Stress and coping for adolescents

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The biological, psychological and social effects of stress on an individual have been researched extensively over time. Only recently has literature begun to focus on the influence stress has on young people during the vulnerable stage of adolescence. Cognitive and emotional attributes play a critical role in the types of coping strategies one chooses to adopt, thus how adolescents cope cannot be limited to one sole strategy, but is a combination of many. This paper will specifically focus on the types of life stressors young people encounter and the coping strategies they implement. Also to be examined is how adolescent stressors and coping strategies differ to that of adults. Through review of relevant coping literature, the notion of coping as a dynamic process will be emphasised.

Adolescence, stress and coping

Adolescence is the transition between childhood and young adulthood during which young people experience physiological, cognitive and social changes (Dumont & Provost, 1999; Murberg & Bru, 2004). The age bracket for adolescence varies according to different literature (de Anda et al., 2000; Spirito, Stark, Grace and Stamoulis, 1991) however this paper defines adolescents as between 12 and 19 years of age. Williams and McGillicuddy-De Lisi (1999) suggest that during this transition, young people have difficulty adjusting and often struggle with unfamiliar issues.

Stress is a concept that cannot be explained using a static definition thus it is important to be aware that different descriptions exist in both recent and seminal literature. Delahaij, Dam, Gaillard and Soeters (2011) explain stress using a biopsychosocial approach, suggesting that stressful reactions affect the emotional, physiological and cognitive state of an individual. This definition describes stress as a reaction. Alternatively, Caltabiano, Sarafino and Byrne (2008) view stress as a discrepancy. They state that stress occurs when there is a perceived discrepancy between the demands of a situation and an individual’s
resources available to deal with that demand (Caltabiano et al., 2008). Greater discrepancy between resources and demand therefore causes a greater stressful reaction (Caltabiano et al., 2008). The act of handling this response is referred to as coping.

Compas, Connor-Smith, Saltzman, Thomsen and Wadsworth (2001) suggest that coping focuses on achieving goals to resolve the stressful situation and minimise emotional reaction. Similarly, Delahaij et al. (2011) describes coping as a relationship between cognitive and behavioural processes that attempts to lessen the resources/demand discrepancy. Coping strategies are labeled as either of two major types. These include emotion-focused and problem-focused coping (Delahaij et al., 2011; Dumont & Provost, 1999; Fromme and Rivet, 1994; Lohman & Jarvis, 2000) Emotion-focused coping involves regulating emotional response to a stressor and reducing psychological discomfort, whilst problem-focused coping includes altering the situation to minimise or eliminate the source of the stressor (Dumont & Provost, 1999; Fromme & Rivet, 1994).

The type of strategy a young person utilises depends largely on perceived control (Spirito et al., 1991). Problem-focused strategies are used if a solution to the problem is considered within the individual’s capabilities, whilst emotion-focused strategies are used if the situation is perceived to be out of the individual’s control (Spirito et al., 1991). Despite this distinction it is important to recognise that coping is a dynamic process that often involves a combination of both strategies, depending on the nature of the stressful circumstances (Caltabiano et al., 2008; Delahaij et al., 2011; Herman-Stahl, Stemmler & Peterson, 1995; Lohman & Jarvis, 2000; Williams & McGillicuddy-De Lisi, 1999; Yahav & Cohen, 2008).

Adolescent stressors

The effect of daily stressors can be particularly harmful to the psychological and physiological wellbeing of young people (Yahav & Cohen, 2008). The stressors adolescents
experience range from the school environment to home and family life, and extend as far as global social issues (de Anda et al., 2000). Spirito et al. (1991) identified four main stressful domains in their research on young people - school, siblings, parents and friends. Increasing academic pressure, sibling and parental conflict, peer pressure and romantic relationship problems were the main issues children encountered daily (Spirito et al., 1991). This data was based on a sample of adolescents aged 12-13 years, thus it is possible the stressors could differ to those encountered by an older sample. The article is also relatively dated therefore it is possible that the types of stressors prevalent today have changed.

In concurrence with the article by Spirito et al. (1991) however, de Anda et al. (2000) also identified school as a major stressor for adolescents. Pressure surrounding future goals was reported as most stressing, with personal expectations, academic performance and homework also significant anxiety provoking situations. (de Anda et al., 2000). de Anda et al.’s (2000) list of adolescent stressors is extensive and included issues unrelated to school such as body image, social issues, relationships, violence and death. The age range for this sample was 15-18 years of age, which suggests that older adolescents have less egocentrism and greater concern for issues outside of the personal domain of school and home.

Persike and Seiffge-Krenke (2012) conducted a multicultural analysis of adolescent stressors and found that academic achievement and parental control were of most concern, whilst anxiety about peers and relationships was less than expected. Similar to de Anda et al. (2000) and Spirito et al. (1991), Persike and Seiffge-Krenke (2012) suggest that adolescents are increasingly concerned about school, future employment and further education. Comparisons of these studies indicate that time has not significantly altered the types of stressors adolescents experience.
Coping with stress

Stress and coping literature identify an extensive range of coping strategies that young people adopt (de Anda et al., 2000; Moskowitz, Stein & Lightfoot, 2013; Skinner & Zimmer-Gembeck, 2006; Williams & McGillicuddy-De Lisi, 1999). Some examples of emotion-focused coping include relaxation, distraction, escape, helplessness and withdrawal (Caltabiano et al., 2008; de Anda et al., 2000; Skinner & Zimmer-Gembeck, 2006). Examples of problem-focused coping include problem-solving and support-seeking (Skinner & Zimmer-Gembeck, 2006).

