



Daily stress and coping styles in adolescent hopelessness depression: Moderating effects of gender



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ABSTRACT

The hopelessness depression (HD) theory assumes a number of contributing factors to the development of hopelessness expectations and HD symptoms. However, little research has been conducted in order to examine gender differences in the relationship of these factors with HD. This study explored the relationship of daily stress and coping styles with HD in adolescents and analysed the moderating effects of gender. Secondary students ($N = 480$; aged 13–17) completed the Hopelessness Scale, the Hopelessness Depression Symptoms Questionnaire, the Problem Questionnaire and the Coping Across Situations Questionnaire. Using hierarchical regression analyses, results showed a moderating effect of gender on the relationship between daily stress and hopelessness expectations, which revealed a significant effect for boys despite the fact that girls experienced more daily stress than boys. Regarding coping styles, results showed that the avoidant coping style predicted HD independently of gender and, interestingly, a moderating effect of gender for the active and internal coping styles. While the active coping style showed a protective effect for HD symptoms in girls, the internal coping style played an analogous role in boys, suggesting that girls would benefit from being more action-prone and boys from being more reflection-prone in order to prevent HD.

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1. Introduction

Hopelessness depression (HD) is one of the subtypes of depression with greater empirical support and includes two main components: hopelessness expectations and symptoms of HD (Abramson, Metalsky, & Alloy, 1989; Hankin, Abramson, & Siler, 2001). Studies carried out to test HD theory have generally supported the prediction that a negative attributional style contributes to the development of hopelessness expectations and HD symptoms (Alloy & Clements, 1998), although the evidence is less consistent for adolescents (Abela & Sarin, 2002; Hankin et al., 2001; Rodríguez-Naranjo & Caño, 2010). Due to these inconsistent results, as well as the assumption advanced by HD theory that other factors aside from attributional style may contribute to the development of HD, in this study we examined the potential role of adolescents' daily stress and coping styles as contributing factors to HD at these ages, and the effects of gender on these relationships. Provided that a gender moderation effect of the relationship between coping styles and HD were found, it would lead to immediate practical applications.

1.1. Stress and coping in adolescent HD

Similar to what occurs in general depression, research shows that the exposure to major life events and daily stress is associated with hopelessness expectations in adolescence (Landis, Gaylord-Harden, Malinowski, Grant, Carleton, & Ford, 2007; Soria, Otamendi, Berrocal, Caño, & Rodríguez-Naranjo, 2004). Likewise, it has been found that composite scores of major life events and daily stress are associated to HD symptoms at these ages (Hankin et al., 2001). Seiffge-Krenke (1995) showed that stress in daily life plays a particularly relevant role during adolescence and described three coping styles used by adolescents to face daily stress: active and internal approach-oriented styles, which are considered functional and complementary, and avoidant style, considered dysfunctional. Several studies have assessed the relationship between these coping styles and depressive symptoms for both adults and adolescents, with largely coherent results for the avoidant style (Herman-Stahl, Stemmler, & Petersen, 1995; Kort-Butler, 2009) and less conclusive results for the active one (Roberts, Roberts, & Chan, 2009; Steinhausen, Haslmeier, & Metzke, 2007). Regarding the relationship between the internal or cognitive coping style and depressive symptoms, it is helpful to follow the distinction proposed by Nolen-Hoeksema and colleagues between brooding and reflection as subtypes of cognitive coping strategies. In an empirical study of a community sample of adults, they found that

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whereas brooding predicted the increase of depressive symptoms over time, reflection predicted a decrease in these symptoms (Treyner, Gonzalez, & Nolen-Hoeksema, 2003). Similar results have been found in adolescents, for whom brooding, but not reflection, predicts the development of depressive symptoms (Burwell & Shirk, 2007; Cox, Funasaki, Smith, & Mezulis, 2011). In the same vein, Kort-Butler (2009) described an impulsive and non-thinking coping style, which was found to be related to adolescents' depressive symptoms. Thus, the relevant role of stress and coping styles in depressive reactions suggests that the dysfunctional coping patterns used by adolescents in their daily lives may also contribute to the development of HD. In fact, Landis et al. (2007) found that both active and avoidant coping styles are associated with hopelessness expectations. As far as we are aware, there are no studies that have tested the effects of coping styles on HD symptoms.

Little research has been conducted in order to analyse gender differences in the relationship of coping styles with depressive symptoms in adolescence. Several studies have found that the avoidant coping style is more associated with depressive symptoms in girls (e.g., Seiffge-Krenke & Stemmler, 2002), while others have not found gender differences in this relationship (e.g., Kort-Butler, 2009). Furthermore, it has been found that a low use of active coping strategies and a high use of rumination are linked to greater levels of depressive symptoms in girls as compared to boys (Broderick & Korteland, 2002). Landis et al. (2007) have found similar gender differences in the relationship of active and ruminative coping styles with hopelessness expectations in adolescents.

