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Positive Coping: Mastering Demands and Searching for Meaning

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Coping

Introduction

Coping can be defined as an effort to manage and overcome demands and critical events that pose a challenge, threat, harm, loss, or benefit to a person (Lazarus, 1991). The term coping often has been used in a more narrow sense as a response required of an organism to adapt to adverse circumstances. In the context of a recent positive psychology movement, however, the conceptualization of coping is broadening and now includes self-regulated goal attainment strategies and personal growth as well (for detailed discussions, cf. Snyder, 1999; Snyder & Lopez, in press).

Coping can occur as a response to an event or in anticipation of upcoming demands, but it also can involve a proactive approach to self-imposed goals and challenges. Many attempts have been made to reduce the universe of possible coping behaviors to a more parsimonious set of coping dimensions. Researchers have come up with two basic distinctions, such as (a) instrumental, attentive, vigilant, or confrontative coping on the one hand, as opposed to (b) avoidant, palliative, and emotional coping on the other (for an overview, see Schwarzer & Schwarzer, 1996). A well-known approach has been put forward by Lazarus (1991), who separates problem-focused from emotion-focused coping. Another conceptual distinction is between assimilative and accommodative coping, whereby the former aims at modifying the environment and the latter at modifying oneself (Brandtstädter, 1992). Assimilative coping implies tenacious goal pursuit, and accommodative coping flexible goal adjustment. Similarly, the terms "primary control" versus "secondary control" (Rothbaum, Weisz, & Snyder, 1982) or "mastery" versus "meaning" (Taylor, 1983) have been defined (for a detailed discussion on coping, cf. Snyder, 1999).

This chapter is organized into two parts, using the terms mastery and meaning as proxies that stand for the two broad processes of coping described previously. Mastery pertains to problem-focused or assimilative coping with demands, whereas meaning refers to accommodative coping, including cognitive restructuring and benefit finding, etc. These coping processes need not be applied exclusively. They may occur more or less simultaneously, or in a certain time order, for example, when individuals first try to alter the demands that are at stake and, after failing, turn inward to reinterpret their plights and find subjective meaning in them. We will not discuss the abundance of possible thoughts and behaviors, but will focus on an innovative theoretical perspective that emphasizes positive coping and expands upon previous approaches. The following section will distinguish between four kinds of adaptation, with proactive coping being the prototype of positive coping (Schwarzer, 2000).

Mastering Challenging Demands: Proactive Coping Theory

Stressful demands can reflect a distressing earlier loss, an ongoing harmful encounter, or events in the near or distant future. These demands seem threatening to someone who feels incapable of matching the upcoming tasks with available coping resources. In light of the complexity of stressful episodes in social contexts, human coping cannot be reduced to primitive forms, such as fight-and-flight responses or relaxation. Coping depends on the time perspective of the demands and the subjective certainty of the events.

To introduce a new perspective, we distinguish between reactive, anticipatory, preventive, and proactive coping, and how each type of coping helps us grapple with events of the past, present, and future. Reactive coping alludes to harm or loss experienced in the past, whereas anticipatory coping pertains to imminent threat in the near future. Preventive coping foreshadows

an uncertain threat potential in the distant future, and proactive coping involves upcoming challenges that are potentially self-promoting (see Figure 1).

