

Pearson Correlations - Consistency with Coping Strategy


---

All Context	
<hr/>	
	r
<hr/>	
Coping	.208
Confrontive	.034
Distancing	.240
Self-controlling *	.482
Seeking social support	.240
Accepting responsibility	-.097
Escape-avoidance	-.175
Problem solving	.621 **
Positive reappraisal	-.006

---

( \*p &lt; .02, \*\*p &lt; .001)



Table 34

Pearson Correlations - Consistency with Coping Strategy, by Context

	Work/school		Family/friends		Health/finance	
	r	p	r	p	r	p
Coping	.109	ns	.152	ns	-.131	ns
Confrontive	-.123	ns	.400	.048	.263	ns
Distancing	.447	.025	.101	ns	-.160	ns
Self-controlling	.566	.003	.216	ns	-.030	ns
Seeking social support	-.041	ns	.158	ns	-.007	ns
Accepting responsibility	-.071	ns	-.350	ns	-.007	ns
Escape-avoidance	-.325	ns	.058	ns	-.155	ns
Problem solving	.627	.001	.351	ns	.108	ns
Positive reappraisal	-.011	ns	-.088	ns	-.206	ns

Table 35

Multivariate Analysis of Variance of Means, Standard  
Deviations, and Coefficients of Variation of Coping  
Scores for Context, Strategy and Context\*Strategy

Source	F approximation (Wilk's criterion)	df	p
Context	2.30	6,92	.04
Strategy	16.08	21,35	.0001
Strategy*Context	1.41	42,1490	.04

Table 36

Analysis of Variance of Mean Coping Strategy Scores for  
Subject x Strategy x Context

---

Source	Sums of Squares	Mean Square	df	F
Model	56.65	.596	95	10.15*
Subject	32.13		24	22.79*
Context	0.10		2	.87
Context*Subject	2.83		48	1.00
Strategy	19.25		7	46.80*
Strategy*Context	2.34		14	2.85*
Error	29.61	.059	504	
Total	86.26		599	

---

\* $p < .001$

Table 37

Analysis of Variance of Standard Deviations of Coping StrategyScores for Subject x Strategy x Context

Source	Sums of Squares	Mean Square	df	F
Model	16.42	.173	95	6.55*
Subject	7.09		24	11.19**
Context	0.20		2	3.84*
Context*Subject	1.27		48	1.00
Strategy	6.99		7	37.88**
Strategy*Context	0.88		14	2.37**
Error	13.30	.026	504	
Total	29.73		599	

\* $p < .05$ , \*\* $p < .001$

Table 38

Analysis of Variance of Coefficients of Variation of Coping Strategy  
Scores for Subject x Strategy x Context

Source	Sums of Squares	Mean Square	df	F
Model	108.36	1.140	95	3.18**
Subject	35.17		24	4.09**
Context	1.80		2	1.49
Context*Subject	28.90		48	1.68*
Strategy	37.55		7	14.96***
Strategy*Context	4.93		14	0.98
Error	180.71	.359	504	
Total	289.07		599	

\* $p < .01$ , \*\* $p < .001$

Table 39

Mean Perceived Effectiveness Ratings by Subject- Total, and Per Context

Subject	Total	Work/school	Family/friend	Health/finance
01	4.08	4.14	4.29	3.91
02	2.92	2.78	2.78	3.29
03	3.32	3.41	3.33	2.50
04	2.28	2.44	2.33	2.00
05	3.20	3.11	3.50	3.00
06	3.52	4.00	3.33	3.20
07	4.08	4.00	4.00	4.29
08	3.68	3.64	3.67	3.75
09	3.08	3.13	2.88	3.22
10	3.04	3.60	3.00	2.88
11	3.60	3.63	3.33	3.88
12	2.84	3.20	2.63	2.57
13	3.44	3.20	3.50	3.71
14	3.16	3.20	3.33	3.00
15	2.84	2.78	3.13	2.63
16	3.04	3.55	2.30	3.50
17	3.04	3.38	2.63	3.13
18	2.83	2.53	2.25	1.67
19	3.24	3.35	3.00	3.00
22	3.16	3.86	2.92	2.80
23	3.73	3.00	4.00	3.67
24	2.60	3.38	2.25	2.22
25	3.60	4.00	3.78	3.20
26	2.20	1.67	2.50	2.50
28	3.52	4.09	3.11	3.00

Table 40

Pearson Correlations - Consistency with Effectiveness

	r	p
All episodes	.382	.0594
Work/school	.428	.0330
Family/friends	-.111	ns
Health/finance	-.176	ns

Table 41

Pearson Correlations - Effectiveness with Coping Strategy


---

All contexts		
	r	p
Coping	.456	.022
Confrontive	.278	ns
Distancing	.527	.007
Self-controlling	.498	.011
Seeking social support	.333	ns
Accepting responsibility	.070	ns
Escape-avoidance	.047	ns
Problem solving	.583	.002
Positive reappraisal	.455	.022

---



Table 42

Pearson Correlations - Effectiveness with Coping Strategy, by Context

	Work/school	Family/friends	Health/finance
	r	r	r
Coping	.303	.270	.346
Confrontive	.292	-.256	.372
Distancing	.399 *	.357	.412 *
Self-controlling	.363	.294	.512 **
Seeking social support	.133	.182	.252
Accepting responsibility	.048	.014	-.110
Escape-avoidance	-.024	-.001	-.113
Problem solving	.583 **	.331	.472 *
Positive reappraisal	.336	.371	.363

( \* $p < .05$ , \*\* $p < .01$ )

Table 43

Individual Spearman Rank Order Coefficients for Ways of CopingProfile (General) with Ways of Coping Profile (Specific)

Subject	Spearman r
01	.50
02	.39
03	.36
04	-.08
05	.39
06	.12
07	.30
08	.79*
09	.50
10	.56
11	.95**
12	-.03
13	.71*
14	-.08
15	.18
16	.12
17	.32
18	.29
19	.31
22	.56
23	.10
24	.33
25	.43
26	.49
28	.55

( \*p < .05, \*\*p < .01)

