

WHY CANNOT PEOPLE COPE WITH STRESS?

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ABSTRACT

One of the actual issues today is how different people with varying degrees of success cope with stressful situations. Some of them are able to adapt to changes in life, while others come down with neuroses. In order to answer the question we have had a research of peculiarities of stress handling by people suffering from neurotic disorders. To achieve the objectives of the study we used the following methods: test of anticipation consistency by V. D. Mendelevich, "Life Style Index" questionnaire by R. Plutchik, questionnaire of coping means by R. Lazarus, methodology for study of coping behavior by E. Heim. As a result we have learnt that people suffering from neuroses often use unconscious protective mechanisms of psyche to overcome stressful situations ($p \leq 0.05$; $p \leq 0.01$; $p \leq 0.001$), some often feel confusion ($p \leq 0.05$) and less visualize the future optimistically ($p \leq 0.001$). Also people suffering from neuroses worse predict future difficulties ($p \leq 0.05$) and less use conscious ways of coping with stress, such as defending their interests ($p \leq 0.01$), taking responsibility for what is happening ($p \leq 0.05$), looking at the situation from the outside ($p \leq 0.001$), controlling emotions ($p \leq 0.001$), planning the solution of problems ($p \leq 0.01$), finding the positive side in a situation ($p \leq 0.01$).

Keywords Stress, handling stress, anticipation, psychological defense, neuroses

INTRODUCTION

Since "stress" conception was introduced in psychology thesaurus by Hans Selye, a question "Why do some people cope with stress, and other don't?" concerns scientists. This issue is actual nowadays. Psychic health disorders, connected with stress, constitute the lion's share of all mental disorders. Neuroses are the main among them. V. D. Mendelevich determines neurosis as psychopathological symptoms and nonpsychotic level syndromes, which combine with vegetative dysfunction occurring by impact consequence on a person with current psychic trauma and imperfect anticipation mechanisms and psychological compensation. We decided to focus our attention on people suffering from neurotic disorder, because it can help to find the answer to the question why some people can't manage with stress. According to the definition people suffering from neurotic disorder have imperfect anticipation and compensation mechanisms. So what are compensation and anticipation mechanisms?

In psychology anticipation (in a wide sense) is ability to act and make decisions with certain spatial and temporal deflection in respect to expected, future events. Different anticipation aspects and anticipation consistency in various test groups were studied by such scientists like V. D. Mendelevich, B.F. Lomov, M. M. Solobutina, A. V. Frolova, A. F. Minnulina, A. I. Achmetzyanova. Anticipation consistency is a person's ability to anticipate stress situations in future and to predict reaction manners in these situations. A person, who prones to neurotic disorders, excludes from anticipation activity undesirable events and actions always focusing only on desirable ones. Therefore, when a person gets into the

unpredictable, unfavorable and displaced from situational script life collision, he/she finds himself/herself in temporary trouble for application controlling behavior. Even if psychological compensation system functioned normally, in prognosis discrepancy conditions and utter expressiveness emotional experiences (insult, disappointment, perplexity) connected with this prognostic mistake, a person cannot use potential opportunities to cope with the situation as a result of that comes down with neurosis.

We include psychological defense mechanisms and coping into compensation mechanisms. Psychological defense is a system of mechanisms aimed at minimizing the negative experiences which are connected with the conflicts that threaten the integrity of the personality. Such conflicts can be triggered by both conflicting settings in the personality, and the mismatch of the external information or image of the world and self concept formed in the personality. Psychological defense mechanisms were studied by such scholars as O.V. Kruzhkova, R. Plutchik, H. Kellerman, H.R. Conte, N. Haan.

R.S. Lazarus defined coping as cognitive and behavioral efforts to manage specific external and internal requirements (and conflicts between them), which are estimated to be straining or exceeding the resources of the person. Coping behavior in different social and clinical groups was studied by such scientists as R.S. Lazarus, A.G. Billings, R. Moos, M. Perrez, M. Reicherts.

The aim of our study is to find peculiarities of the overcoming the stress by people who suffer from neurotic disorders.

The subject of the study is the ways of the overcoming the stress by people who have neurotic disorders.

Hypothesis: People suffering from neurotic disorder, have more expressed mechanisms of psychological defense and less expressed coping strategies and constituents of the anticipative ability, than healthy people have.

During the study we found out that people didn't cope with stress, because while overcoming the stress situation people often use mechanisms of psychological defense, maladaptive and passive coping strategies (such as the escape-avoidance and perplexity) and also people can't always predict future difficulties.

METHODS

The empirical base of research was made by results of diagnostics of healthy examinees of both sexes aged 30-50 years (30 people), which were compared to diagnostic data of the people who were suffering from necrotic frustration and passing treatment at the day patient department of the Republican clinical psychiatric hospital named after the academician V.M. Bechtereov of Ministry of health care of the Republic of Tatarstan and at the Kazan city clinical hospital № 18 (71 people).The total amount of selection was 101 people.

In the diagnostic purposes the following techniques have been applied: the anticipation consistency test by V.D. Mendelevich; "Life Style Index" questionnaire by R. Plutchik; questionnaire of coping means by R. Lazarus; methodology for study of coping behavior by E. Heim.

Examinees were asked to perform 4 questionnaires. At the beginning of the study examinees were imposed on "The questionnaire of coping means" by R. Lazarus, consisting of 50 statements describing the frequency of use of different stress coping means. It was asked to evaluate the extent of their agreement with each statement on a 4-point scale (from "never" – 0 points to "permanently" – 3 points). Then there was presented the questionnaire "The anticipation consistency test" by V.D. Mendelevich including 3 subscales which represented personal-situational, spatial and temporal components of anticipation consistency (predictive competence).

