

Coping-strategies and self-esteem

I. V. Danyliuk, I. V. Kozytska, O. I. Morozova-Larina

Taras Shevchenko National University of Kyiv

Paper received 12.03.17; Accepted for publication 20.03.17.

Abstract. This article is devoted to actual problems of manifestation of coping behavior in crisis situations. The relations between self-identity and dominant coping-strategies are analyzed. The data of empirical study on identification of the dominant coping-strategies in people with different levels of self-esteem are presented. The averages of using of coping-strategies to solve problems, search for social support and avoidance in people with different levels of self-esteem are compared. The correlations between the level of self-esteem and distinctiveness of specific coping-strategies are studied

Keywords: coping strategy, self-esteem, personality, behavior, adaptation, stress.

Objective features of modern life with its frenetic pace, interpersonal and military conflicts, intense flow of information requires deep research on the nature of stress and ways of its overcoming. Recently, a number of theories, concepts and classifications on the problem of stress based on the experimental evidence were developed. An important generalization of these concepts, in our opinion, is the conclusion that the occurrence of stress depends not mainly on objective stressful situation conditions, but also to a large extent on the subjective characteristics of the person, his attitude to what is happening.

In the modern studies on strategies of mastering (M.Perre and I.Baumann research) coping is defined as adaptive self-control behavior in order to restore the psychological balance. Coping is individual method of interaction with the situation according to its logic, significance in human life and its psychological capabilities. Scientists, who study the problem, emphasize that coping behavior is a strategy of action, which is used by the individual in conditions of psychological threat. This strategy is evident in the spheres of cognitive, emotional and behavioral functioning of individual, which allows more or less successful adaptation.

Coping actions form strategies, which, in turn, form coping styles of behavior that are characterized by functionality or dysfunctionality.

Functional coping-styles aimed on problems overcoming, dysfunctional ones belong to unproductive strategies. So, coping-styles vary on the principle of efficiency and inefficiency.

Classification of coping strategies according to the emotional focus of the problem was proposed by S. Folkman and R. Lazarus. They believe that coping is a combination of cognitive and behavioral efforts that are constantly changing and aimed to overcome the various obstacles that may exceed human resources.

Conflictology identifies three spheres in which coping strategies are manifested: behavioral, cognitive and emotional. In addition, it is taken to divide all coping strategies into adaptive, relatively adaptive and nonadaptive.

Cooperation and altruism can be considered as adaptive strategies in the behavioral sphere; passivity and isolation – as nonadaptive. Analysis of difficulties and search for getting out of problem situation can be considered as examples of adaptive strategies in cognitive sphere; among non-adaptive strategies can be called, in particular, the rejection of overcoming the difficulties associated with low estimation of own resources and capabilities. Adaptive strategies in emotional sphere are optimism to overcome the difficult situation, confidence in the presence of way out from any situation, nonadaptive – a dead end, various self-blaming.

Coping strategies are manifested in crisis and designed

to reduce psychological tensivity, anxiety. Their intensity is due to at least two factors: personality characteristics and real situation. Exactly personality characteristics determine the intensity of psychological discomfort.

Self-esteem was chosen as personality determinant in our study. This scientific interest is based on the following provisions.

- Self-esteem is a complex personality formation and it belongs to the fundamental personality traits.
- An important function of self-esteem is that it acts as internal condition of human behavior regulation.

The definition of self-esteem is debatable in psychology. Some scientists believe that self-concept and self-esteem are leading and independent new formations of personality's self-conscience (W. James I. Cohn, Peter A., C. Rogers), others include self-esteem to the components of self-concept (R. Burns), consider self-esteem as well as process, resulting in self-image (E. Byelinska, G. Gumenyuk, A. Krasyliv). Adequate self-esteem in situations of interaction with other people is one of the basic indicators of social and psychological adaptation. If self-esteem is deformed, then it is a sufficient condition for social disadaptation.

By including self-esteem to the structure of activity motivation, the personality always correlates own capabilities, mental resources with its goals and means. Thus, personality self-esteem must necessarily be related with the formation of coping-strategies. Determining the nature of this relation was one of the objectives of our study.