## Appendix H

### Figures

Figure 1. Group Coping Profile by Context

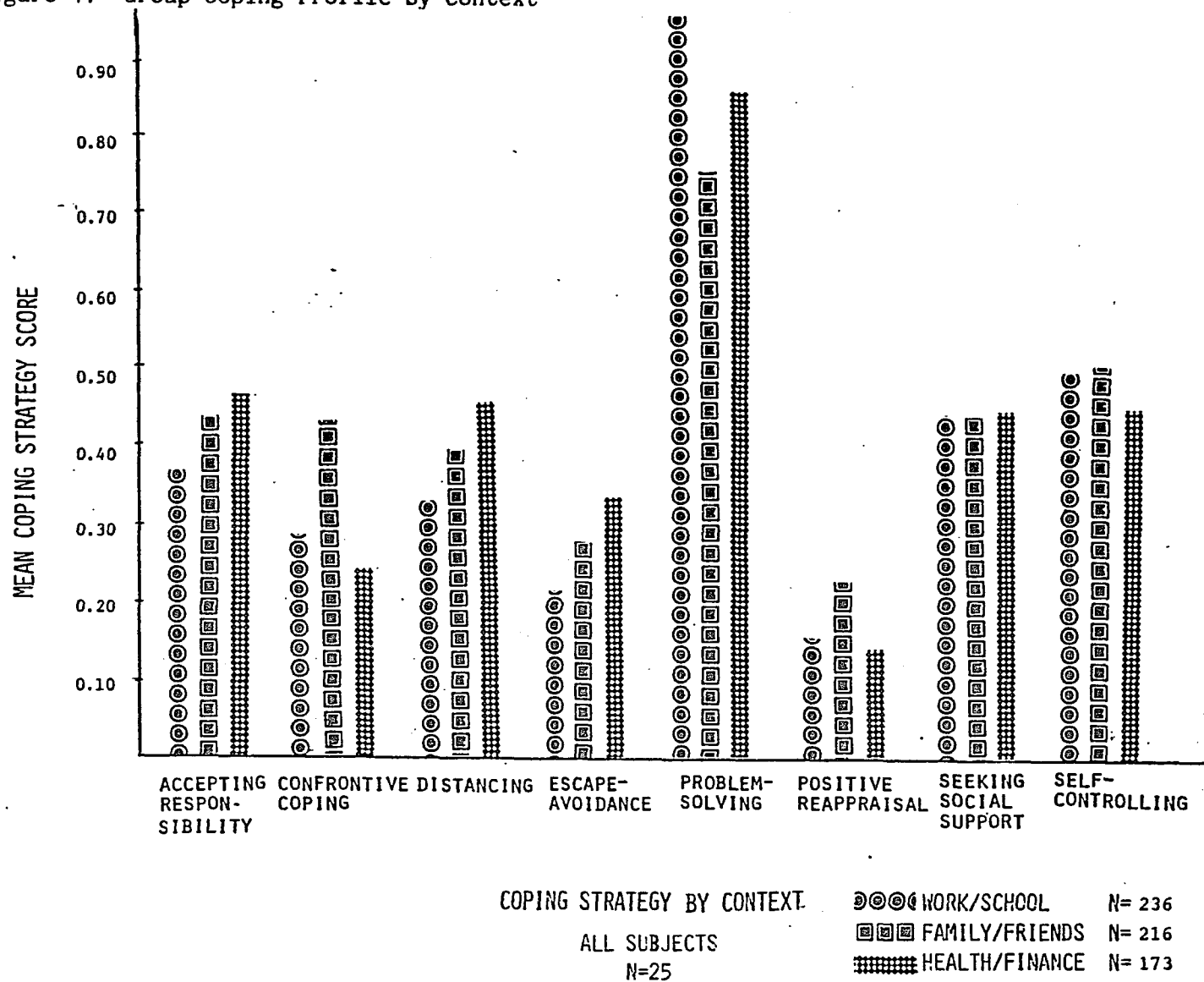


Figure 2. Coping Strategy by Context - Subject 01

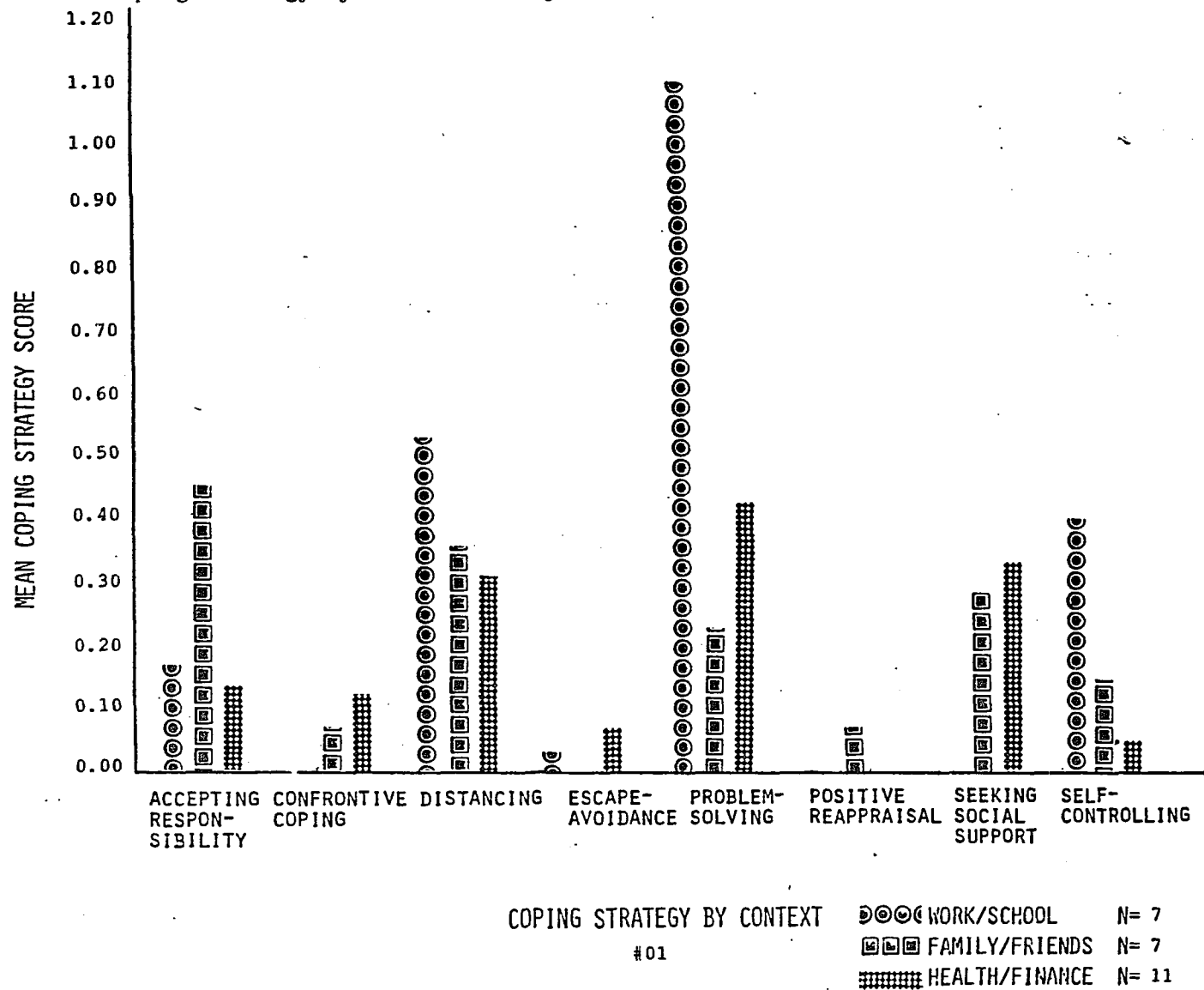
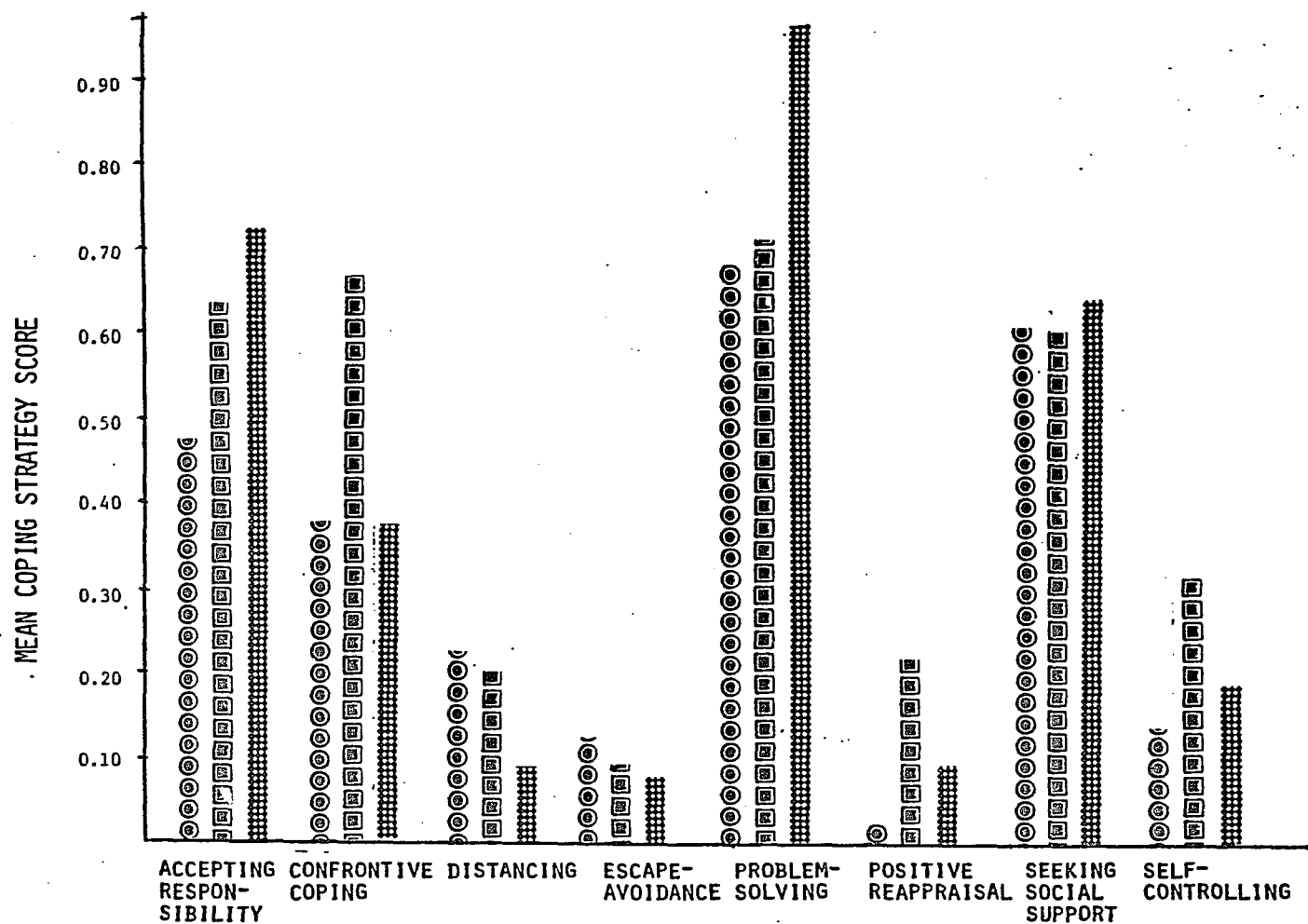