“The anticipation consistency test” by V.D. Mendelevich consists of 81 statements, each of which describes the ability to predict. Examinees were asked to evaluate the extent of their agreement with each statement on a 5-point scale (from “completely disagree” – 1 point to “totally agree” – 5 points).

Then examinees were given the questionnaire of E. Haim for study of coping-behavior composed from 3 blocks: cognitive coping-strategies (10 statements), emotional coping-strategies (8 statements) and behavior coping-strategies (8 statements). An examinee was to choose from each block only one statement the most suitable for his behavior, thoughts and trials in stress situations. In the end of the study there was given the questionnaire “Lifestyle index” by R. Plutchik, composed from 92 statements describing feelings and actions of different people and were offered to measure the level of their agreement with each one on a 2-point scale (“agree” – 1 point, “don’t agree” – 0 point). Common time of the study was 70 minutes.

All obtained data were tested on normal distribution with the help of criteria of Kolmogorov-Smirnov. It was found out that we could refer distribution of data to normal distribution. For detection of differences was used calculation of Student’s coefficient.

RESULTS

People, who suffer from neurotic disorders, have much lower indicator values of personal-situational component of anticipation consistency and its common indicator in comparison with the data of healthy people group.

The group of patients with the neurotic disorders differs from the healthy one by the higher rate of all diagnostic types of psychological defense ($p \leq 0.05$; $p \leq 0.01$; $p \leq 0.001$).

Nonadaptive coping-strategy “perplexity” is credibly used more often in groups, who suffer from neurotic disorder ($p \leq 0.05$), then in the healthy group. Adaptive coping-strategy “optimism” is used by healthy groups more often, then by groups, who suffer from neurotic disorder ($p \leq 0.001$).

Groups, who suffer from neurotic disorder, have much lower expression of coping-strategy confrontation coping ($p \leq 0.01$), solution problem planning ($p \leq 0.01$), positive reevaluation ($p \leq 0.01$), taking responsibility ($p \leq 0.05$), distancing ($p \leq 0.001$), self-control ($p \leq 0.001$).

CONCLUSION

The results, which we got, using the method “The anticipation consistency test”, are coordinated with anticipation neurogenesis conception of V.D. Mendelevich. According to this conception, people, who are not able to predict acceptable conflicts and hardships, consequences of their actions, are less able to cope with stress, and have a predisposition to neurosis.

The results, which we got, about people, who suffer from neurotic disorder, differ from healthy ones with the higher expression of all diagnosed psychological defense types, have common features with R. Plutchik and co-authors investigation results, which show that, psychological defenses are more expressed in actions of mentally sick. The same results were given by A.N. Mikhailov and V.S. Rotenberg in their somatic patient investigation. During the stress situation examinees, who suffer from neurotic disorder, are not ready to it, coping-strategies don’t switch on in time and general load during the stress overcoming fall on the psychological defenses.

People, who suffer from neurotic disorder, credibly more frequently than healthy examinees, get into stressful situations, experience distraction, feeling of helplessness and rarely

optimistically look into the future than healthy examinees. People, who suffer from neurotic disorder, credibly rarely than healthy examinees take responsibility for occurrence, get into a confrontation to defend their interests, plan a problem solution, use their emotions control, find something positive in situation, make a distance in thoughts of unpleasant events.

Received results correspond with coping investigation results of people suffering from neurosis carried on under the B.D. Karvasarsky's guidance which showed that in comparison with healthy people they are characterized by passiveness in conflict and problems solving, it is common for them to have less adaptive behavior. People suffering from neurosis, for instance, more frequently react with "perplexity" (cognitive coping strategy), "emotional suppression" (emotional cognitive strategy) and "retreat" (behavioral coping strategy).

Also in the E.I. Chehlaty's study of coping behavior of neurotic patients it was found that patients, compared with healthy people, rarely use the adaptive form of the coping behavior, such as a searching of the social support, altruism, optimistic attitude to difficulties. Neurotic patients more than healthy people choose the coping behavior on the type of insulation and social alienation, avoiding problems and suppression of emotions, they easily fall into state of the hopelessness and submissiveness, they are inclined to the self-accusation.

Also the study in Japan showed that active coping strategies, oriented on the solving the problem, lead to the decrease of existing symptoms. But the avoidance and other coping strategies, directed on the reduction of emotion tension, lead to the gain of symptoms. These conclusions are correlated with our results.

Our results accord with the results of the N. Garnefski's study, which indicate that people with expressed symptoms of anxiety and depression in stress situations more use methods of the overcoming, which raise the intensity and duration of negative experiences, and also they are more inclined to form unrealistic representatives, directed on avoidance of active movements.

DISCUSSION

Based on obtained results, we can do the next consequences:

1. People, who suffer from neurotic disease, differ from other people by low ability of predicting stress situations and more often using of unconscious mechanisms of psychological defense and maladaptive ways of reaction on stress, such as perplexity.
2. Examinees, who suffer from neurotic disorders, rarely use deliberate ways of overcoming stress, such as protection of their interests, taking responsibility, taking a detached view, control of their emotions, planning of solving problems, finding positive sides in a situation.
3. People, who suffer from neurotic disorders, are also less optimistic, than healthy people.

Answering the question, which was imposed in the title, we can say that people do not cope with stresses, because they often use unconscious defense mechanisms of psyche, fall in confused state, predict difficulties ineffectively, which can occur in future, and they seldom use different perceived techniques of overcoming difficulties.

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