An individual’s ability to handle stress is determined by the relationship between personal attributes such as cognitive, emotional and behavioural development (Delahaij et al., 2011; Skinner & Zimmer-Gembeck, 2006). The highly influential work of Lazarus (1966) as cited by Folkman, Tedlie and Moskowitz (2004), emphasised the role of cognitive interpretation in both stress perception and coping. Folkman et al. (2004) suggests that how an individual appraises a situation determines the level of stress experienced. Williams and McGillicuddy-De Lisi’s (1999) study on stress also focuses on the role of cognitive development in appraisal and coping. Results indicated that due to having a wider coping repertoire, older adolescents utilised more adaptive strategies than those younger (Williams & McGillicuddy-De Lisi, 1999). This suggests that experience with stress prepares adolescents for certain problems, thus allowing the individual to cope adaptively (Williams & McGillicuddy-De Lisi, 1999). It is important to note however that the data was gathered over a short time and from a sample of predominantly white, middle-class students. This allows little room for generalisation to the wider population, however effectively demonstrates the role of cognition in stress coping.

Visconti, Sechler and Kochenderfer-Ladd (2013) suggest that emotional attributes such as self-esteem are what influence the coping strategies individuals utilise. Visconti et al.
(2013) hypothesised that children with low self-esteem would lack the confidence to deal with life stressors independently, thus were likely to engage in emotion-focused coping. Unfortunately this hypothesis was unsupported. Dumont and Provost’s (1999) study of adolescent coping however supports the relationship between low self-esteem and unhealthy coping strategies. The results demonstrate a negative correlation between avoidant coping and self-esteem levels, indicating that those lacking positive coping methods also lack healthy self-esteem (Dumont & Provost, 1999). It is unknown however, whether this correlation is bidirectional. Despite these limitations, results suggest that those that think highly of themselves will be more capable and confident to handle problems in a positive manner (Dumont & Provost, 1999).

During the stressful transition of adolescence, young people are at risk of engaging in dangerous behaviour such as alcohol and drug use, as an attempt to deal with increased stress levels (Rose & Bond, 2008). Caltabiano et al. (2008) support this notion and indicate that older adolescents are more likely to engage in these types of maladaptive emotion-focused coping. Rose and Bond (2008) also suggest that adolescents lacking healthy coping skills and exposed to stressful environments are at a higher risk of substance abuse. This study however emphasises that cognitive appraisal and perception of the stressful situation is what determines the level of risk (Rose & Bond, 2008). Conversely, Fromme and Rivet (1994) contend that an adolescent’s coping repertoire is what determines the likelihood of using destructive behaviour to cope. This study argues that young people that lack any form of coping strategies, regardless of maladaptive or adaptive nature, have a greater likelihood of using substance abuse to cope with stress (Fromme & Rivet, 1994). This research emphasizes the importance of promoting healthy coping skills in young people.

de Anda et al.’s (2000) research on adolescents disagrees with Fromme and Rivet (1994), and Rose and Bond (2008). This study found that very few respondents of the
adolescent sample reported using drugs and alcohol as a coping strategy. The results however failed to identify a coping method with a frequency higher than moderate. Despite this limitation, adolescents reported using adaptive coping methods most often, with reading a book, watching television or listening to music scoring the highest on frequency and effectiveness (de Anda et al., 2000). These findings indicate that not all young people turn to dangerous behaviour to cope with life stressors.

**Adults and adolescents**

Sources of stress for adults differ by extremity to those of adolescents, however the coping mechanisms used to deal with these problems are relatively similar. Whilst major stressors for young people include school, family and peer relationships (de Anda et al., 2000), adults experience problems such as job insecurity or loss, financial problems and family issues like separation or divorce (Caltabiano et al., 2008; Lohman & Jarvis, 2000).

How individuals handle these stressful circumstances largely depends on knowledge and experience, as well as how the event is perceived. Dumont and Provost (1999) suggest that adults and adolescents perceive the severity of problems differently. Younger people are likely to be frustrated by frequent daily problems whilst adults are capable of differentiating between minor stressors which can be resolved easily, and major stressors which require more attention (Dumont & Provost, 1999). Fromme and Rivet (1994) argue however that like adolescents, adults with unhealthy coping skills often turn to avoidant strategies such as alcohol to handle stress. Thus it is clear that, how adults and adolescents cope with stress does not differ in the type of coping strategies, but rather is determined by the nature of an individual’s coping skills. Those with an unhealthy coping repertoire will struggle to deal with stressful situations, regardless of age (Fromme & Rivet, 1994).

**Conclusion**
Adolescence is a transitional period of major physical and emotional change that can result in significant psychological stress for young people. A combination of situations such as school, academic pressure, anxiety about the future and family/peer relationships play a role in creating angst for adolescents. The type of coping strategies individuals use is highly dependent on cognitive and emotional development. Adaptive coping often leads to emotionally healthy individuals, whereas maladaptive coping can lead to destructive behaviour such as substance abuse. The main point emphasised throughout the paper is that how individuals cope with certain life stressors is a dynamic, fluctuating relationship between different components. In order to examine this relationship further, further research focusing on adolescents and stress is encouraged.
References


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