Figure 3. Coping Strategy by Context - Subject 02



COPING STRATEGY BY CONTEXT

# 02

○○○ WORK/SCHOOL N= 9  
 □□□ FAMILY/FRIENDS N= 9  
 ##### HEALTH/FINANCE N= 7

Figure 4. Coping Strategy by Context - Subject 03

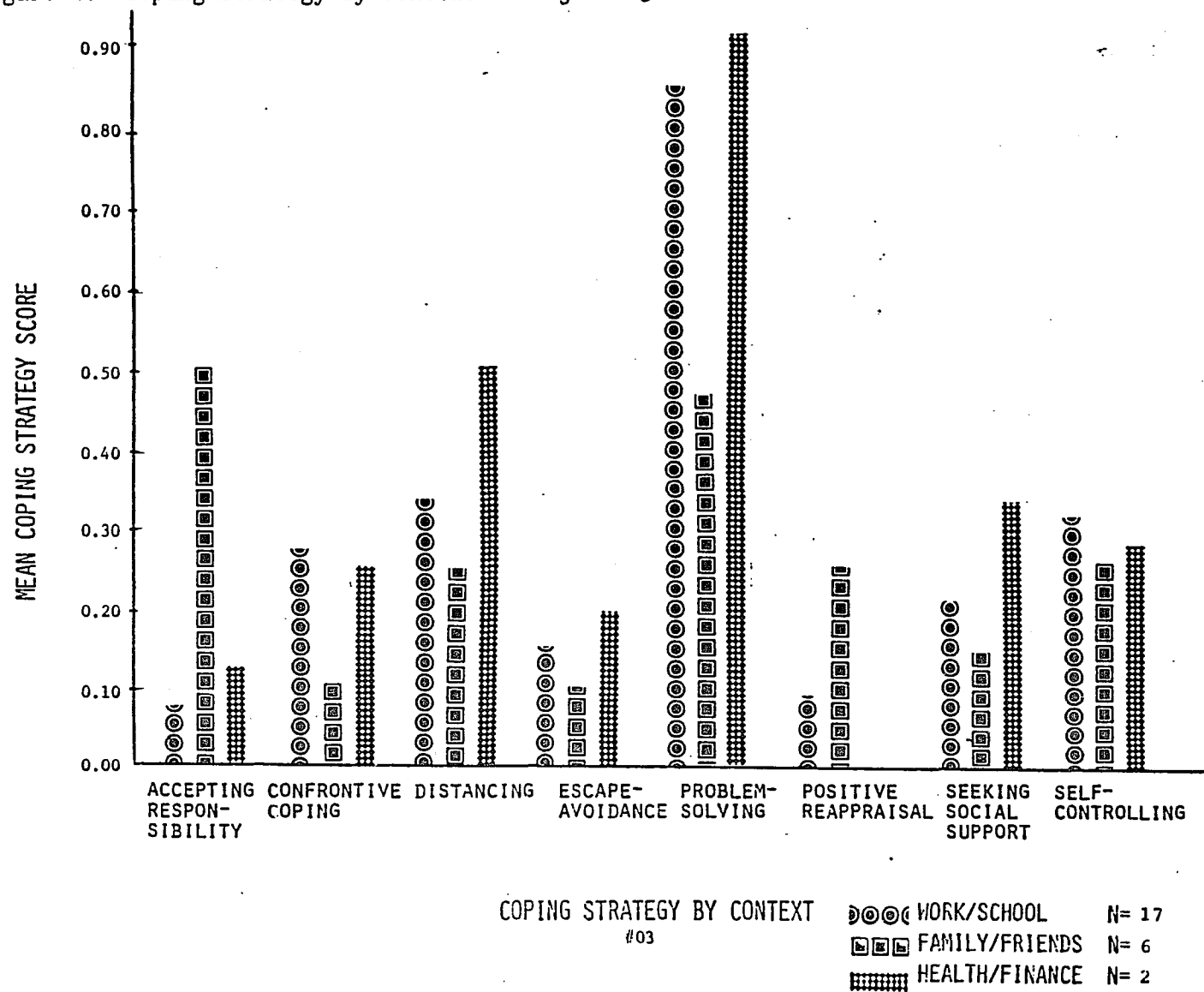


Figure 5. Coping Strategy by Context - Subject 04

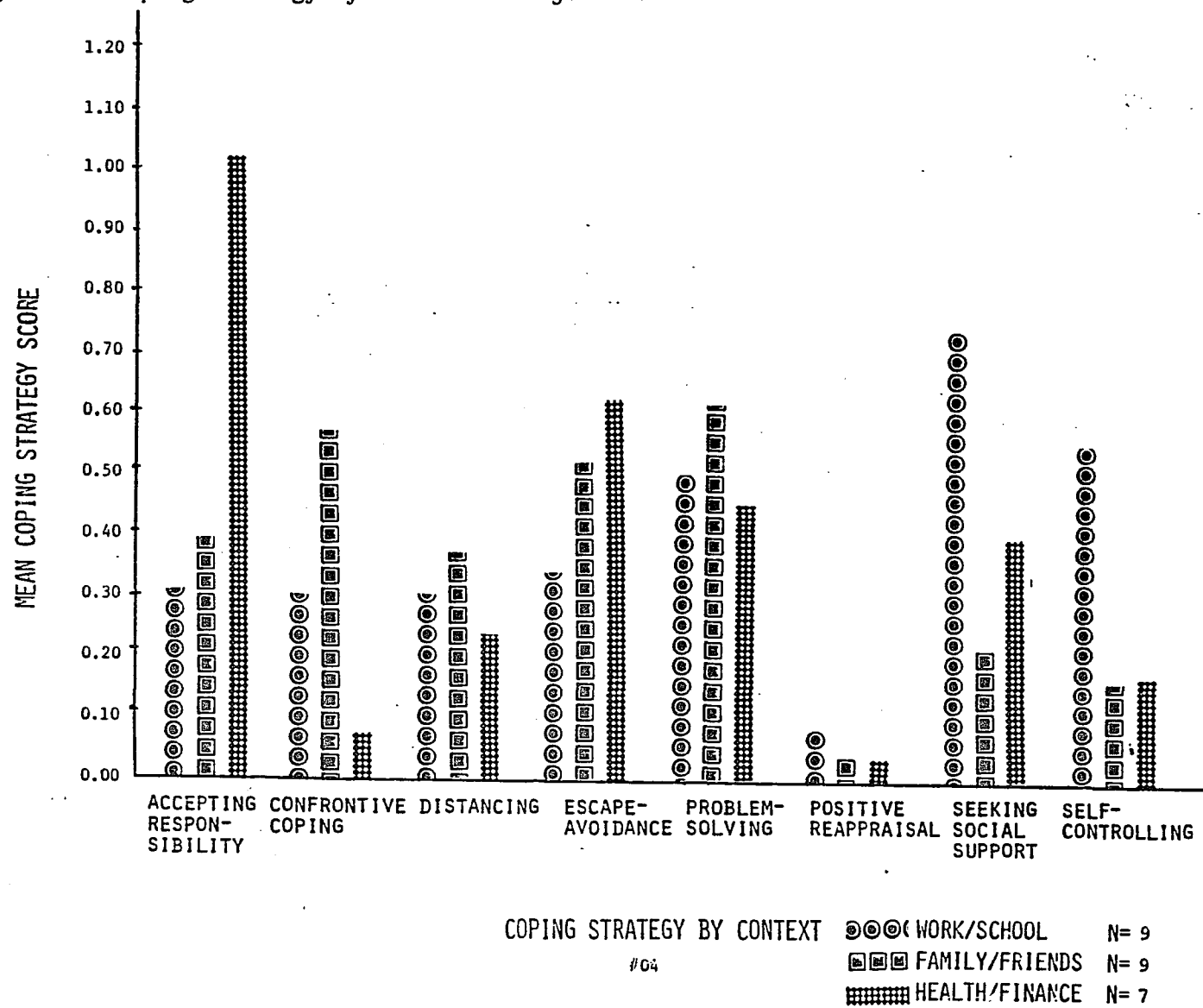




Figure 6. Coping Strategy by Context - Subject 05

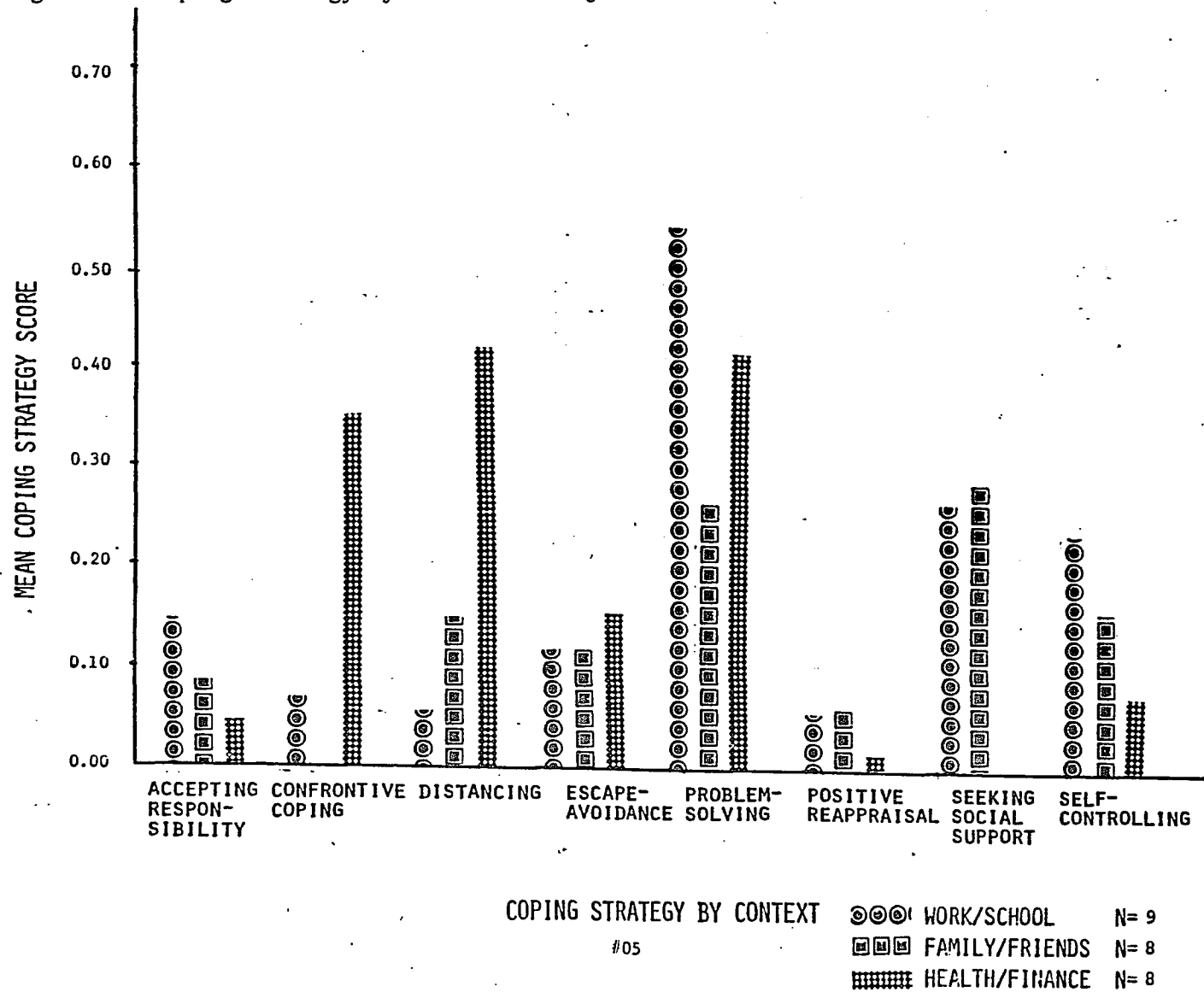
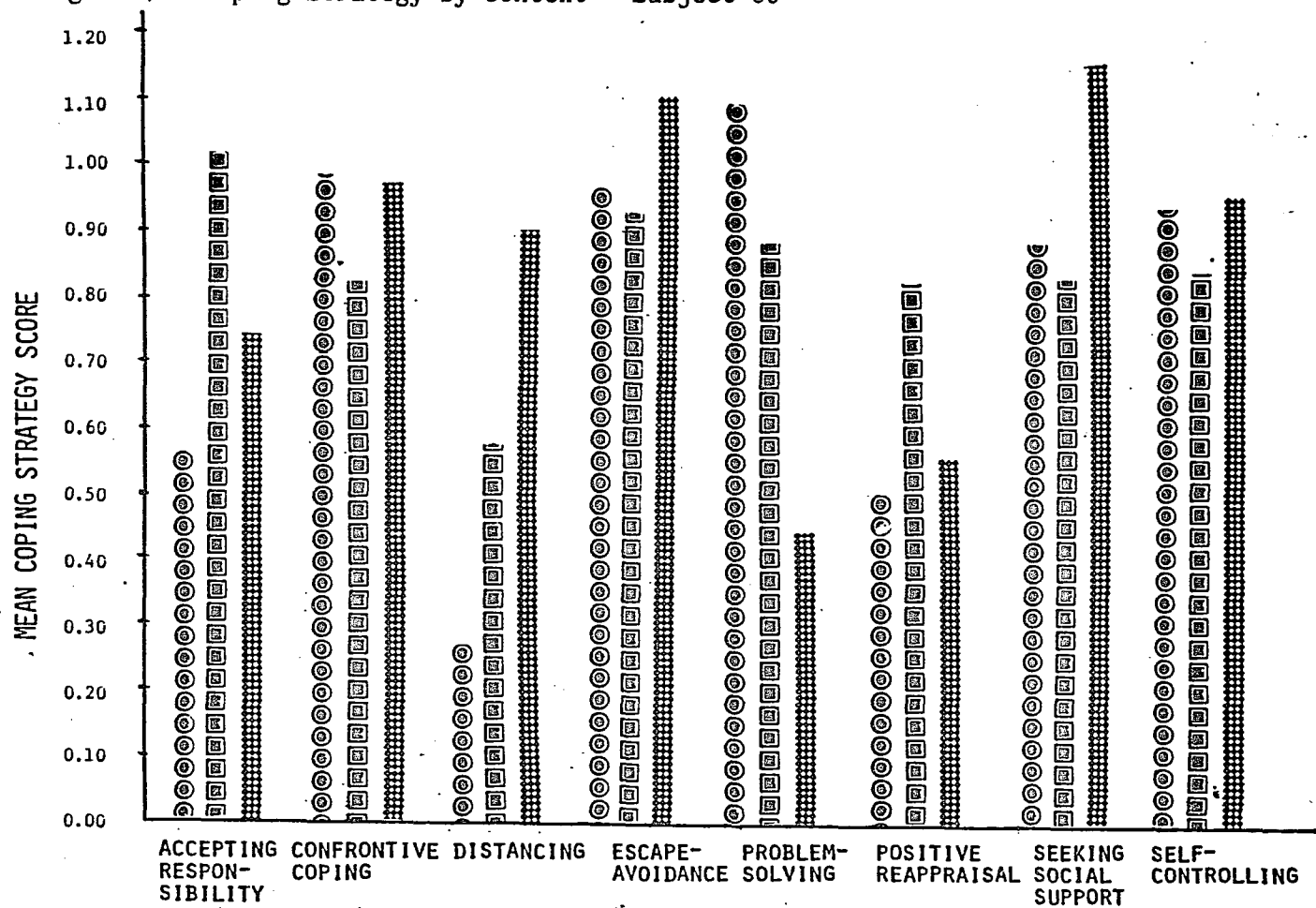