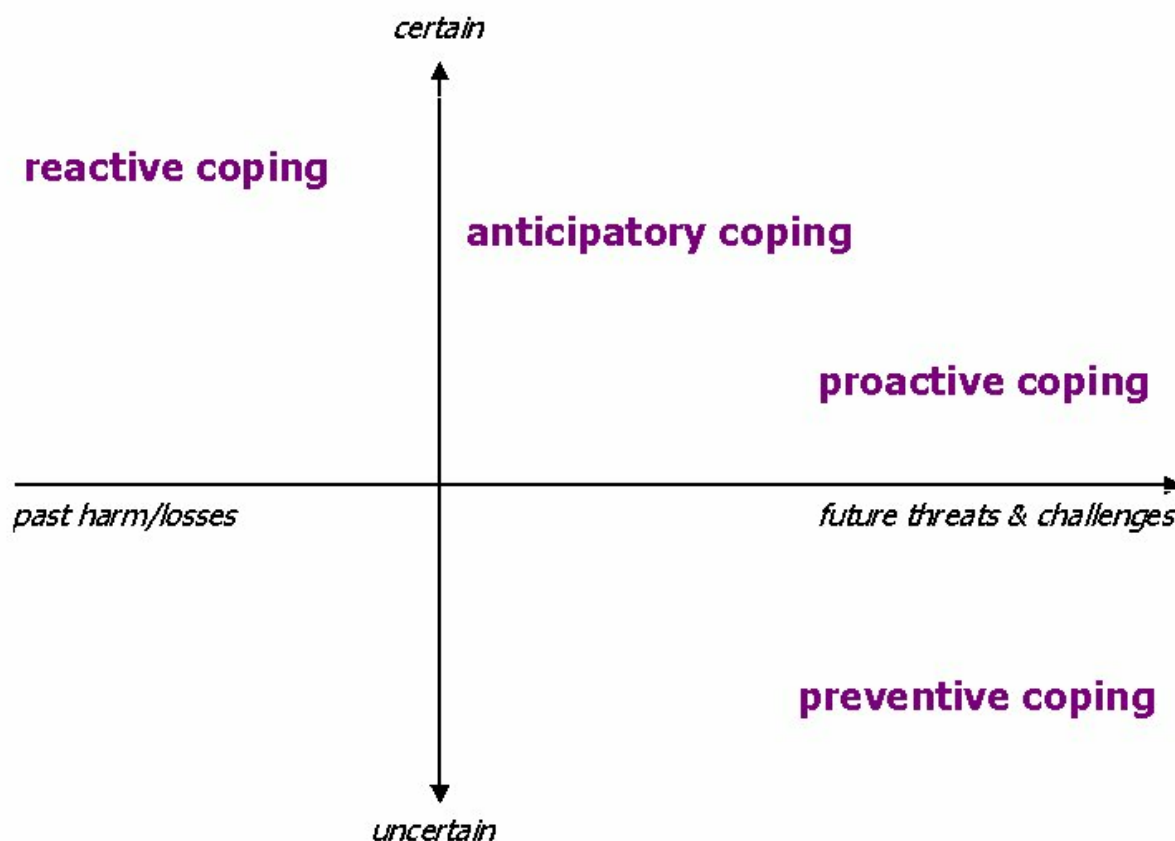


Figure 1. Four perspectives of coping in terms of timing and certainty.

Reactive coping can be defined as an effort to deal with a past or present stressful encounter, or to compensate for or accept harm or loss. Examples of harm or loss are marital dissolution, losing one's job, doing poorly at a job interview, having an accident, being criticized by parents or friends, or being demoted. All of these events have actually happened in the past; thus, the individual who needs to cope either has to compensate for the loss or alleviate the harm. Another option is to readjust goals, find benefit, or search for meaning to reconceptualize one's

life. Reactive coping may be problem-focused, emotion-focused, or social-relation-focused. For coping with loss or harm, individuals need to be resilient. Because they aim at compensation or recovery, they need “recovery self-efficacy,” a particular optimistic belief in their capability to overcome setbacks (Schwarzer, 1999).

Anticipatory coping is fundamentally different from reactive coping because the critical event has not yet occurred. It can be regarded as an effort to deal with pending threat. In anticipatory coping, individuals face a critical event that is certain or fairly certain to occur in the near future. Examples are holding a scheduled public speech, a dentist appointment, a job interview, adapting to parenthood, increased workload, an exam, promotion, retirement, company downsizing, etc. There is a risk that the upcoming event subsequently may cause harm or loss, and the person has to manage this perceived risk. The situation is appraised as either threatening, challenging, or benefiting, or some of each. The function of coping may lie in solving the actual problem, such as increasing effort, enlisting help, or investing other resources. Another function may lie in feeling good in spite of the risk, for example by redefining the situation as less threatening, by distraction, or by gaining reassurance from others. Thus, anticipatory coping can be understood as the management of known risks, which includes investing one’s resources to prevent or combat the stressor or to maximize an anticipated benefit. One of the personal resource factors is situation-specific “coping self-efficacy” (Schwarzer & Renner, 2000), an optimistic self-belief of being able to cope successfully with the particular situation.

While anticipatory coping is considered to be a short-term engagement with high-certainty events, preventive coping is an effort to prepare for uncertain events in the long run. The aim is to build up general resistance resources that result in less strain in the future by minimizing the severity of the impact. Thus, the consequences of stressful events, should they occur, would be less severe. In preventive coping, individuals consider a critical event that may or may not occur

in the distant future. Examples of such events are job loss, forced retirement, crime, illness, physical impairment, disaster, or poverty. When people carry a spare key, double-lock their doors, have good health insurance, save money, or maintain social bonds, they cope in a preventive way and build up protection without knowing whether they will ever need it.

