

Coping Strategies in Adolescent Adjustment

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INTRODUCTION

- Coping strategies have important implications for adjustment during adolescence.
- The current project examines relations between positive and negative coping styles with: friendship adjustment, emotional adjustment, and physical health.
- Past research indicates that adolescents' positive coping strategies (e.g., active coping) are related to positive friendship quality, negative coping (e.g., avoidance) are related to having poorer friendship (Shih & Ryan, 2012).
- In addition, positive coping strategies tend to be related to positive emotional health, whereas engaging in negative coping strategies is related to poorer emotional health (Chow, 2016).
- Positive, active coping also have been found to be related to positive physical health (Wilson, Pritchard, & Revalee, 2005).
- In the current project, positive coping strategies (e.g., problem-focused coping, problem solving) are expected to be related to positive friendship, emotional, and physical well-being and negative coping (e.g., emotion-focused coping, distraction, avoidance) to be related to poorer well-being.

Method

Participants and Procedure

- Participants were 106 youth (64 female, 37 male) in the 8th, 9th, and 10th grades, with an average age of 13.98 years.
- 3 chose not to disclose gender or did not identify as binary.
- Participants were over 90% European-American.
- Participants completed online questionnaires.

Measures

- Coping:** The Brief COPE includes items assessing 13 different cop (Carver, 1997)
- Emotional Adjustment:**
 - Depression:** The CES-D includes items rated on a 5-point scale (Radloff, 1977).
 - Anxiety:** Revised Children's Manifest Anxiety Scale (RCMAS); included items rated on a 5-point scale (Reynolds & Richmond, 1978).
- Friendship Adjustment:** Friendship Quality Questionnaire (Parker & Asher, 1993) included items rated on a 5-point scale and produced scores for Positive Friendship Quality and Friendship Conflict
- Physical Health:** The Rand 36-Item Survey (SF-36) is a multi-item includes items assessing limitations and interference in activities due to health problems; items were rated on a 5-point scale (Ware, 1999).

RESULTS

Table 1.

Correlations between coping strategies and emotional adjustment.

	Depression	Anxiety
Self-distancing	0.16	0.22*
Active Coping	-0.29**	-0.26**
Denial	0.23*	0.33**
Emotional support	-0.00	-0.01
Instrumental support	-0.19	-0.18
Behavioral disengagement	0.52**	0.56**
Venting	0.22*	0.25*
Positive reframing	-0.15	-0.11
Planning	-0.12	-0.04
Humor	0.08	0.18
Acceptance	-0.20*	-0.13
Religion	-0.25**	-0.20*
Self-blame	0.65	0.67**

* $p < 0.01$, ** $p < 0.05$, + $p < 0.10$

Table 2.

Correlations between coping strategies and friendship adjustment.

	Positive Friendship Quality	Friendship Conflict
Self-distancing	0.25*	-0.02
Active coping	0.18	-0.03
Denial	-0.02	0.11
Emotional support	0.33**	-0.13
Instrumental support	0.26**	-0.08
Behavioral disengagement	-0.18	0.26**
Venting	-0.00	0.10
Positive reframing	0.27**	0.04
Planning	0.18	-0.00
Humor	-0.03	0.14
Acceptance	0.29**	-0.00
Religion	0.10	-0.01
Self-blame	0.05	0.15

* $p < 0.01$, ** $p < 0.05$, + $p < 0.10$

Table 3.

Correlations between coping strategies and health.

	Health Limitations	Health Interference
Self-distancing	-0.18	0.03
Active coping	-0.17	0.28*
Denial	0.15	0.33*
Emotional support	0.10	-0.12
Instrumental support	-0.02	-0.32*
Behavioral disengagement	0.30**	0.47
Venting	0.13	0.08
Positive reframing	0.05	-0.16
Planning	-0.09	-0.18
Humor	0.09	0.02
Acceptance	-0.10	-0.21*
Religion	-0.05	-0.06
Self-blame	0.02	0.42

* $p < 0.01$, ** $p < 0.05$, + $p < 0.10$

Discussion

- For emotional adjustment/physical health, there was some overlap in correlates. Whereas denial and behavioral disengagement were related to greater depression/anxiety, and more physical health problems, active coping was related to better adjustment.
- There was a different pattern of correlates for friendship. Behavioral disengagement was related to friendship conflict; however, emotional/instrumental support, positive reframing, and acceptance were related to positive friendship quality. Coping styles characterized by support and positivity may foster the positive aspects of friendship.

References

- Carver, C. S. (1997). You want to measure coping but your protocol's too long: Consider the Brief COPE. *International Journal of Behavioral Medicine*, 4, 92-100.
- Chow, P. S. Y. (2016). Adolescent Development and Mental Health: Challenges and Opportunities. *Journal of Youth Studies* (10297847), 19(2).
- Parker, J. G., & Asher, S. R. (1993). Friendship and friendship quality in middle childhood: Links with peer group acceptance and feelings of loneliness and social dissatisfaction. *Developmental psychology*, 29(4), 611.
- Radloff, L. S. (1977). The CES-D Scale: A Self-Report Depression Scale for Research in the General Population. *Applied Psychological Measurement*, 1(3), 385-401.
- Reynolds, C. R., & Richmond, B. O. (1978). What I think and feel: A revised measure of children's manifest anxiety. *Journal of Abnormal Child Psychology*, 6(2), 271-280.
- Shin, H., & Ryan, A. M. (2012). How do young adolescents cope with social problems? An examination of social goals, coping with friends, and social adjustment. *The Journal of Early Adolescence*, 32, 851-875.
- Wilson, G. S., Pritchard, M. E., & Revalee, B. (2005). Individual differences in adolescent health symptoms: The effects of gender and coping. *Journal of adolescence*, 28(3), 369-379.
- Ware, Jr. J. E. (1999). SF-36 Health Survey.

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