Figure 7. Coping Strategy by Context - Subject 06



COPING STRATEGY BY CONTEXT

#06

○○○○ WORK/SCHOOL N= 8  
 □□□□ FAMILY/FRIENDS N= 10  
 ■■■■ HEALTH/FINANCE N= 7

Figure 8. Coping Strategy by Context - Subject 07

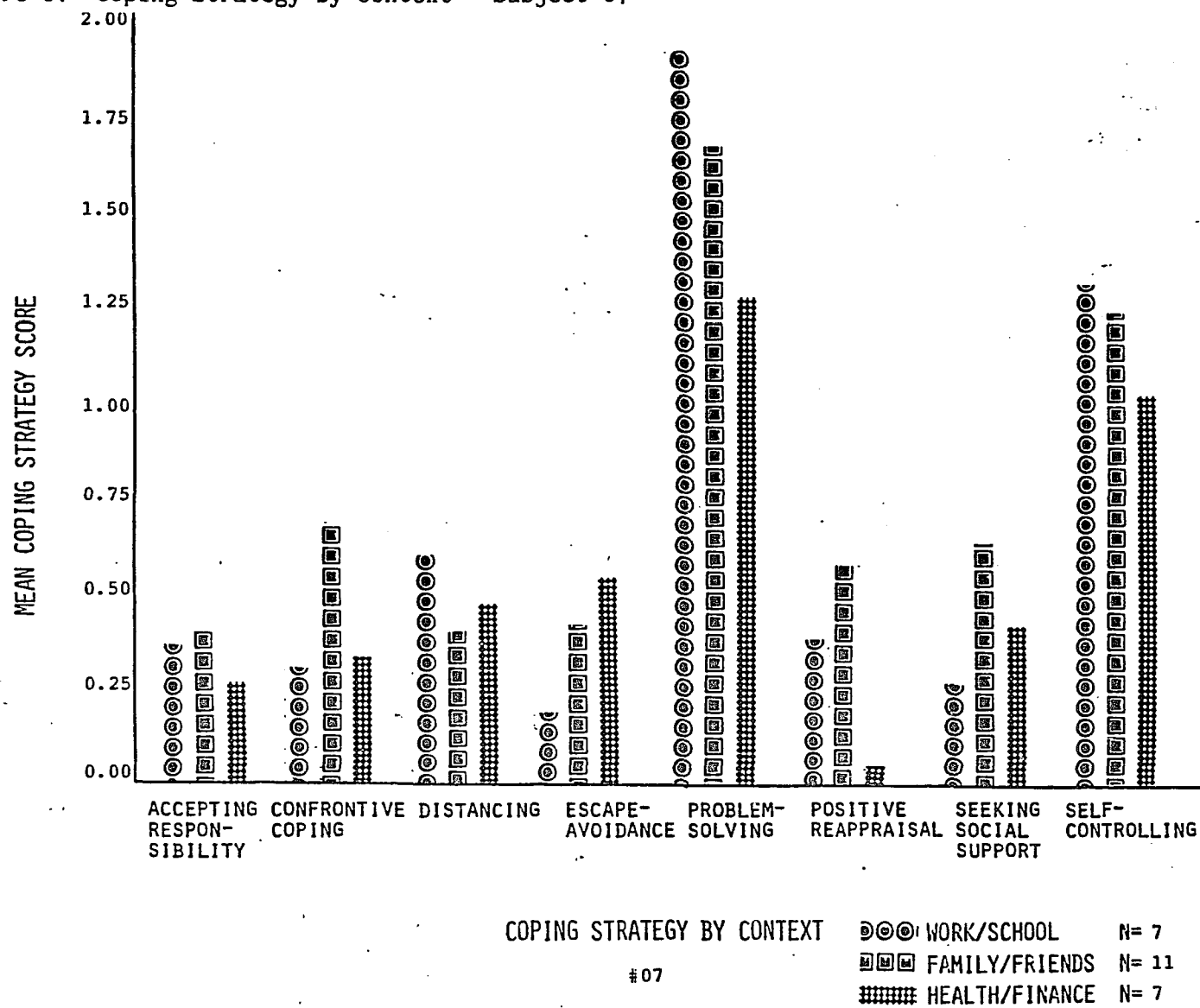


Figure 9. Coping Strategy by Context - Subject 08

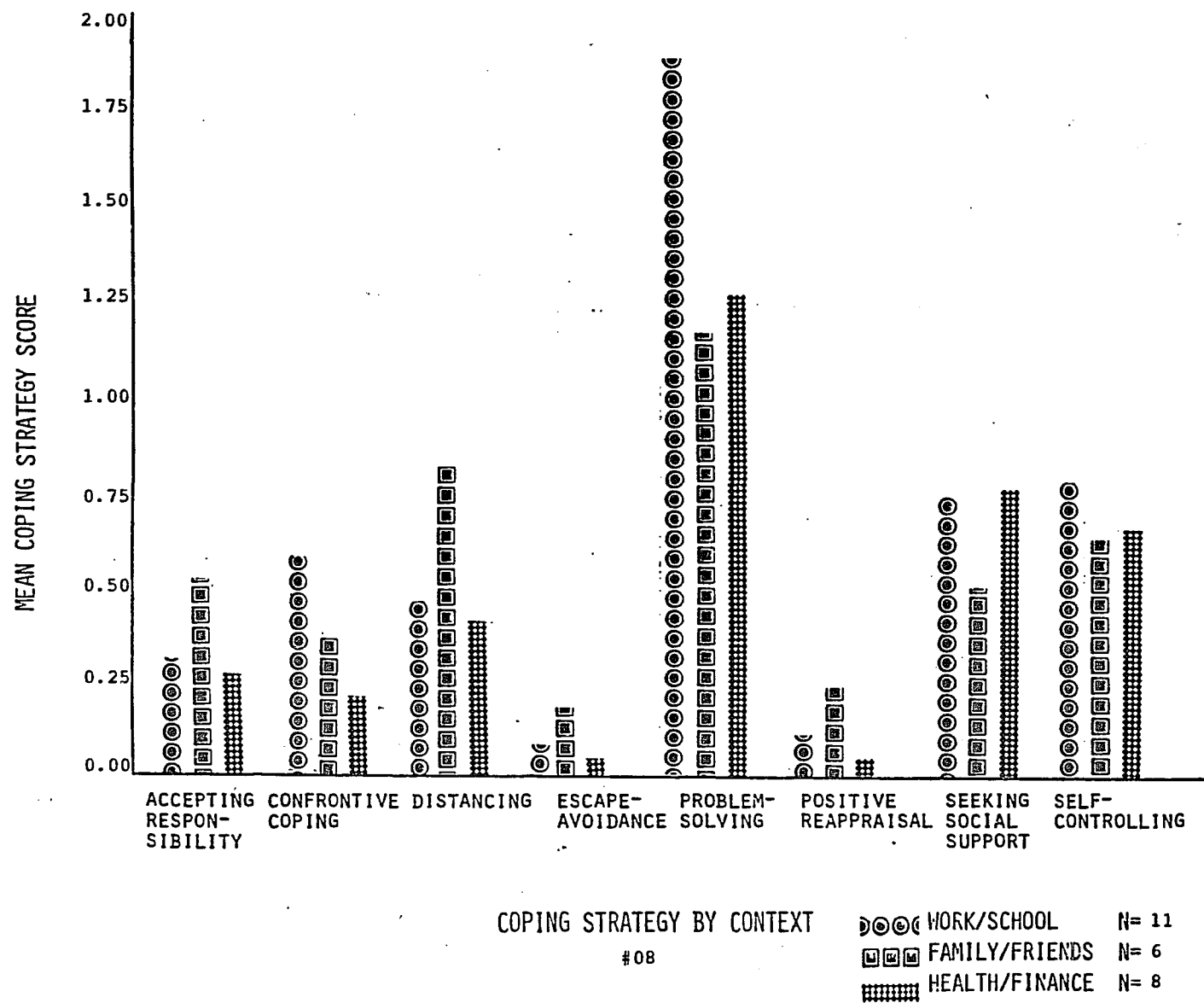


Figure 10. Coping Strategy by Context - Subject 09

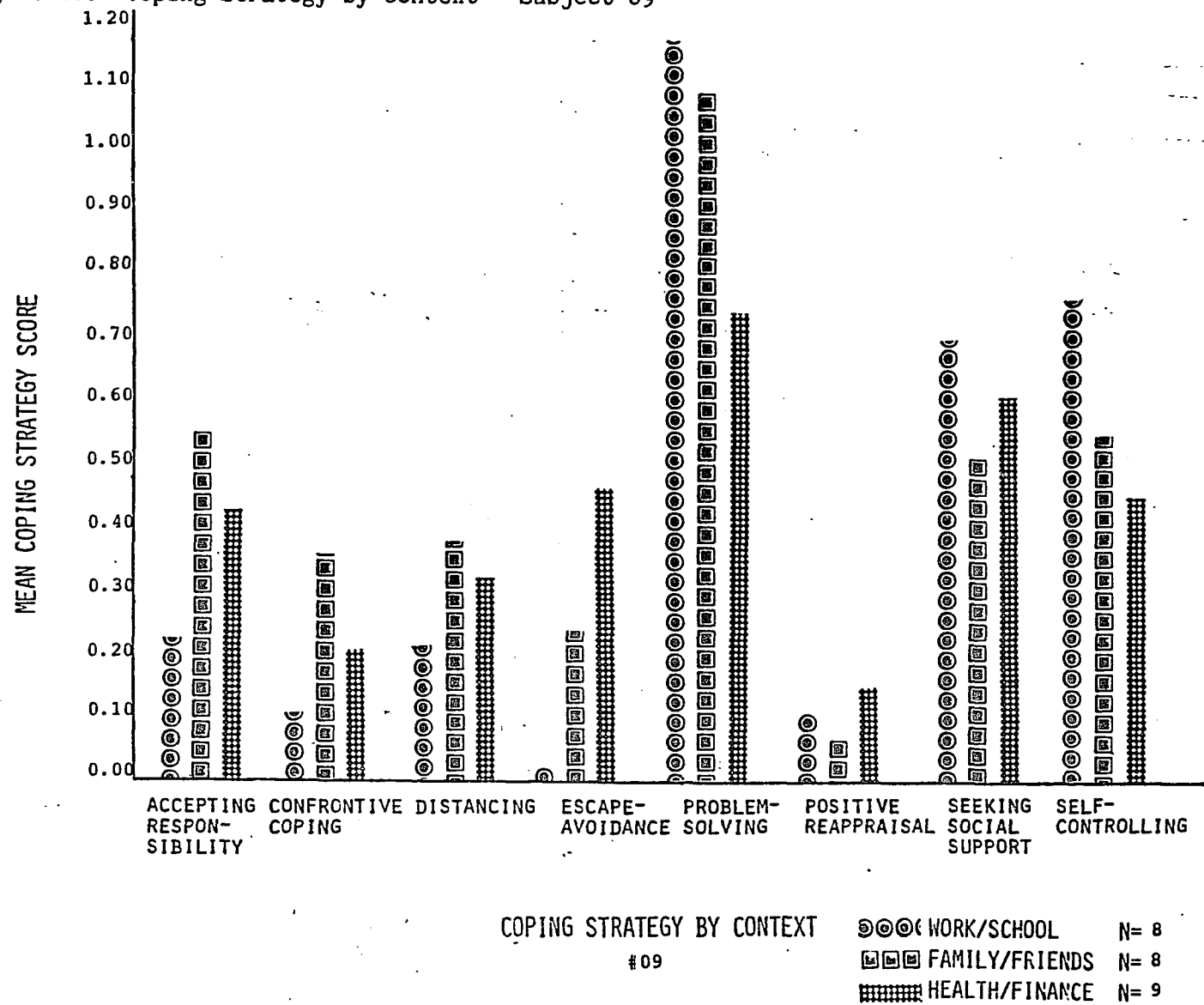
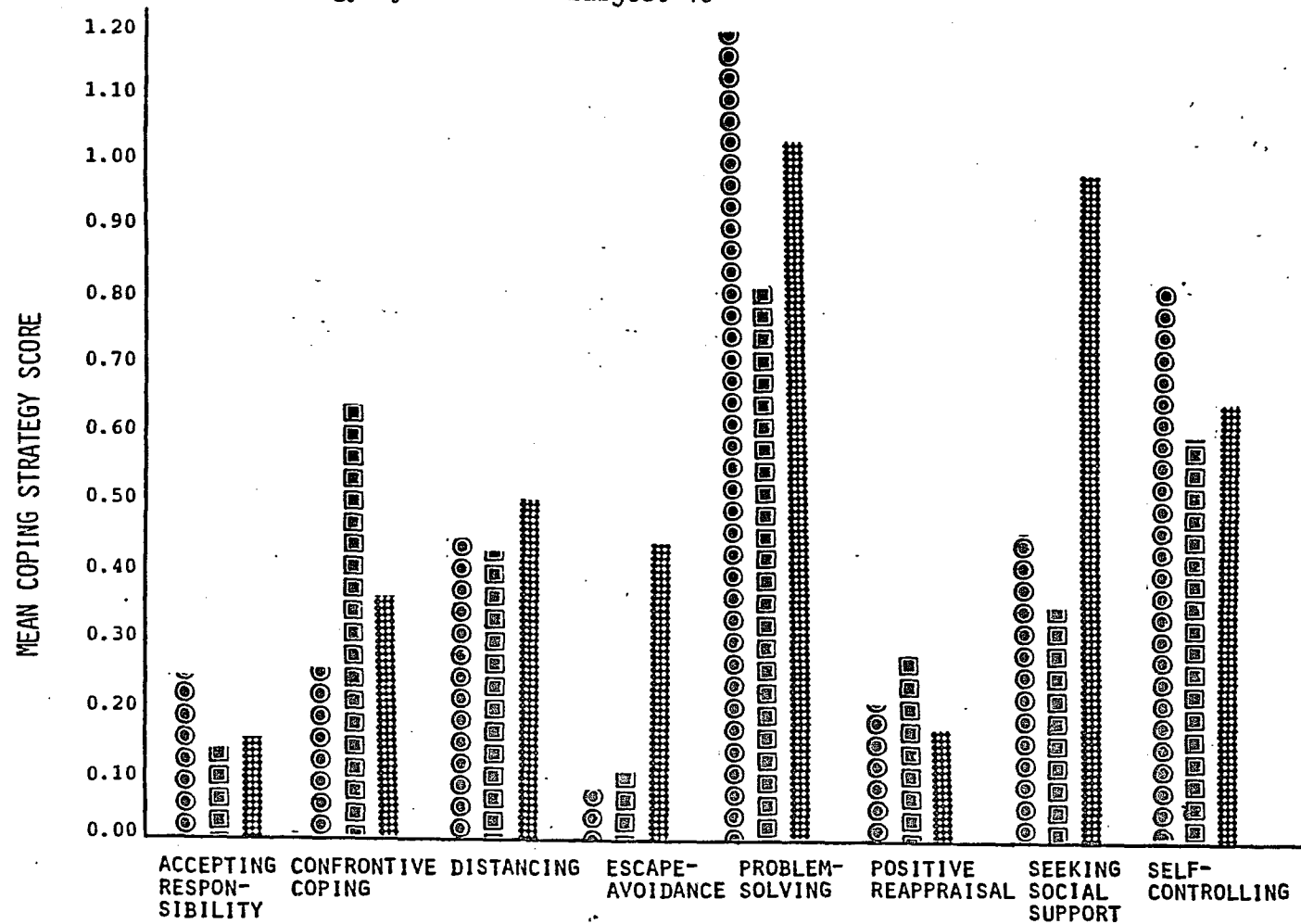