The perception of ambiguity need not be limited to single events. There can be a vague wariness that “something” might happen, which motivates a person to be prepared for “anything.” The individual prepares for the occurrence of nonnormative life events that are appraised as more or less threatening. Coping here is a kind of risk management because one has to prepare for various unknown risks in the distant future. The perceived ambiguity stimulates a broad range of coping behaviors. Because all kinds of harm or loss could materialize one day, people build up general resistance resources by accentuating their psychological strengths and accumulating wealth, social bonds, and skills—“just in case.” Skill development, for example, is a coping process that may help to prevent possible trouble. Preventive coping is not born out of an acute stress situation. It is not sparked by state anxiety, but rather by some level of trait worry, or at least reasonable concern about the dangers of life. General “coping self-efficacy” seems to be a good personal prerequisite to plan and initiate successfully multifarious preventive actions that help build up resilience against threatening nonnormative life events in the distant future.

The prototype of positive coping is proactive coping because it does not require any negative appraisals, such as harm, loss, or threat. Proactive coping reflects efforts to build up general resources that facilitate promotion toward challenging goals and personal growth. In proactive coping, people hold a vision. They see risks, demands, and opportunities in the distant future, but they do not appraise them as potential threat, harm, or loss. Rather, they perceive demanding situations as personal challenges. Coping becomes goal management instead of risk management. Individuals are not reactive, but proactive in the sense that they initiate a

constructive path of action and create opportunities for growth. The proactive individual strives for life improvement and builds up resources that ensure progress and quality of functioning. Proactively creating better living conditions and higher performance levels is experienced as an opportunity to render life meaningful or to find purpose in life. Stress is interpreted as “eustress,” that is, productive arousal and vital energy.

Preventive and proactive coping are partly manifested in the same kinds of overt behaviors, such as skill development, resource accumulation, and long-term planning. It makes a difference, however, if the motivation emanates from threat or challenge appraisals because worry levels are higher in the former and lower in the latter. Proactive individuals are motivated to meet challenges, and they commit themselves to their own personal high-quality standards.

Self-regulatory goal management includes ambitious goal setting and tenacious goal pursuit. Goal pursuit requires “action self-efficacy,” an optimistic belief that one is capable of initiating and maintaining difficult courses of action. This is similar to the “agency” component of the hope construct proposed by Snyder (1994).

The role of beliefs in self-regulatory goal attainment has been spelled out in more detail in a different theory that was designed to explain health behavior change, the Health Action Process Approach (Schwarzer, 1992, 1999, in press; Schwarzer & Renner, 2000). The distinction between these four perspectives of coping is advantageous because it moves the focus away from mere responses to negative events toward a broader range of risk and goal management that includes the active creation of opportunities and the positive experience of stress. Aspinwall and Taylor (1997) have described a proactive coping theory that is similar, but not identical to the present one. What they call proactive coping is mainly covered by the term preventive coping in the current approach (see also Greenglass, Schwarzer, & Taubert, 1999). Further amplification of the

terms involved is given below in the context of measurement. Before we proceed with operational definitions, it is necessary to address the other area of positive coping.

Searching for Meaning

The following section will deal with various conceptualizations of "meaning" and its role in the coping process. Meaning has been one focus of interest in a number of prominent stress and coping theories concerned with adaptation to a variety of stressful encounters (Lazarus, 1966, 1991; Lazarus & Folkman, 1984). Authors vary in the roles they ascribe to the search for meaning in the stress-coping process: They conceptualize it as being distinct from coping (Affleck & Tennen, 1996), intertwined with coping (Folkman & Moskowitz, 2000), or being a factor that informs and shapes coping in the process (i.e., appraisals; Lazarus, 1966, 1991).

Researchers also scrutinize different levels of meaning in the coping process. For example, Folkman and Moskowitz (2000) differentiate situational and global meaning. Situational meaning refers to appraisals of stress where it helps determine the degree of personal significance of the encounter in relation to a person's beliefs, goals, or values. Global meaning, on the other hand, is more concerned with abstract, generalized meaning that is related to people's more existential assumptions or "assumptive worlds" (Janoff-Bulman, 1992).¹

Most researchers concerned with the issue of finding meaning in adversity conceptualize it as a powerful human strength commonly associated with the minimization of harm to an individual's physical (e.g., Affleck, Tennen, Croog, & Levine, 1987) and psychological health (e.g., Davis, Nolen-Hoeksema, & Larson, 1998). First, a more situational approach to meaning as

¹ Because this chapter is primarily concerned with meaning observed and studied in the stress and coping process, more general accounts of seeking meaning in life will not be discussed further. Suggested readings on this fascinating and well-studied topic include works by Antonovsky (1993), Ryff and Singer (1998), and Wong and Fry (1998).

emphasized by Lazarus (1966, 1991) and Folkman and Moskowitz (2000) is described.