The aim of our study was to detect the presence and to analyze the features of the relationship between personality self-esteem and its dominant coping-strategies.

For this purpose we have chosen a number of psychodiagnostic methods:

1. Methods for personality self-esteem studying (Budasi).

This test allows to determine the quantitative level of self-esteem distinctiveness and makes it possible to diagnose its five levels – low self-esteem of the neurotic type, low self-esteem, adequate self-esteem, high self-esteem and high self-esteem of the neurotic type.

2. Methods of coping-strategies diagnostic of Heim.

The methods was adapted in the led by MD Professor L. I. Wasserman laboratory of clinical psychology of V. M. Bekhterev Psycho-Neurological Institute. Heim's methods allowed us to explore the 26 situationally-specific variants of coping that were divided into three areas of psychic activity: cognitive, emotional and behavioral.

3. Methods of dominant coping-strategies diagnostic of Amirhan D. (translation and adaptation of N. A. Syrota, V. M. Yaltonsky).

The idea of this questionnaire is that all behavioral strategies that are formed in human during his life can be divid-

ed into three large groups:

- strategy of the problem solving – it is an adequate behavioral strategy by which a person seeks to use all available resources in its personal search for possible ways to solve the problem effectively;
- strategy of search for social support – it is an active behavioral strategy by which a person in order to effectively solve the problem calls for support to environment that surrounds it: family, friends and significant others;
- strategy of avoidance – it is a behavioral strategy by which a person seeks to avoid the contact with the surrounding reality, to get away from problems solving.

In our study we aimed to analyze the features of dominant coping-strategies in people with different levels of self-esteem; to compare the averaged indices of usage of coping-strategies aimed to problems solving, search for social support and avoidance of problem solving in people with different levels of self-esteem and explore the correlations between the level of personality self-esteem and distinctiveness of definite coping-strategies.

The total number of surveyed people was 159 persons aged 18 to 60 years, including 91 women and 68 men. All of them were employees of the banking sector. The sample was formed by method of randomized stratification. Stratification was carried out in terms of testees (surveyed people) self-esteem.

Analysis of the dominant coping-strategies features in people with different levels of self-esteem.

At the preparatory stage the overall sample of testees (159 people) was divided into 5 groups according to their level of self-esteem:

- low self-esteem of the neurotic type (27 people);
- low self-esteem (27 people);
- adequate self-esteem (41 people);
- high self-esteem (34 people);
- high self-esteem of the neurotic type (30 people).

Groups of testees with different levels of self-esteem were analyzed in terms of their dominating coping-strategies.

♦ The first group – testees with low self-esteem of the neurotic type.

Adaptive strategies are preferred by only 26.9% of the group. This is mostly "**protest**" (emotional coping).

The most often used by the members of this group are relatively adaptive strategies – 40.6%. They belong to the emotional and behavioral spheres. These are "emotional discharge" and "distraction", i.e. orientation to the time distancing from solving the problem by means of getting calmness, like doing favorite things, travels, embodiment of cherished wishes.

Nonadaptive strategies were preferred for 26.9% of the group. It is "suppression of emotions" and "ignorance" (emotional coping).

So, for testees with low self-esteem of the neurotic type the emotional coping- strategies of different adaptability levels with a noticeable predominance of relatively adaptive are characteristic. It may be assumed that nonadaptive emotional coping-strategies can be both as the result of neurotization and can deepen, or even cause neurotization of personality as well.

♦ The second group – testees with low self-esteem.

Adaptive strategies are preferred by 25.9% of this group. The most common of them are the "**problem analysis**" and "**self-preservation**" (cognitive strategies).

Relatively adaptive strategies are characteristic for 22.2%. These are mainly strategies of "**emotional discharge**" (emotional coping) and "**distraction**" (behavioral

coping).

Predominant in this group are the testees with non-adaptive coping-strategies chosen by 41.9% of the group. Among nonadaptive coping-strategies the main are "**suppression of emotions**" and "**obedience**" (emotional coping).