Figure 11. Coping Strategy by Context - Subject 10

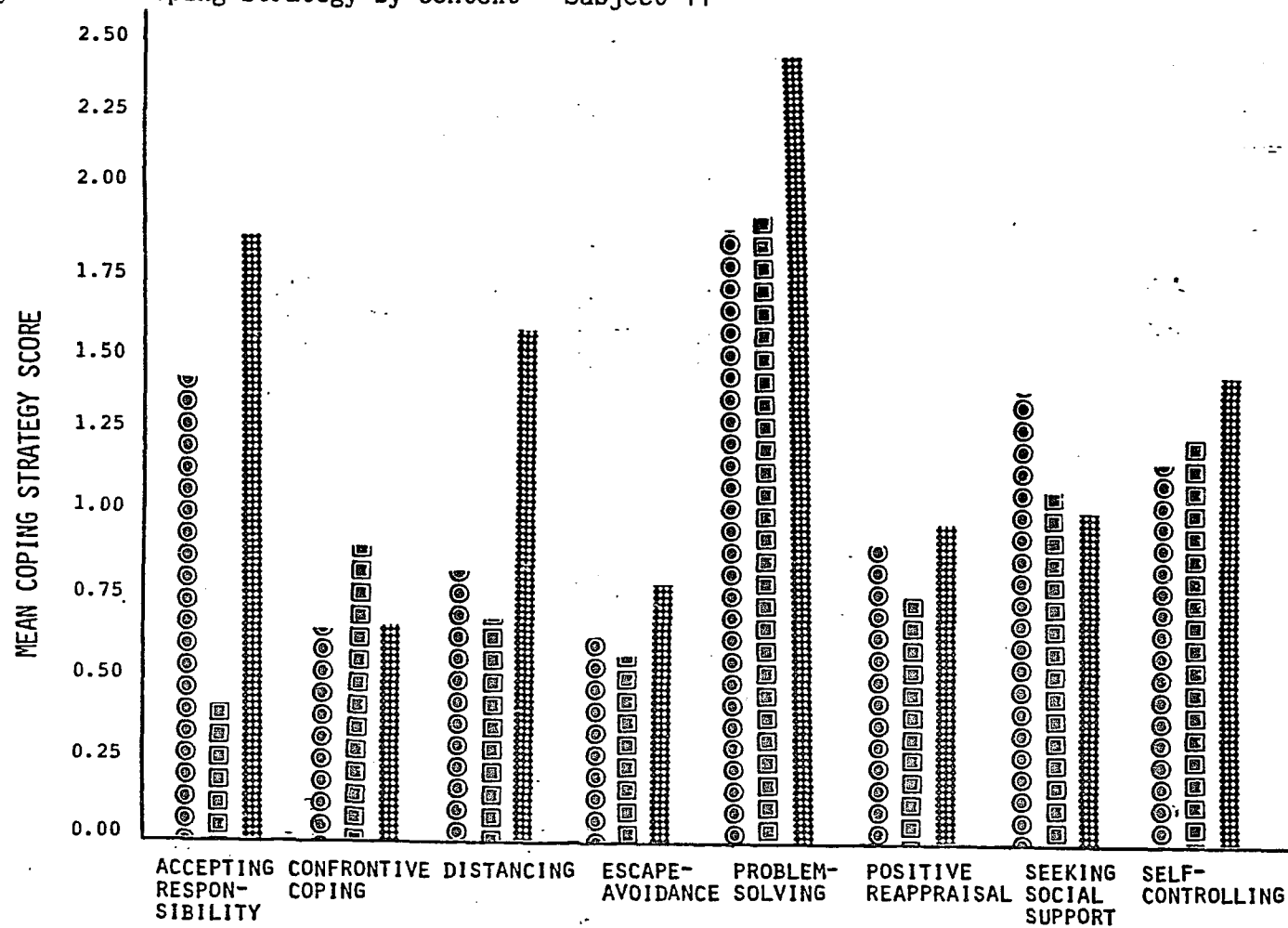


COPING STRATEGY BY CONTEXT

#10

○○○○ WORK/SCHOOL N= 5  
 □□□□ FAMILY/FRIENDS N= 4  
 ■■■■■ HEALTH/FINANCE N= 16

Figure 12. Coping Strategy by Context - Subject 11



COPING STRATEGY BY CONTEXT

#11

○○○○ WORK/SCHOOL N=8

□□□□ FAMILY/FRIENDS N=9

##### HEALTH/FINANCE N=8

Figure 13. Coping Strategy by Context - Subject 12

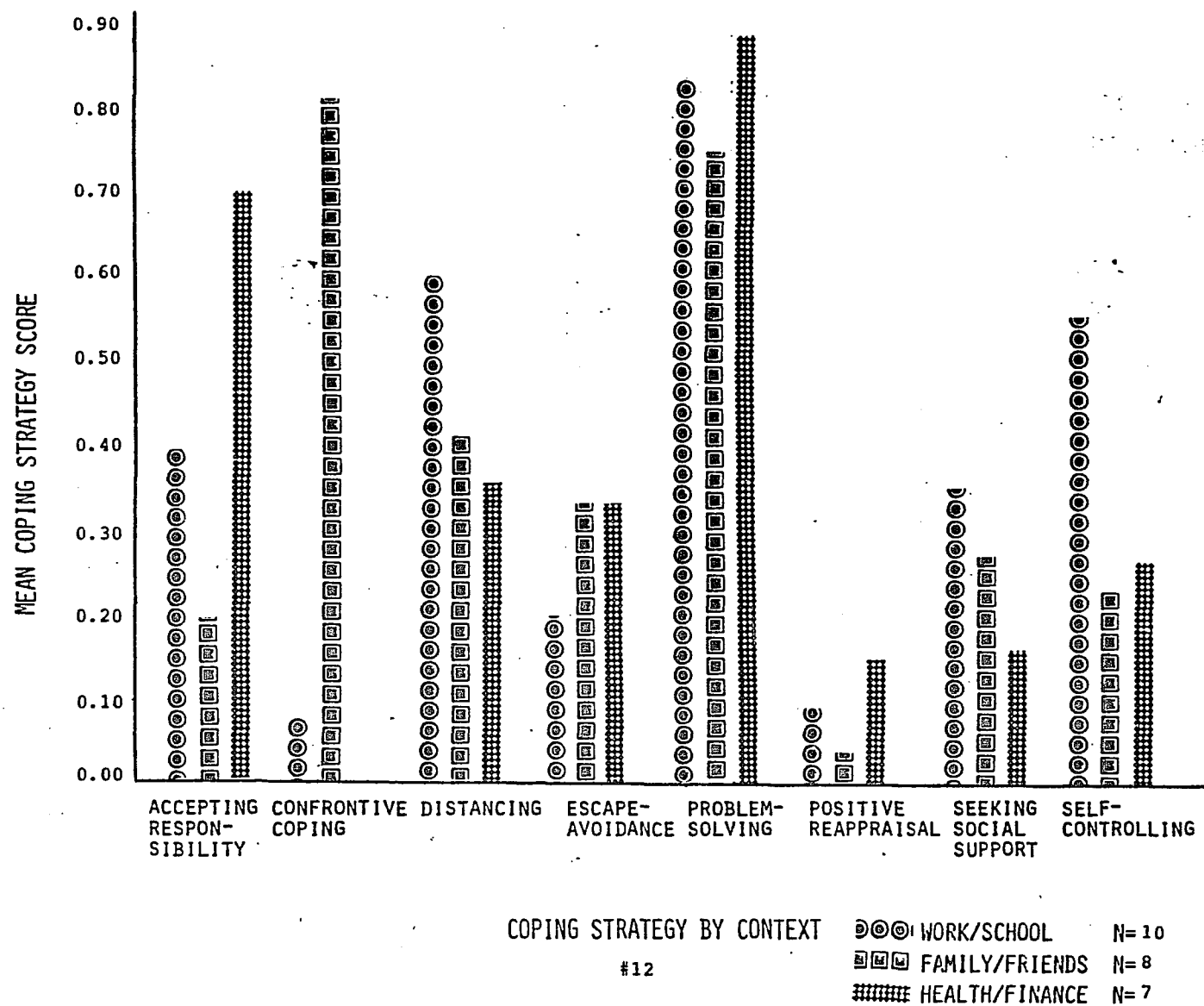
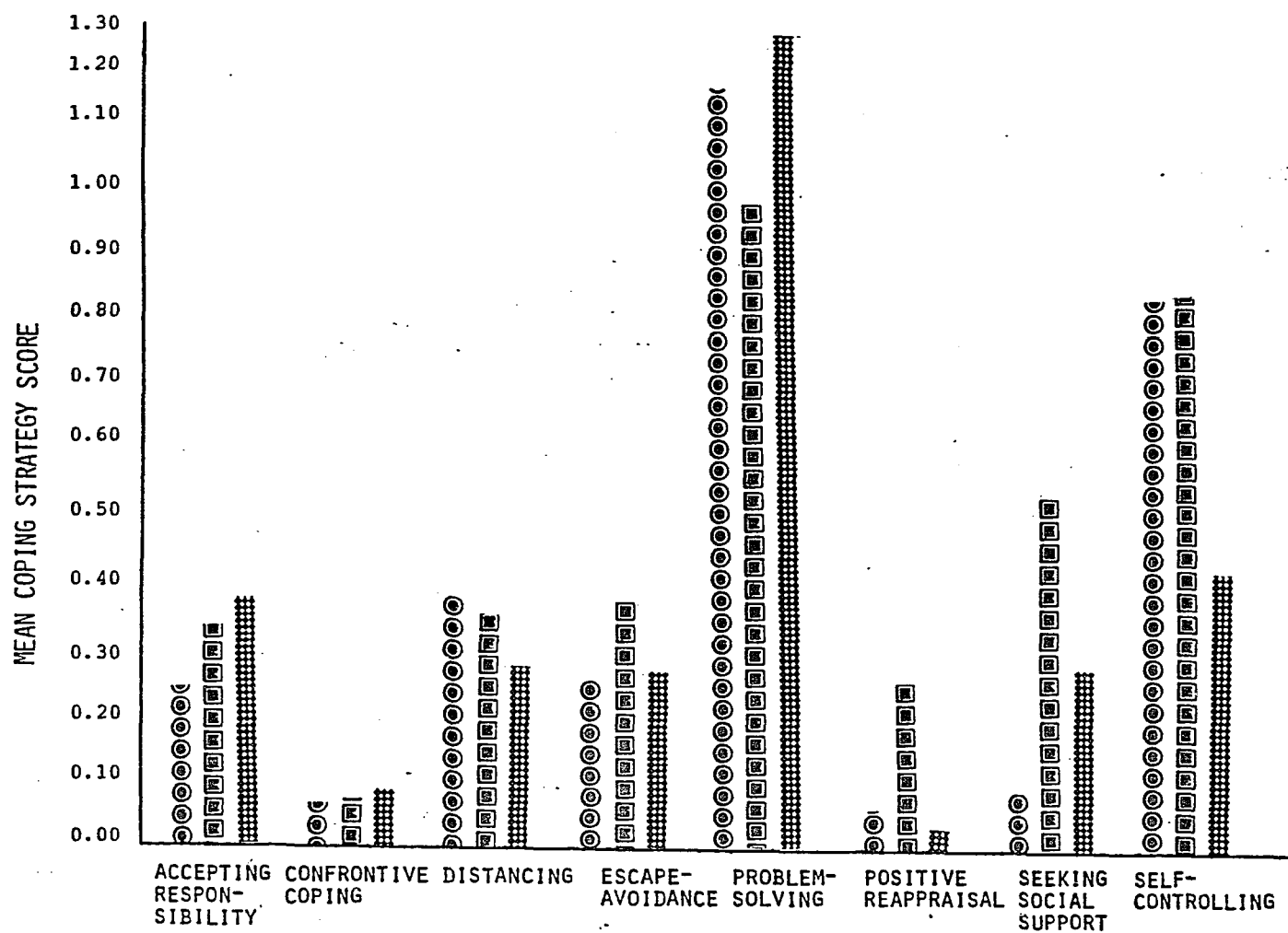