Following this, more global conceptualizations of meaning emerging primarily from trauma literature are briefly reported.

Situational Approach

Lazarus (1991) asserts that an emotional meaning of a person-environment relationship is constructed by the process of appraisal. Whether a situation is relevant to one's goals, beliefs, or values is determined by a number of more or less automatic decisions concerning a particular encounter. In terms of Lazarus' theory, a situation would be appraised as or given meaning as being relevant or nonrelevant, posing a threat, harm/loss, or challenge (Lazarus, 1966; Lazarus & Folkman, 1984). Creating meaning in terms of appraisal is suggested to help determine the personal significance of an adaptational encounter.

Folkman and Moskowitz (2000) argue that the construal of meaning not only serves to estimate the relevance of a situation and choice of coping, but also plays a vital role for coping behavior itself, especially coping that supports positive affect. In an effort to shed light on the "other side of coping," the authors identify three meaning-related coping strategies that foster positive emotions in the context of prolonged stress: positive reappraisal, problem-focused coping, and infusing ordinary events with positive meaning.

In a longitudinal study of AIDS caregivers covering a period of eight months surrounding the death of their partners (Moskowitz, Folkman, Collette, & Vittinghoff, 1996), the authors found positive reappraisal independently related with increases in positive affect, pointing to caregivers' reappraisal of a painful experience as worthwhile. Similarly, caregivers reported an increased effort at problem-focused coping prior to the partner's death. Likewise, a strong

association with positive affect during this period was found. Folkman and Moskowitz (2000) propose that problem-focused coping may relate to finding meaning in that it supports feelings of efficacy and situational mastery. They emphasize that almost all caregivers were readily able to report positive events in the midst of their ongoing stress. Most of these events were actually ordinary (see Table 1), but they were nevertheless reported as positive. It is suggested that during the course of a chronically stressful situation (such as long-term caregiving), ordinary experiences are infused with positive meaning and serve as breathers that contribute to positive affect.

In her recent theory on the Broaden and Build Model of Positive Emotions, Fredrickson (1998, 2000, in press) emphasizes the importance of positive emotions for health and well-being. Fredrickson claims that negative emotional states are associated with narrow and fixated thinking and action. Positive emotions, on the other hand, broaden an individual's thought and action repertoire and thereby build the individual's enduring personal resources. Fredrickson proposes that by this mechanism, positive emotions have a lasting undoing effect on negative emotions. Accordingly, strategies that cultivate positive emotions, for example relaxation and finding positive meaning, should be suitable for preventing and treating problems such as anxiety, depression, or aggression (Fredrickson, in press).

Global Approach

Appraised situational meaning contrasts with global meaning. The global approach refers to a more abstract, generalized understanding of meaning which is connected with individuals' fundamental assumptions, beliefs, or expectations about the world and the self in the world (e.g., Wortman, Silver, & Kessler, 1993). The manner with which persons search for meaning while

coping with an adverse event is thought of as an attempt to reconstruct existential beliefs and distal goals that define one's identity (assumptive world; Janoff-Bulman, 1992).

One prominent theory that incorporates meaning finding as a cornerstone is Taylor's (1983) theory of cognitive adaptation to threatening events. The theory proposes three main dimensions of adaptation: search for meaning, sense of mastery, and self-enhancement. The three dimensions are not strictly distinct from one another. Instead, it is assumed that one process may serve different functions. For example, a causal explanation can provide meaning as well as increase one's sense of mastery at the same time. Taylor suggests that meaning "invokes a need to understand why a crisis occurred and what its impact has been" (1983, p. 112). By understanding the cause of an event, one may appraise its significance and what it symbolizes about one's life, often leading to existential reappraisals of life and one's appreciation for it. In a study with breast cancer patients, Taylor found that the majority of women reported positive changes since their recent bout with breast cancer. Ninety-five percent of cancer patients had a personal explanation for why they developed cancer.

In a newer study, Bower, Kemeny, Taylor, and Fahey (1998) identified 40 HIV seropositive men who recently had experienced the loss of a close friend or partner to AIDS. Finding meaning was assessed qualitatively in an extensive interview procedure. Authors state that individuals who reported having found meaning in the loss of a friend or loved one were maintaining relatively high levels of CD4 T helper cells (indicators of immune functioning) and were less likely to die over the follow-up period (Bower et al., 1998; Taylor, Kemeny, Reed, Bower, & Gruenewald, 2000).