So, nonadaptive strategies of emotional coping "suppression of emotions" and "obedience" are dominated among testees with low self-esteem. As for adaptive ways of problematic situations solution, the cognitive and behavioral coping-strategies that can really help a person to find an effective way to solve the problem situation are dominated among them.

♦ The third group – testees with adequate self-esteem.

Adaptive strategies are preferred by 39.0% of the group. These are mostly "**problem analysis**" and "**self-preservation**" (cognitive coping). Exactly such behavior forms are aimed at analyzing the problems and possible ways of getting out of them, increasing of self-esteem, self-control and belief in own resources to overcome difficult situations. Among behavioral coping-strategies, the adaptive one often appears in the recourse to the people who are able to help by means of advice.

Relatively adaptive strategies are characteristic for 36.6%. These strategies are mainly "compensation" and "constructive activity" – a temporary retreat in resolving the situation, switching to favorite activity, other events, traveling, involving in other areas with a possible return to resolve stressful situations (behavioral coping).

The smallest number of testees with adequate self-esteem prefers nonadaptive strategies in solving problem situations – 24.4%. The strategies of "**active avoidance**" and "**retreat**" (behavioral coping) are most often used by members of this group.

So, for people with adequate self-esteem a "problem analysis", "self-preservation" and "search for support from other people" are characteristic strategies in a stressful situation. If the situation is not resolved, switching to other areas of life (the strategies of "compensation", "constructive activity", "active avoidance", "retreat") appears as possible interaction with it.

♦ The fourth group – testees with high self-esteem.

Adaptive strategies of problem solving are preferred by 60% of the group. Most often these are "**problem analysis**" and "**the self-worth determination**" (cognitive coping) and "**cooperation**" (behavioral coping).

Relatively adaptive strategies are characteristic for 16.7% of this group. These are mostly "**compensation**" and "**distraction**" (behavioral strategies).

23.3% of the testees chose nonadaptive strategies. Among them "**active avoidance**" (behavioral coping) was a priority.

The study determined that for most of the testees with high self-esteem adaptive and relatively adaptive coping-strategies aimed at solving the problem situation are inherent. However, almost the third part of this group consists of the testees who use nonadaptive strategies aimed to avoid the need of resolving the problematic situation.

♦ The fifth group – testees with high self-esteem of the neurotic type.

For 14.7% of the testees of this group adaptive strategies are prevalent. The most common among them is the strategy of "optimism" (emotional coping) that characterizes a bright emotional confidence in presence of solution of any, even most difficult situation.

The most popular strategies of getting out from the problematic situation for this group of testees are relatively adaptive strategies - 52.9%. These are "emotional discharge" and "cooperation" (emotional coping).

Nonadaptive strategies are preferred for 32.4% of the group. These are mostly "suppression of emotions" and "self-blaming" (emotional coping).

Thus, the data obtained indicate that in problem situations the testees with high self-esteem of the neurotic type prefer emotional coping-strategies of varying adaptability degrees from the "optimistic" to "suppress the emotions" and "self-blaming" that is definitely associated with neurotic component of their personality.

Another focus of our study was to analyze the coping-strategies in terms of their aiming at problem solving, searching for social support and avoidance of problem solving. Average indices of usage of all three coping-strategies types for people with different levels of self-esteem were analyzed using statistical methods.

The analysis showed that testees with different levels of self-esteem react and solve problematic situations differently. The study defined statistically significant ($p < 0.01$) differences in the dominant strategies of "problem solving" and "search for social support" in testees with different levels of self-esteem. Thus, people with high self-esteem and high self-esteem of the neurotic type rarely choose the strategy of "search for social support" - 15.8 and 16.0 points respectively (low level). People with adequate self-esteem also tend to prefer this strategy in problem solving rarely (17 points - low level). But people with low self-esteem and low self-esteem of the neurotic type on the contrary tend to seek for social support (27.2 and 29.1 points respectively, which is typical for middle/high levels of this coping-strategy usage).