Figure 14. Coping Strategy by Context - Subject 13

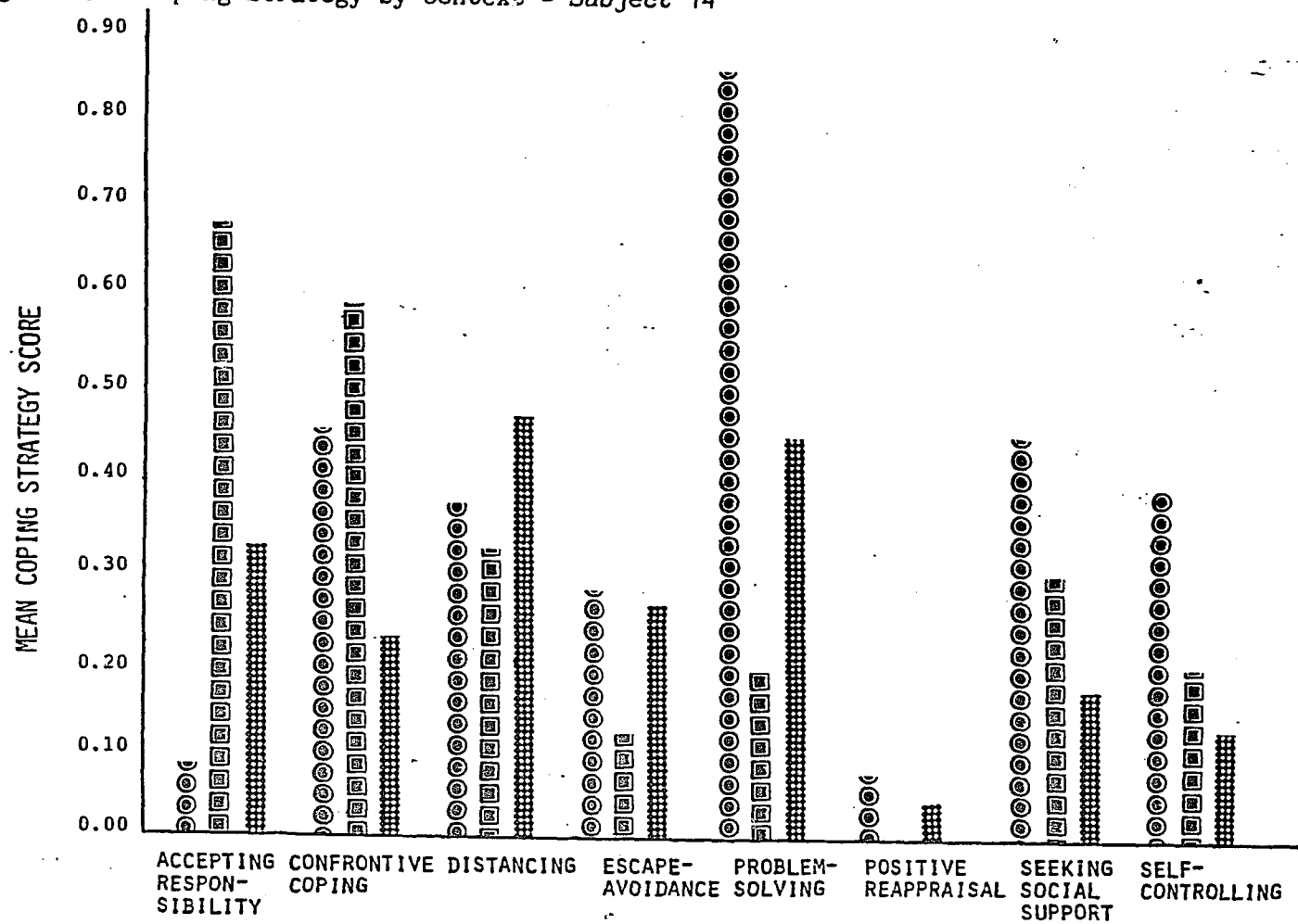


COPING STRATEGY BY CONTEXT

#13

○○○○ WORK/SCHOOL N=10  
 □□□□ FAMILY/FRIENDS N=8  
 ■■■■ HEALTH/FINANCE N=7

Figure 15. Coping Strategy by Context - Subject 14



COPING STRATEGY BY CONTEXT

#14

WORK/SCHOOL N=10  
FAMILY/FRIENDS N=6  
HEALTH/FINANCE N=9

Figure 16. Coping Strategy by Context - Subject 15

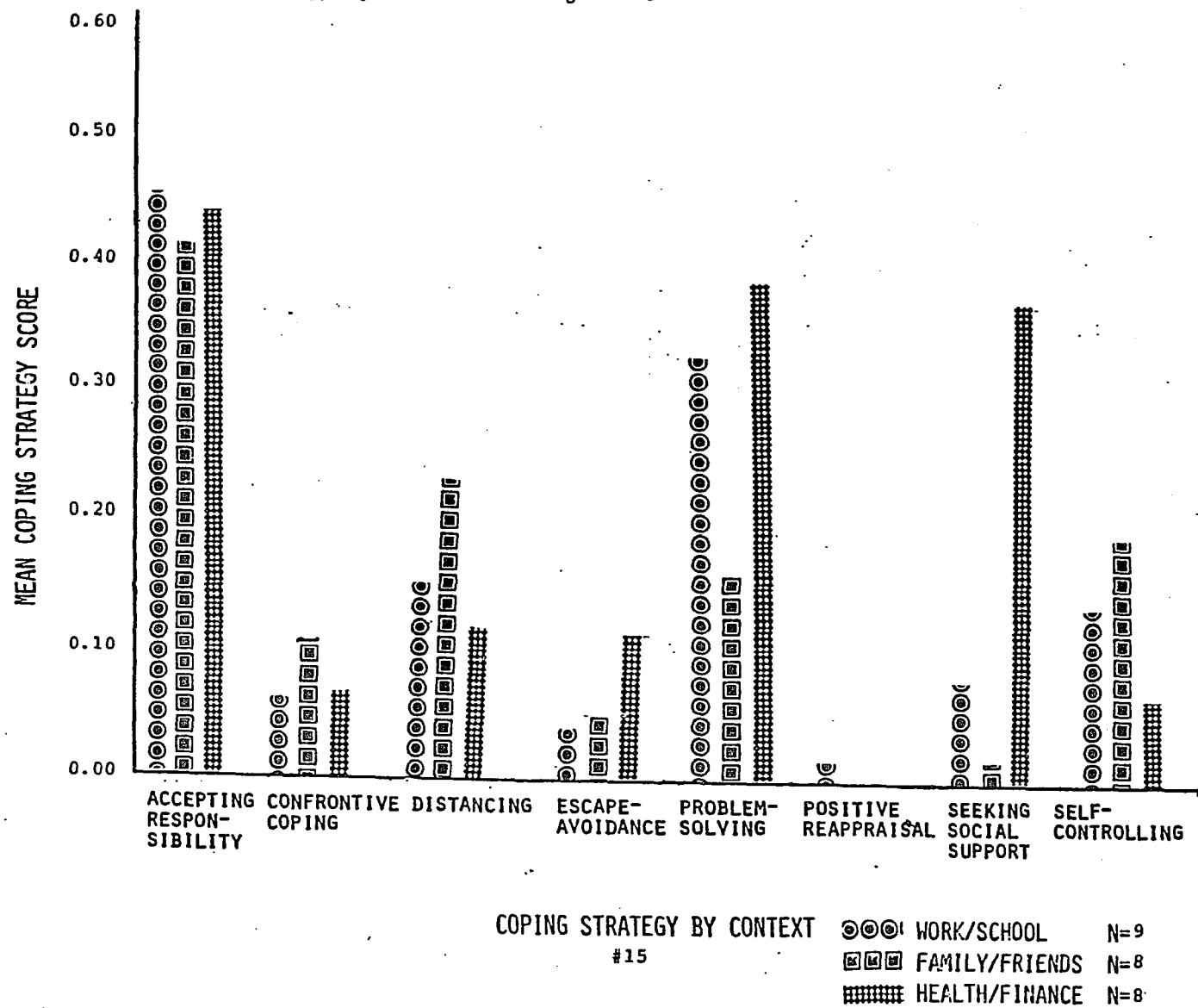
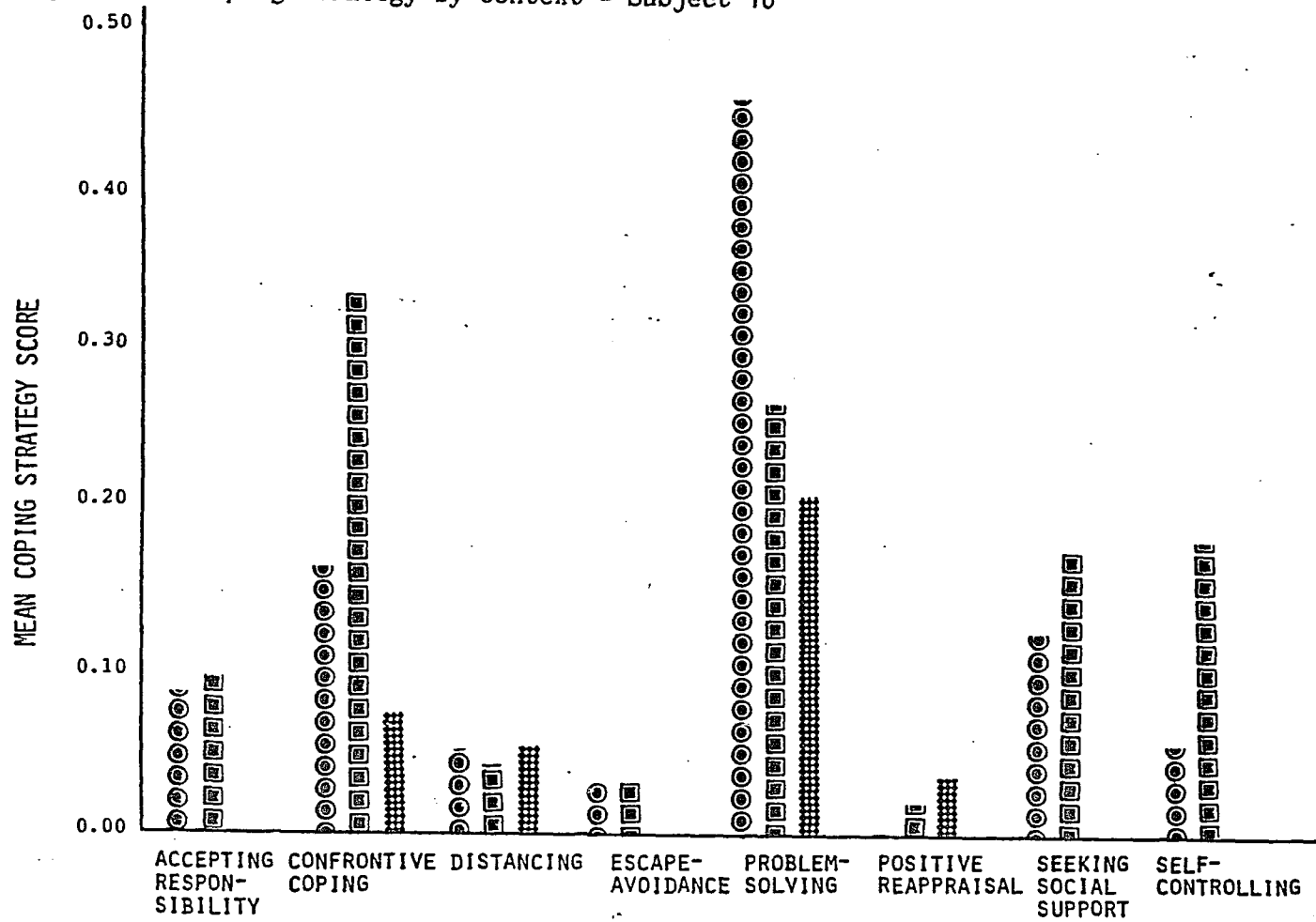


Figure 17. Coping Strategy by Context - Subject 16



COPING STRATEGY BY CONTEXT  
#16

WORK/SCHOOL N=11  
FAMILY/FRIENDS N=10  
HEALTH/FINANCE N=4

Figure 18. Coping Strategy by Context - Subject 17

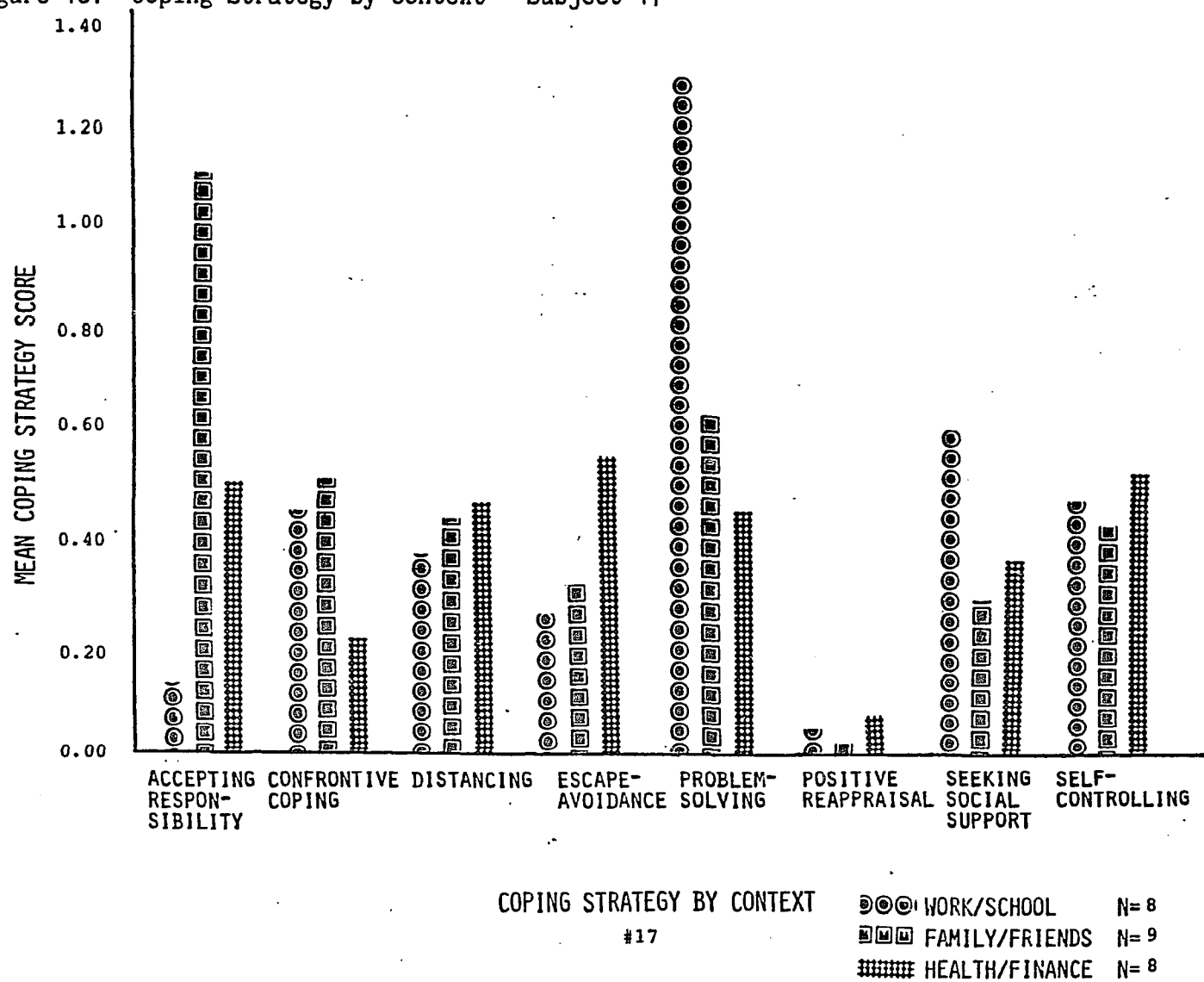
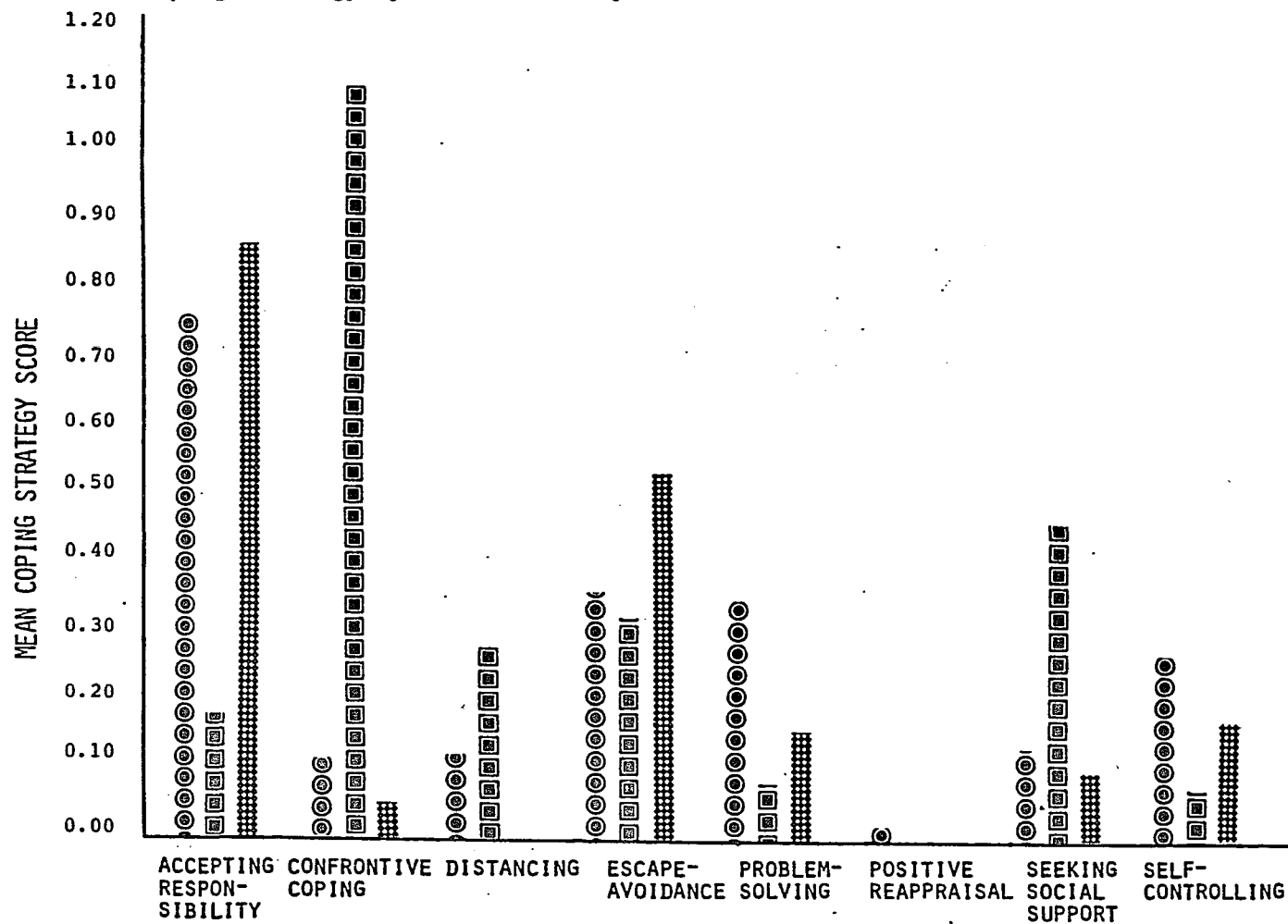