Evidence suggests that reintegrating the understanding of the event into a broader framework may in few instances either take very long, or it will not be achieved at all. In a study with bereaved persons having lost a spouse or child due to violent death, Lehman, Wortman, and

Williams (1987) found evidence for failed assimilation efforts even after four to seven years post-loss. They report that even many years after the traumatic loss, families struggled with reoccurring memories, thoughts, or mental pictures of the deceased. Also, the majority of families had by this time not found meaning in what had happened, a finding that points to the possibility that closure through integration of an event into a meaningful framework had not been achieved.

The number of findings leading to contradictory evidence concerning the adaptational value of finding meaning in a stressful incident inspired researchers to subdivide the construct further (Affleck & Tennen, 1996; Davis et al., 1998). In a prospective study with relatives of terminally ill patients, Davis and coworkers (1998) find evidence pointing to a two-dimensional construal of meaning as "sense-making" and meaning as "benefit-finding"(see Table 1). Sense-making relates to finding an explanation for what happened, for instance in the case of a major illness, integrating it into existing schemata (or adjusting schemata), such as religion, knowledge about health, or antecedents/consequences of illness. Benefit-finding, on the other hand, is connected with finding meaning by taking into account positive implications of a negative event or the pursuit for the silver lining of adversity.

Affleck and Tennen (1996; Tennen & Affleck, in press) emphasize the benefit-finding perspective in the search for meaning in the context of severe medical problems. In a study with heart attack survivors (Affleck et al., 1987), the authors found that eight years after the incident, initial benefit-finders were in significantly better cardiac health and were less likely to have suffered a subsequent heart attack. Also, they made an effort to distinguish between the belief about finding benefit following a crisis (benefit-finding) and a coping strategy as an intentional cognition or a behavioral attempt to manage a stressful encounter (benefit-reminding; Tennen & Affleck, in press). Benefit-reminding as a coping strategy is conceptualized as an effortful, more or less frequent use of benefit cognitions to ease the stressful impact of a situation. In a study

with fibromyalgia patients, an extensive self-monitoring method was utilized to assess patients' use of benefit-reminding as well as their symptoms and experiences. The data revealed significant individual differences in the use of benefit-reminding and its relation to reports of having found benefits in the experience. Also, within-subject analyses suggested that on benefit-reminding days, individuals were more likely to experience pleasurable mood, regardless of reported pain intensity.

Searching for meaning, thus, can be considered a broad category of positive coping, including situational and global meaning, benefit-finding, and benefit-reminding, among others. Empirical evidence attests to the fact that meaning and positive emotions help to restore an individual's world view and may build additional personal resources.

Assessment of Positive Coping

Coping has been measured mainly by the use of questionnaires, such as checklists or psychometric scales. In a review, Schwarzer and Schwarzer (1996) describe 13 conventional inventories that were designed to assess numerous aspects of coping. These measures include various subscales to cover a broad area of coping behaviors, such as problem-solving, avoidance, seeking social support or information, denial, reappraisal, and others. One of the conclusions is that it is very difficult to measure coping in a satisfactory manner. Coping is extremely idiosyncratic and is multiply determined by situation and personality factors. Theory-based psychometric scales can only assess part of it. Experimental measurement approaches, in contrast, often remain at an individual and descriptive level, not allowing generalized conclusions for groups of individuals. We will address some basic measurement issues in the next section, but first we will give examples for the assessment of constructs described above.

Approaches that try to tap innovative aspects of positive coping are (a) the mastery of future threats and challenges, as reflected by preventive or proactive coping, and (b) the search for meaning.