People with low and high self-esteem rarely use coping-strategy "problem solving" (16.1 and 16.3 points respectively - low level). At the same time, testees with low and high self-esteem of the neurotic type much more often use this strategy in solving problematic situations - 19.7 points (upper boundary of the middle level) and 21.1 points (middle level) respectively. But testees with adequate self-esteem most often prefer the coping-strategy "problem solving" (30.3 points - the highest level).

Our study also revealed correlations between the level of self-esteem and distinctiveness of specific coping-strategies.

As a result of statistical data processing the reverse correlation between the variables "self-esteem" and coping-strategy "search for social support" was defined ($r = -0,703$,

at $p < 0.01$). The defined relation can be interpreted as follows: the higher the self-esteem of personality, the lower the desire to search for social support in problematic situations. Conversely, the more often a person uses coping-strategy of search for social support, the lower its self-esteem can be.

Also the coping-strategy "search for social support" has an inversely-proportional relation with coping-strategy "problem solving" ($r = -, 233$, at $p < 0.01$). We can expect that for people with dominant coping-strategies "search for social support" it is uncharacteristic to use strategies "problem solving" and vice versa.

Other statistically significant relations between different levels of self-esteem and coping-strategies "avoidance of problems" and "problem solving" were not identified in our study.

Our study has led to several important conclusions and has made it possible to outline the ways of further study the problem.

There is a clear correlation between the level of self-esteem and spheres of coping-strategies used by the personality. Thus, people with high of the neurotic type and low of the neurotic type self-esteem almost never use cognitive coping-strategies (nor as adaptive, nor as relatively adaptive, nor as nonadaptive coping-strategies). Such people use mostly emotional coping (as an adaptive strategy - only emotional coping) with some behavioral coping. The revealed correlations lead us to the assumption about involvement of emotional coping-responses in personality neuroticism process and make it possible to identify the ways of psychotherapeutic adjustment as well. We believe that it is promising area of future research activity.

The groups of studied testees, that detected the highest number of adaptive coping-responses, were the group with adequate self-esteem and the group with high self-esteem. Moreover, the highest level of adaptive responses was detected exactly in the group with high self-esteem. Concerning coping-strategies, they used cognitive coping with a small proportion of behavioral coping strategies (testees with adequate self-esteem - only cognitive coping) as adaptive, relatively adaptive and even nonadaptive strategies. It allows to make a conclusion about direct relation between level of human adaptability and choice of exactly cognitive coping-strategies as an effective way of problem solving.

In our opinion, the results of the investigation are of great practical importance. It is important to use in both individual counseling and development of training programs of various kinds the knowledge of interrelations that we have identified.

REFERENCES

1. Billings A. G., Moos R. H. The role of coping responses and social resources in attenuating the stress of life events //Journal of behavioral medicine. - 1981. - T. 4. - №. 2.
2. Carver C. S., Scheier M. F., Weintraub J. K. Assessing coping strategies: a theoretically based approach //Journal of personality and social psychology. - 1989. - T. 56. - №. 2.
3. Claiborne C. B., Sirgy M. J. Self-image congruence as a model of consumer attitude formation and behavior: A conceptual review and guide for future research //Proceedings of the 1990 Academy of Marketing Science (AMS) Annual Conference. - Springer International Publishing, 2015.
4. Folkman S. Stress: appraisal and coping. - Springer New York, 2013. - С. 1913-1915.
5. Hattie J. Self-concept. - Psychology Press, 2014.

Копинг-стратегии и самооценка

И. В. Данилюк, И. Козицкая, О. И. Морозова-Ларина

Анотация. Статья посвящена актуальным проблемам проявления копинг-поведения в кризисных ситуациях. Анализируется связь между самооценкой личности и ее доминантными копинг-стратегиями. Приводятся данные эмпирического исследования, посвященного выявлению доминирующих копинг-стратегий у людей с разным уровнем самооценки. Сравниваются средние показатели частоты использования копинг-стратегий, направленных на решение проблемы, поиск социальной поддержки и избегания у людей с разным уровнем самооценки. Исследуется корреляционная связь между уровнем самооценки и выраженностью отдельных копинг-стратегий.

Ключевые слова: копинг-стратегия, самооценка, личность, поведение, адаптация, стресс.