Figure 19. Coping Strategy by Context - Subject 18



COPING STRATEGY BY CONTEXT

#18

○○○○ WORK/SCHOOL N= 17  
 □□□ FAMILY/FRIENDS N= 4  
 ■■■■ HEALTH/FINANCE N= 4

Figure 20. Coping Strategy by Context - Subject 19

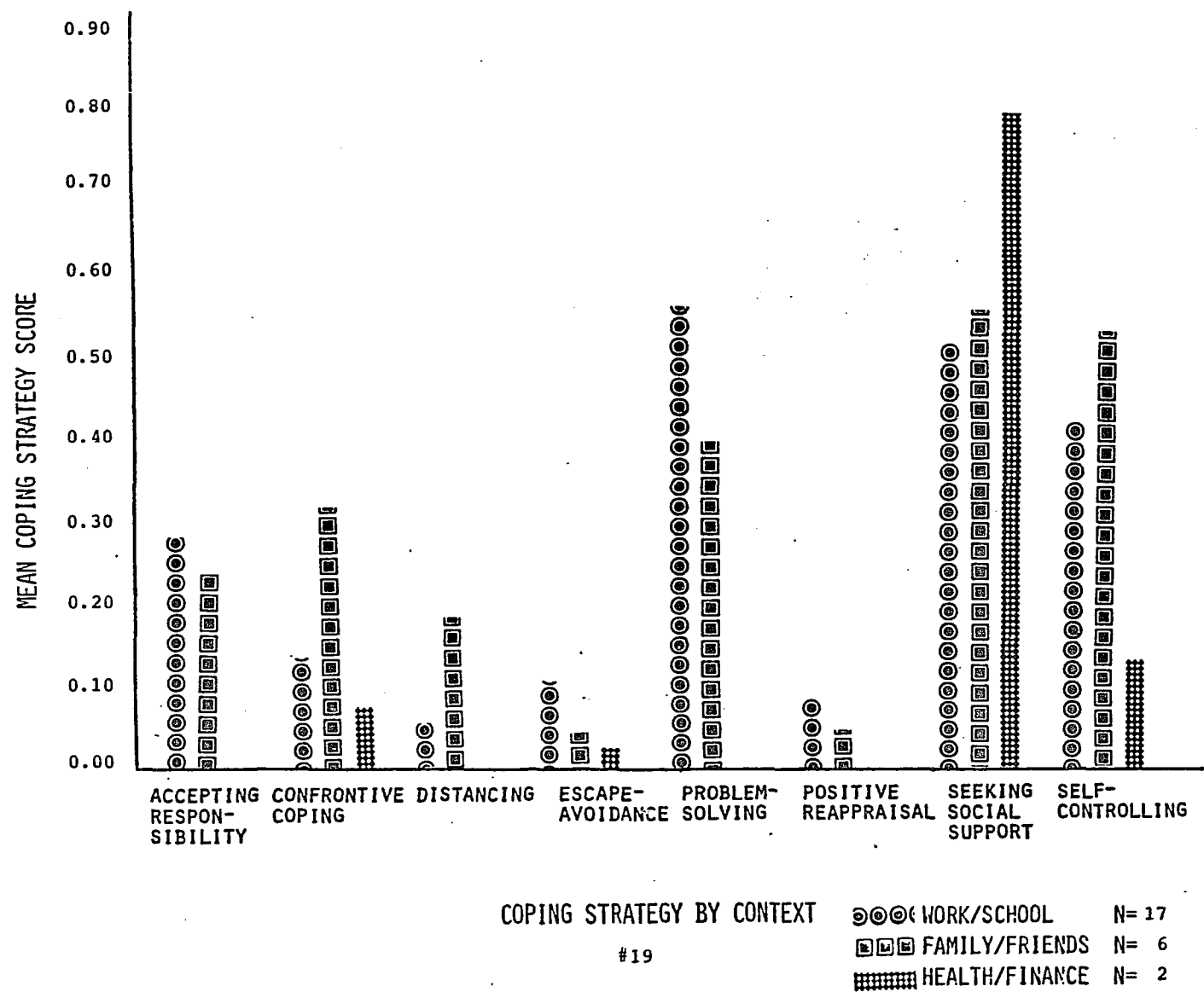
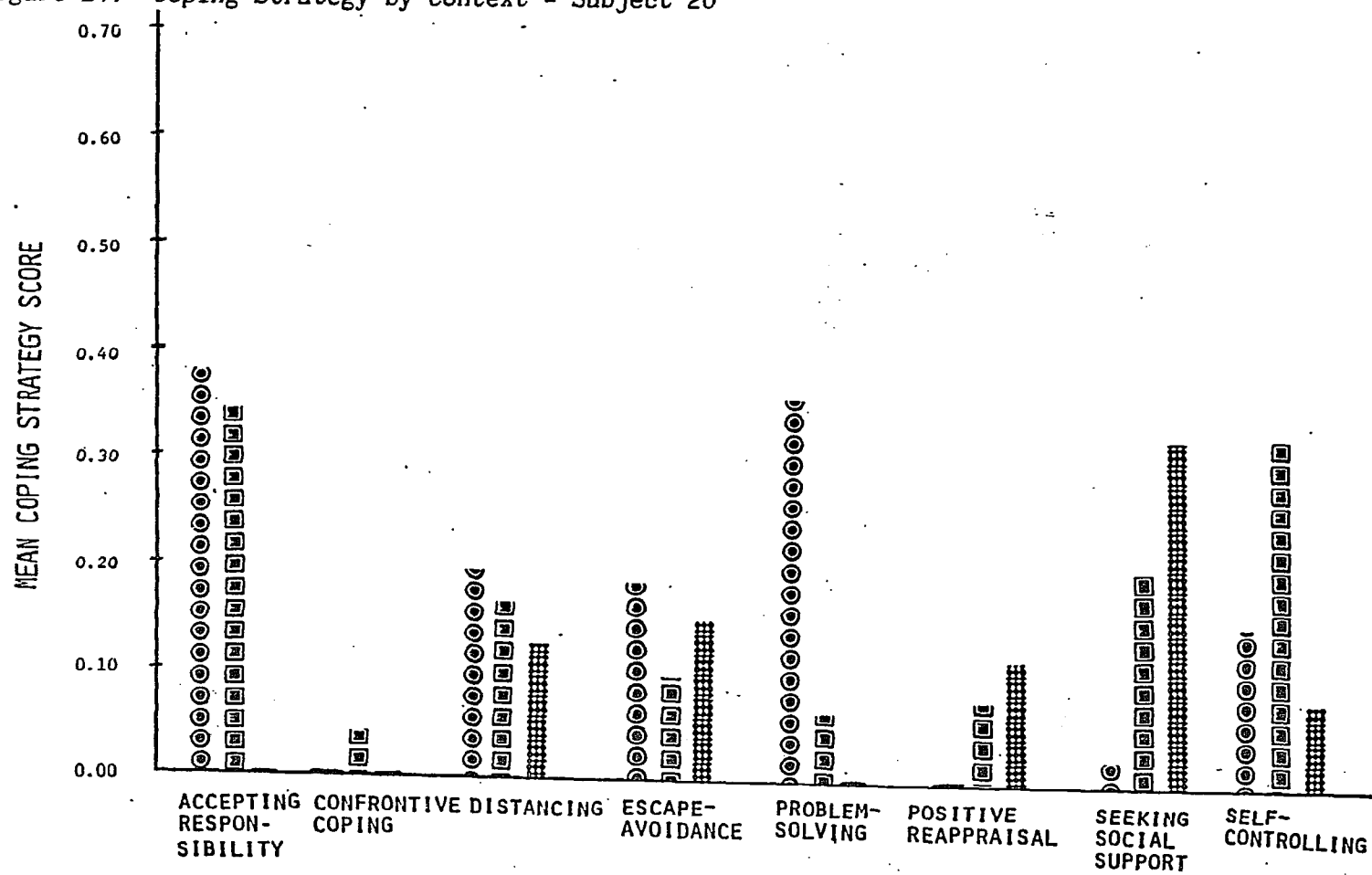


Figure 21. Coping Strategy by Context - Subject 20



COPING STRATEGY BY CONTEXT

#20

○○○○ WORK/SCHOOL N= 11  
 □□□□ FAMILY/FRIENDS N= 9  
 ■■■■ HEALTH/FINANCE N= 5



Figure 22. Coping Strategy by Context - Subject 21

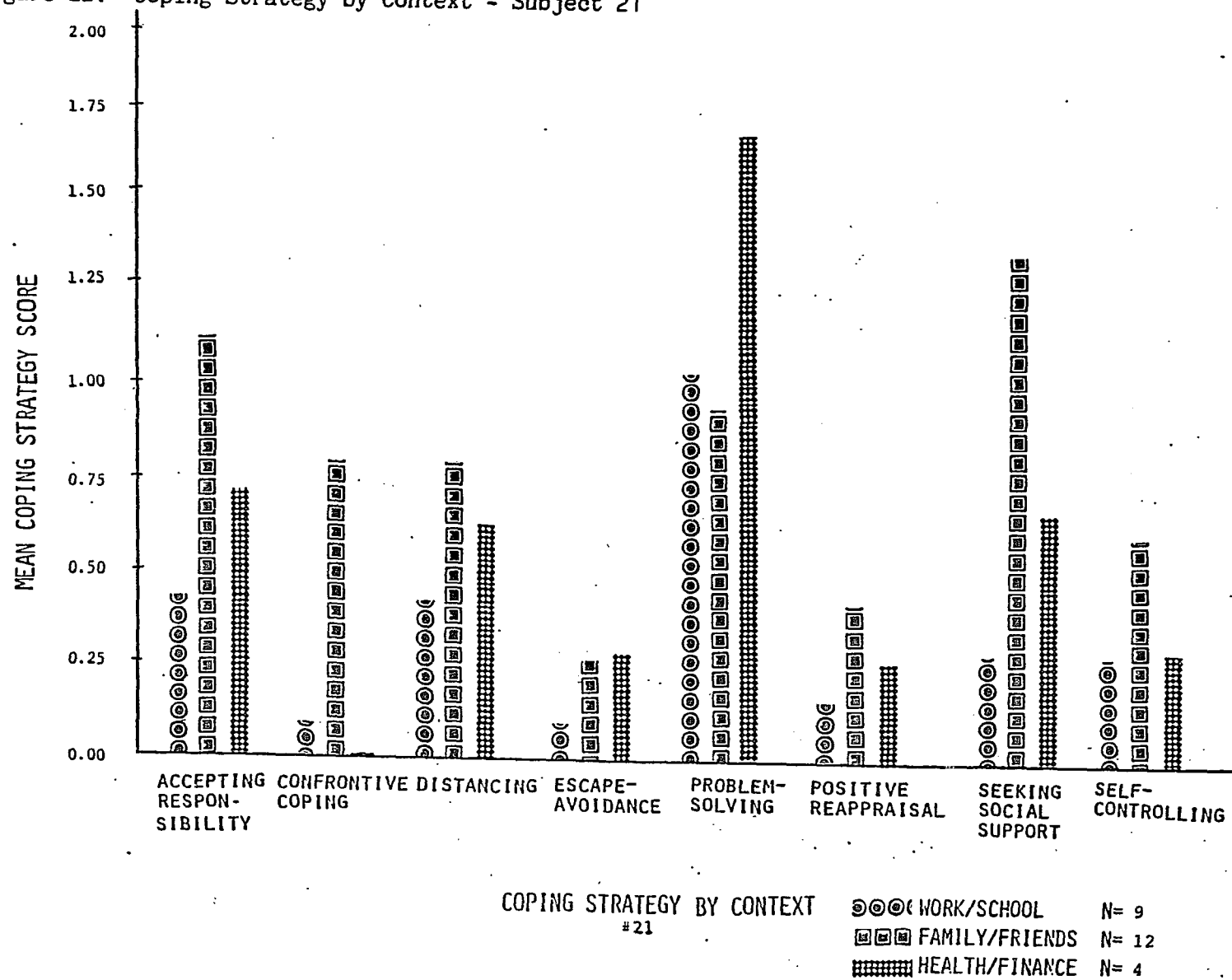
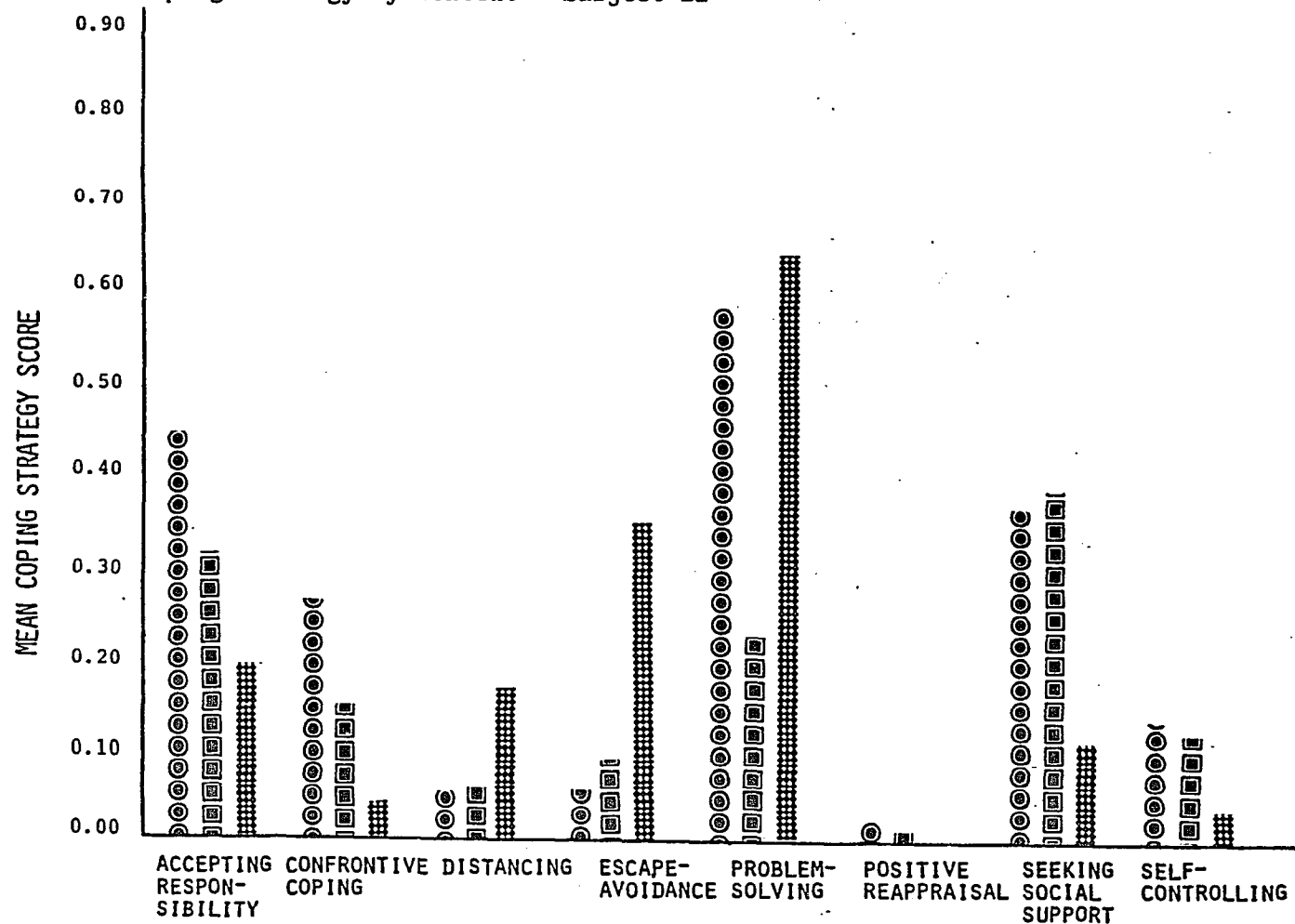