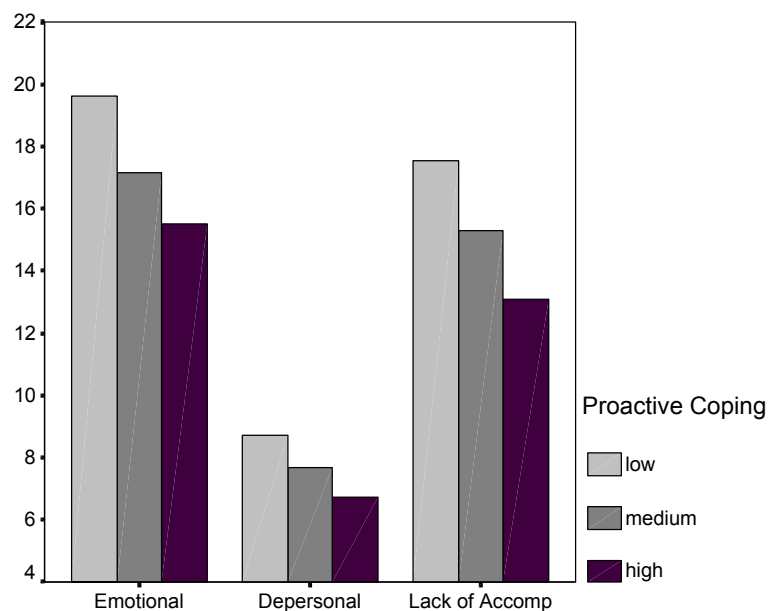
Preventive coping aims at uncertain threatening events that may loom in the distant future. People accumulate resources and take general precautions in order to be protected against a variety of critical events. A ten-item preventive coping subscale is included in the Proactive Coping Inventory (PCI; Greenglass et al., 1999). Typical items are: “I plan for future eventualities,” “Before disaster strikes I am well-prepared for its consequences,” and “I prepare for adverse events.” Encouraging empirical evidence is available for the PCI (Greenglass, in press). It may be of advantage, however, to select more situation-specific items, such as, “I plan my day by making a to-do list,” “My car does not run out of gas because I fill up earlier than necessary,” “I set aside money for use in case of an emergency,” or “I practice regular physical exercise to prevent ill health.” These examples document that preventive coping is a common daily behavior for most people. However, whether an individual can be characterized as a typical “preventive coper,” is a matter of degree. There also is a strong overlap with proactive coping, and often it is not immediately clear whether a particular behavior would count as being preventive or proactive. A final conclusion can be made only after determining whether the underlying appraisal has been a threat (preventive) or a challenge (proactive).

Proactive coping aims at uncertain challenging goals, and people accumulate resources and develop skills and strategies in their pursuit. The PCI includes the Proactive Coping subscale (see Appendix) that has been tested in various samples and is available in several languages. There are 14 items that form a unidimensional scale (see Appendix). It has satisfactory psychometric properties, and evidence for its validity is emerging. In several studies in Canada, Poland, and Germany, it has been found that proactive coping is positively correlated with

perceived self-efficacy and negatively with job burnout in different professions (Greenglass, in press).

In 316 German teachers, for example, its internal consistency was $\alpha = .86$ (unpublished data). Correlations were $r = .61$ with perceived self-efficacy, $r = .50$ with self-regulation, and $r = -.40$ with procrastination. Job burnout was defined three-dimensionally in terms of emotional exhaustion, depersonalization, and lack of accomplishment (Maslach, Jackson, & Leiter, 1996). Burnout is a relevant construct for the validation because it should not be compatible with proactive coping. To illustrate the relationships, the sample was subdivided into low, medium, and high proactive teachers who were plotted against the three dimensions of burnout. Figure 2 displays a significant pattern of decreasing burnout with increasing levels of proactive coping.

Figure 2. Relationship between proactive coping and burnout.



Assessment of meaning in the coping process largely relies on qualitative approaches. Some of the previously reviewed theories and studies will now be summarized and presented, together with applied qualitative operationalizations in Table 1. Further measurement issues concerning the handling and quantification of narrative accounts will be briefly discussed in the following section.

Insert Table1 here

Measurement Issues

Coping measurement is complicated by a number of conceptual issues, some of which pertain to the stability, generality, and dimensionality of coping (Perrez, in press; Schwarzer & Schwarzer, 1996). Difficulties occur necessarily when an attempt is made to measure coping. The assessment of coping does not equal the assessment of most other constructs in psychology, in particular not the way personality is typically measured. Coping is highly situation-dependent, and it changes rapidly and unforeseeably as the stressful life encounter unfolds.

The assessment of coping can represent a detailed description of cognitions and behaviors of an individual dealing with a stressful encounter. This method does justice to the fact that coping is a process, and it allows the identification of contingencies between changing situations and changing actions, be it by time sampling or event sampling. For example, one can assess whether a person always applies and reapplies the same set of strategies or utilizes a broad range of tactics that are well-adapted to changing encounters. This idiographic approach is suitable for single cases in clinical settings, but it is not common in field research. Rather, the focus in

empirical studies is on individual differences. Stability then refers to the pattern similarity of interindividual differences at multiple points in time. If, for example, some persons cope in a mastery-oriented manner, whereas others do so in a more meaning-oriented manner, and if this reoccurs at later observations, one is inclined to attribute stable coping preferences to these individuals. When we measure coping with standardized instruments, we therefore imply that people can be characterized by some preferred ways of coping with adversity, and that they continue to apply the same kind of strategies over time. This dispositional implication helps to reduce the complexity of coping assessment, but it does so at a high price: It assumes that the uniqueness of a situation-specific coping response represents a negligible aspect.