1.2. Aims of the study

The contributing factors to HD in adolescence are not well known. We suggest that daily stress and coping styles could be contributing to HD in adolescence, and that this contribution would be moderated by gender. The objective of this study was to investigate these relationships. Following Seiffge-Krenke (1995), we distinguished between an avoidance oriented style and two approach oriented styles, one comprising active-behavioural coping strategies and the other internal-cognitive ones. Since HD theory posits that hopelessness depression comprises both hopelessness expectations and HD symptoms (Abramson et al., 1989), we included these two components as measures of HD in our study. On the basis of the reviewed literature, we expected that: (1) higher levels of daily stress would predict higher levels of HD; (2) higher scores in avoidant coping style would predict higher levels of HD; (3) higher scores in the two approach-oriented coping styles (active and internal) would predict lower levels of HD. Finally, we expected (4) a gender moderation effect on the relationships between both approach-oriented coping styles and HD, with (4.1) higher active coping style scores predicting lower levels of HD mainly in girls, and (4.2) higher internal coping style scores predicting lower levels of HD mainly in boys.

2. Method

2.1. Participants and procedure

The current study utilised data collected in 2011 as part of a research project approved by the university's Institutional Review Board (IRB). A total of 650 adolescents were intended to participate in the study. They were studying 8th to 11th grades of Compulsory and Higher Secondary Education in three semi-private schools that were randomly selected from different districts representative of middle-class areas in Málaga, a mid-sized city of southern Spain. Exclusion criteria for participants were the absence of parents/guardians' consent ($n = 71$) and having missing data on one or more measures of interest ($n = 99$), resulting in a response rate of 73.8%. The final sample consisted of 480 adolescents (279 girls, 201 boys) aged between 13 and 17 ($M = 15.05$; $SD = 1.39$), all Caucasian. A three-item scale (range 0–8) was used to measure socioeconomic status, based on housing conditions and on

the education and occupation of the parents/guardians. The average score in our sample was 4.07 ($SD = 1.17$), with higher scores representing better housing conditions (range 0–2; from *three or more people sharing a room* to *two or more rooms per person*), higher parental education (range 0–3; from *did not complete primary school* to *higher education*), and better occupations of the parents/guardians (range 0–3; from *unskilled labourers* to *major professionals*). Participants in the study were recruited through the school they attended. The Schools' Principals were informed about the research objectives and procedures, and their permission sought for students to be offered participation in the study. Likewise, an informed consent form for parents/guardians was mailed explaining the research background, and assuring anonymity and that data would only be used for research purposes without being shared with third parties. Parents/guardians were asked to explicitly answer whether they allowed their wards to participate in the study or not. The form also included a return envelope that students had to bring to school, and a total of 89% of consent forms were returned. The students were informed that participation in the study was voluntary and that their responses would be anonymous. None of the adolescents, nor any of the parents/guardians who returned the consent form, declined to participate in the study. Administration of the questionnaires took place during regular school hours and a research assistant was present.

2.2. Measures

2.2.1. Hopelessness Depression Symptoms Questionnaire (HDSQ)

The HDSQ (Metalsky & Joiner, 1997) evaluates eight symptoms specified by the HD theory (Abramson et al., 1989). Each symptom is assessed through a set of four items, each rated from 0 to 3, with scores for the scale ranging from 0 to 96. The HDSQ has demonstrated sound psychometric properties in adolescent and young adult populations (Metalsky & Joiner, 1997; Rodríguez-Naranjo & Caño, 2010), and it exhibited an internal consistency of .89 in our sample.

2.2.2. Hopelessness Scale (HS)

The HS (Beck, Weissman, Lester, & Trexler, 1974) evaluates the expectations about the occurrence of negative events and about the lack of ability to avoid them. It includes 20 items, nine that are keyed "False" and 11 that are keyed "True", resulting in a score that ranges from 0 to 20, with higher scores indicating higher hopelessness. The HS has demonstrated good psychometric properties when used in adult and adolescent populations (Beck et al., 1974; Hankin et al., 2001), exhibiting an internal consistency of .84 in our sample.

2.2.3. Problem Questionnaire (PQ)

The PQ (Seiffge-Krenke, 1995) evaluates daily stress or hassles in adolescents. Along 64 items that describe common everyday stressors, participants are asked to rate the stressfulness in their lives of each item from 1 (*not stressful at all*) to 5 (*highly stressful*), with the scale ranging between 64 and 320. Seiffge-Krenke (1995) reported satisfactory psychometric properties for the questionnaire, which exhibited an internal consistency of .97 in our sample.

2.2.4. Coping Across Situations Questionnaire (CASQ)

The CASQ (Seiffge-Krenke, 1995) is aimed at evaluating adolescents' coping styles. It consists of 160 items resulting from a matrix of 20 coping strategies across eight daily life areas. Participants are required to mark the coping strategies they regularly use when a problem arises across the different areas. Seiffge-Krenke (1995) found internal consistencies for the active, internal and avoidant styles of .88, .77 and .73, respectively. The internal style comprises six strategies, ranging from 0 to 48, and the active and avoidant styles comprise seven strategies each, with ranges between 0 and 56. The questionnaire exhibited an internal consistency in our sample of .87 for the active, .88 for the internal, and .88 for the avoidant coping style subscales.

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