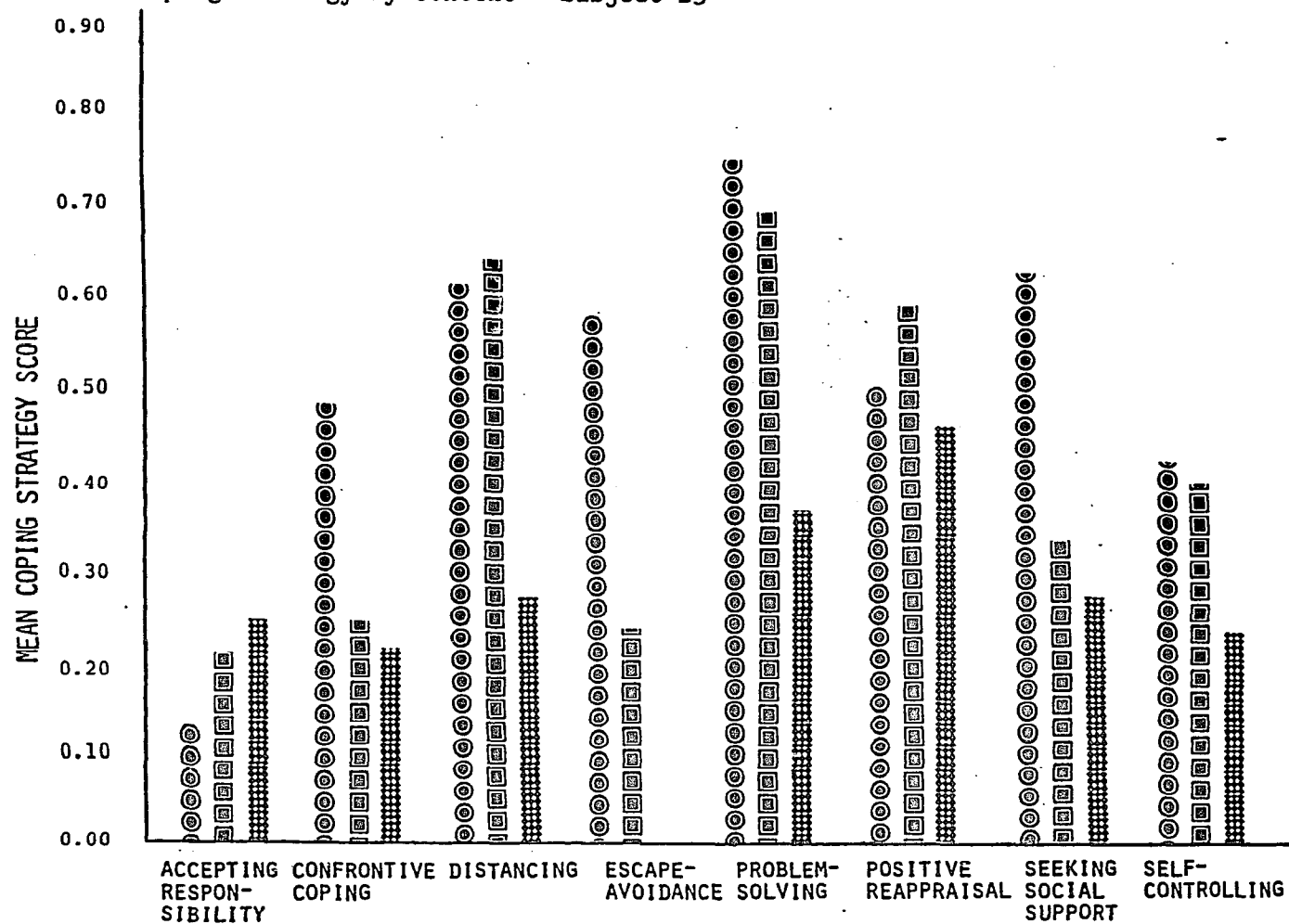
Figure 23. Coping Strategy by Context - Subject 22



COPING STRATEGY BY CONTEXT  
#22

○○○○ WORK/SCHOOL N= 7  
□□□□ FAMILY/FRIENDS N= 13  
■■■■ HEALTH/FINANCE N= 5

Figure 24. Coping Strategy by Context - Subject 23



COPING STRATEGY BY CONTEXT

#23

○○○○ WORK/SCHOOL N= 6  
 □□□□ FAMILY/FRIENDS N=16  
 ##### HEALTH/FINANCE N= 3

Figure 25. Coping Strategy by Context - Subject 24

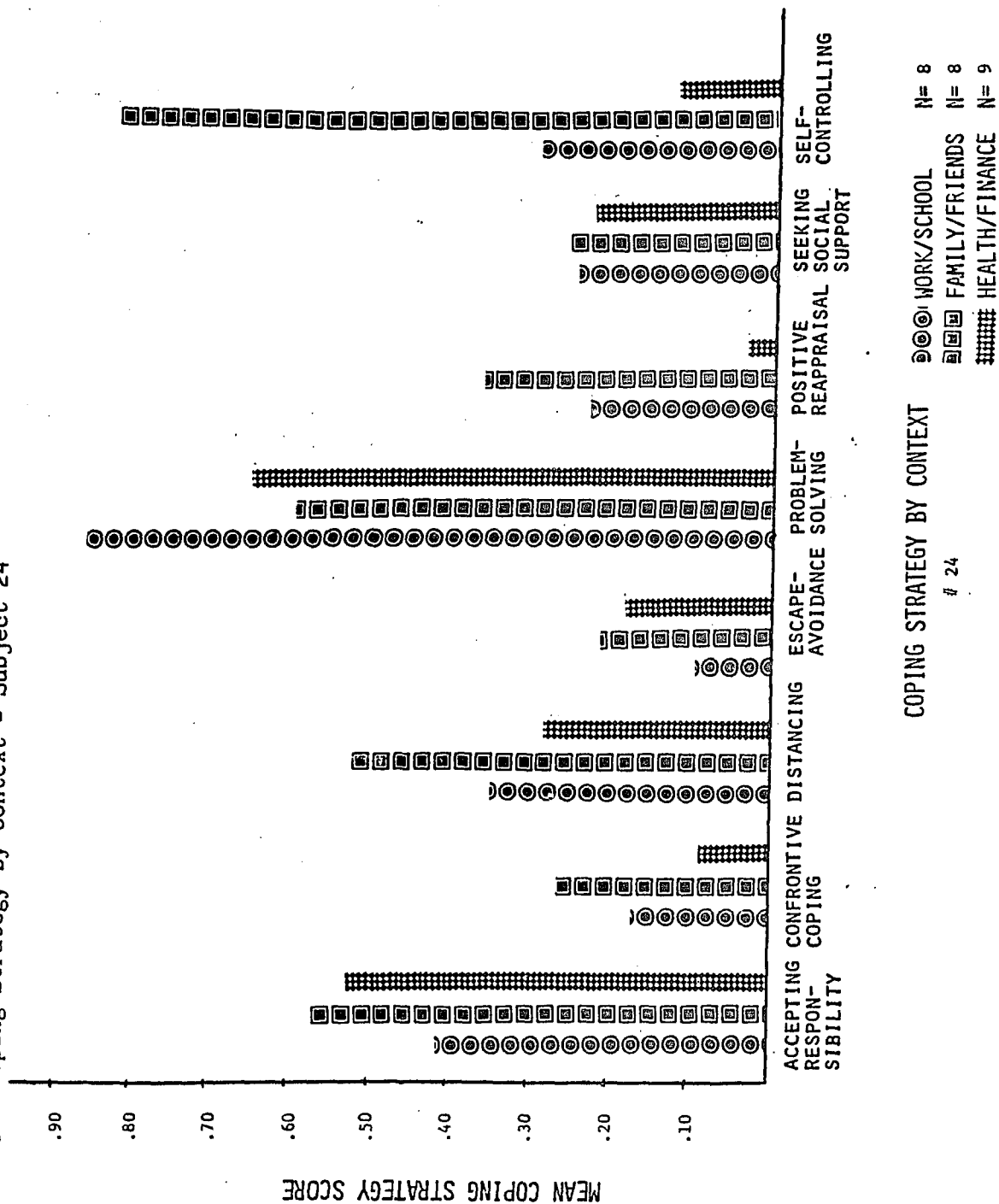
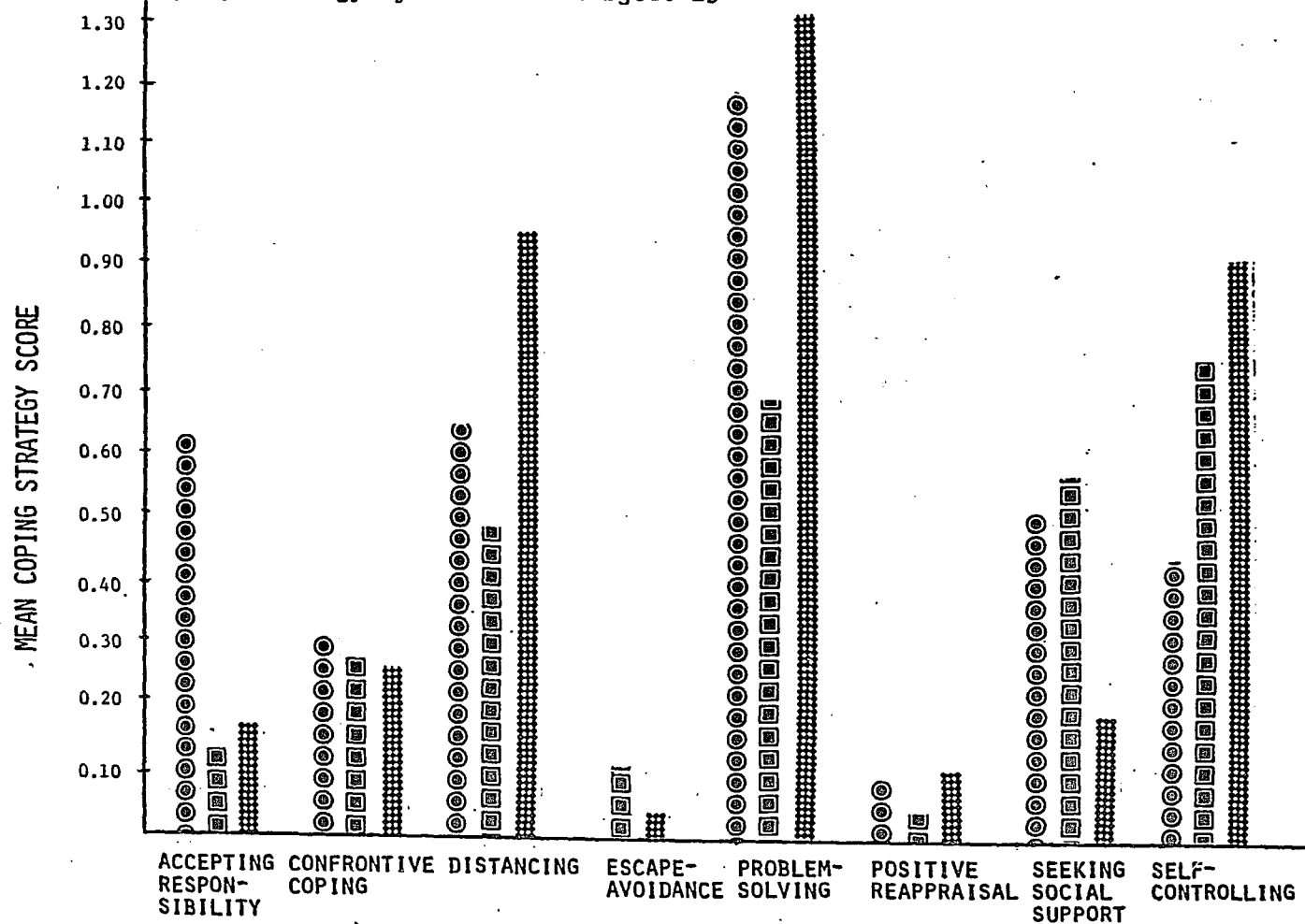


Figure 26. Coping Strategy by Context - Subject 25



COPING STRATEGY BY CONTEXT

# 25

WORK/SCHOOL N= 6  
FAMILY/FRIENDS N= 10  
HEALTH/FINANCE N= 9