Closely related to stability is another problem, namely the consistency of coping responses across different situations (generality). Do people apply the same strategy when they face an exam, the bereavement of a loved one, or an argument with their spouse? They may not show exactly the same responses, but they may be characterized by a general tendency to select appropriate behaviors either from the class of avoidance or from the class of confrontation strategies. If all responses could be explained by the challenging events, this would reflect a pure situation determinism. In contrast, the common person-situation interaction perspective would consider joint influences from both sources, person characteristics and situation characteristics. A moderate amount of generality implies that people construct a series of person-dependent strategies for a class of situations. The measurement of coping can only be fruitful under the assumptions that individuals generalize across situations to a certain degree and evoke a limited set of strategies that they reapply in different situations.

The debate about dispositional versus situational coping assessment was sparked by Stone and Neale (1984), who attempted to develop an instrument to assess daily coping for use in longitudinal studies. In a pilot study, individuals were asked how to handle a recent problem by

responding to 87 coping items. Eight categories were established: (a) distraction, (b) situation redefinition, (c) direct action, (d) catharsis, (e) acceptance, (f) social support, (g) relaxation, and (h) religion. Because the psychometric properties repeatedly turned out to be unsatisfactory, the authors abandoned their intention to construct psychometric rating scales with multiple items and decided to apply the eight categories directly with an open-ended response format. Participants checked the appropriate categories and wrote down descriptions of their coping behaviors where applicable. The authors claim content validity for this measure and argue that this approach has advantages over traditional ones. In particular, they question the usefulness of internal consistency in coping measurement, of retrospective assessment, and of representing coping processes by a sum score. That Stone and Neale did not develop reliable and valid psychometric coping scales and that they resorted to a written structured interview can be considered as a blessing today because their article has sparked an ongoing debate about the merits of situation-oriented coping assessment (Folkman, 1992; Tennen, Affleck, Armeli, & Carney, 2000).

The meaning construct in the context of stressful or traumatic life events has largely been assessed qualitatively (see Table 1). The interview and open-ended question approach seems more than appropriate given the challenges associated with assessing the search for meaning in very different, however mostly very severe, life-event situations. Sommer and Baumeister (1998) suggest a list of guidelines derived from their own work that proved useful in the context. They suggest, first, careful consideration of at least one clear independent variable, for example by collecting first-person accounts from two study groups. Second, dichotomous yes-no coding schemes prove more reliable (higher interrater agreement) than continuous scales. Third, codings should follow clear guidelines and rules (e.g., accounting for present as well as absent statement content in narratives). Fourth, they suggest that there should be a sufficient number of stories to code in each type (study group) to enhance statistical power. They recommend a minimum of 60

narratives in each group. Also, with shorter accounts, larger samples prove beneficial because lack of detail in narratives is associated with greater baseline rates of "No" codings. Fifth, it is often the case that a priori determined codings and hypotheses have to be supplemented with new coding categories derived from initial coding or reading of the narrative accounts. To avoid capitalizing on chance, Sommer and Baumeister recommend that findings based on ideas that emerged during the coding process be replicated. Sixth, authors suggest that one method of increasing the available story sample is to ask participants to adopt two perspectives of an encounter, despite statistical problems associated with this method. For instance, in a study about victim and perpetrator accounts of personal conflict, Baumeister, Stillwell, and Wotman (1990) asked participants to write two stories, one about an instance in which they angered another person and one in which someone angered them.

Future Developments

The field of coping is one of the most complex in psychology. Measurement cannot be better than the constructs that are supposed to be measured. The further elaboration and differentiation of concepts needs to precede any attempt at proper assessment. As an example for such a differentiation of concepts, we have chosen proactive coping theory (Aspinwall & Taylor, 1997; Schwarzer, 2000). The measurement of proactive behaviors, personal growth, positive reappraisals, and positive emotions in the context of stress adaptation should not remain at the level of psychometric scales, but it should include dynamic data that account for changes within a particular coping episode.

Coping can be understood only when it is regarded as a transactional process (Lazarus, 1991), which implies a longitudinal approach of measurement. However, it is not sufficient

simply to select several points in time because the researcher cannot be certain about the optimal time window when significant changes take place. Therefore, a more continuous measurement is recommended. The closest to this suggestion is the daily process approach to coping, commonly referred to as ESM (Experience Sampling Method; Tennen et al., 2000), where participants respond at least once a day when prompted by an ambulatory device. The main disadvantage of this method, of course, is its reactivity, which means that coping responses are artificially constructed, due to the demands of the particular study design. But the overall approach appears to be promising.

In the future, we can expect advances in the computerized simultaneous assessment of such data sources under real-life conditions. In contrast, cross-sectional studies that often rely on hypothetical scenarios or that require the recall of single or multiple past events will lose their importance.

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Appendix

Proactive Coping Scale

(from the Proactive Coping Inventory, PCI; Greenglass et al., 1999)

“The following statements deal with reactions you may have to various situations. Indicate how true each of these statements is depending on how you feel about the situation. Do this by checking the most appropriate box.”

In scoring responses, 1 is assigned to “not at all true, 2 to “barely true”, 3 to “somewhat true” and 4 to “completely true”.

1. I am a "take charge" person.
2. I try to let things work out on their own. (-)
3. After attaining a goal, I look for another, more challenging one.
4. I like challenges and beating the odds.
5. I visualize my dreams and try to achieve them.
6. Despite numerous setbacks, I usually succeed in getting what I want.
7. I try to pinpoint what I need to succeed.
8. I always try to find a way to work around obstacles; nothing really stops me.
9. I often see myself failing so I don't get my hopes up too high. (-)
10. When I apply for a position, I imagine myself filling it.
11. I turn obstacles into positive experiences.
12. If someone tells me I can't do something, you can be sure I will do it.
13. When I experience a problem, I take the initiative in resolving it.
14. When I have a problem, I usually see myself in a no-win situation. (-)

Note. (-) indicates reverse item

Table 1

Studies Using Qualitative Assessment of "Meaning"

| Authors/ Study population | "Meaning" in the Coping Process | Strategies | Measures/Qualitative Assessment | Conclusions |
|---|--|---|---|---|
| Folkman & Moskowitz (2000) <u>AIDS caregivers</u> | Appraised situational meaning influences choice of coping strategy Meaning is integral to coping that supports positive affect | Positive reappraisal Problem-focused coping Infusing ordinary events with positive meaning (qualitative) | <u>Positive reappraisal, problem-focused coping</u> : Ways of Coping Questionnaire (Folkman & Lazarus, 1988) <u>Infusing events with positive meaning</u> : Describe "something that you did or something that happened to you that made you feel good and that was meaningful to you and helped you through the day" (Folkman & Moskowitz, 2000; p. 651) | Even mea Pla frie Unp flow som |
| Taylor (1983); Taylor, Lichtman, & Wood (1984) <u>Breast cancer patients</u> | Finding meaning as a causal analysis that provides an answer to the question of why something bad happened, a rethinking of one's priorities to restructure life along more satisfying lines Finding meaning may be intertwined with a sense of mastery | Understanding of the origin and impact of the crisis as well as its personal significance By finding meaning, chance for regaining a sense of control over crisis and its side effects | <u>Meaning</u> : Patients were asked if they had any hunches about the origin of their cancer, who they thought was responsible for their cancer, and what were the implications of the cancer for the patient's life. | Nar alor Me spe blo Me som Me life kno prio |

Table 1 (cont.)

| Authors/ Study population | "Meaning" in the Coping Process | Strategies | Measures/Qualitative Assessment | Conclusions |
|--|---|---|---|---|
| Davis, Nolen- Hoeksema, & Larson (1998) <u>Bereaved family members</u> | Finding meaning as a catalyst for the review of one's priorities connected with a shift of focus from the event itself to understanding the self in the context of adversity Deriving benefit from loss as a key means of assigning positive value to the event for one's own life | <u>Sense-making</u> : Developing an explanation for the loss within existing fundamental worldviews <u>Benefit-finding</u> : Pursuit for the silver lining of adversity | <u>Sense-making</u> : "Do you feel that you have been able to make sense of the death?" (Davis et al. 1998, p. 565) <u>Benefit-finding</u> : "Sometimes people who lose a loved one find some positive aspect in the experience. For example, some people feel they learn something about themselves or others. Have you found anything positive in the experience?" (Davis et al. 1998, p. 565) | <u>Sense-making</u> : acc pat exp oth <u>Benefit-finding</u> : cha bro sup bet |
| Affleck & Tennen (1996) <u>Fibromyalgia patients</u> Affleck, Tennen, Croog, & Levine (1987) <u>Heart-attack survivors</u> | Authors distinguish between meaning-associated beliefs about benefit-finding and benefit-reminding as a coping strategy. | <u>Benefit-finding</u> : Search for uplifting meaning from a threatening experience <u>Benefit-reminding</u> : More or less frequent use of benefit cognitions to alleviate impact of a stressful situation | <u>Benefit-finding</u> : "[...] do you see any positive benefits, gains, or advantages in the experience? If so what are they?" (Affleck et al., 1987, p. 31) <u>Benefit-reminding</u> : Participants rate how much they "reminded [themselves] of some of the benefits that come from living with their chronic pain" (Affleck & Tennen, 1996, p. 915) | <u>Benefit-finding</u> : 198 val fam ins and to i hea |