

# Preface

It's funny: I always imagined when I was a kid that adults had some kind of inner toolbox full of shiny tools: the saw of discernment, the hammer of wisdom, the sandpaper of patience. But then when I grew up I found that life handed you these rusty bent old tools - friendships, prayer, conscience, honesty - and said "do the best you can with these, they will have to do." And mostly, against all odds, they do.

Annie Lamott, *Travelling Mercies*

Despite the idyllic picture of childhood sometimes painted in books and films, the lives of children and adolescents are filled with problems, challenges, and demands. Some are seemingly minor daily hassles, such as teasing in the lunchroom about the choice of sandwich, an argument between sisters over a television show, or disappointment at not making the soccer team. Some challenges represent normative demands, like waiting for a turn on the slide, cleaning up one's room, or studying for an algebra examination. Children and adolescents are also faced with more challenging life stresses, such as when their parents argue or divorce, or when they enter a new school without any friends. Chronic stressors often stem from a child's or adolescent's larger family circumstances, for example, when a parent drinks too much, a sibling is diagnosed with cancer, or the extended family lives in a dangerous neighborhood. Children and youth also have a hand in creating their own stressors—by picking fights, skipping school, or drinking and driving. Children are also the victims of traumatic insults, when parents die or are abusive, when gang violence kills a friend, or when natural disaster wipes out a neighborhood or village. As pointed out by Garmezy (1983), "Children are not strangers to stress" (p. 49).

## Stress, Risk, and Resilience

The study of coping during childhood and adolescence, which is the focus of this book, is one of many rich traditions that explore how profiles of stressors, both acute and chronic, cumulatively shape children's pathways through life. At the

highest level, work on *risk and resilience* contrasts stress-affected children, who show the typical long-term negative effects of significant life adversity, with children who are resilient, who show positive adaptation in the face of negative life events (Cicchetti and Rogosch 2009; Masten 2001). Starting in the 1960s, resilience researchers have painted a compelling big picture, expanding on psychological frameworks that emphasized individual-level characteristics, to their current focus on multi-level systems perspectives that include larger societal forces, like poverty and privilege, as well as factors from the neighborhood, family, school, and peer group (Masten 2006; Werner 1993), and, most recently, that incorporate factors from multiple levels of physiology and genetics as well (Luthar 2006; Lynch and Cicchetti 1998; Rutter 2002). Of special interest is the identification of protective factors that can buffer children's long-term mental and physical health and functioning when they are exposed to potentially harmful conditions.

The effects of stress are also studied in more detail by researchers who use observational and psychophysiological techniques in the laboratory to capture children's reactions to a wide variety of mild stressors. Researchers examine infants' and toddlers' responses to gentle arm restraint, short separations from caregivers, or exposure to novel objects like turning mobiles or walking toys. Young children are asked to clean up, to refrain from playing with attractive toys, or to wait as long as possible before eating marshmallows. Children are asked to work on unsolvable mazes and puzzles, to listen as a child in the next room ostensibly knocks down their block creations, or to tell interviewers how they make themselves feel better when they are feeling sad. Adolescents play computer games with uncooperative peers, discuss controversial potentially conflictual topics with their parents, or are observed interacting with their friends during competition. Some of these same kinds of stressors are followed outside of the laboratory in children's daily lives, for example, by examining reactions to inoculations, provocations on the playground, failure on tests, or parents' requests for help with household chores. Adolescents are asked to complete daily diaries about the stressful events they encounter and their responses to them. For many researchers, a particular focus is the analysis of subsystems (e.g., neuroanatomical, hormonal, attentional, and cognitive) that are directly affected by stress and that also potentially shape the effects of stress exposure on children's subsequent functioning.

## **The Study of Coping**

The study of children's coping resides directly in the middle of this rich and fascinating work. At the most general level, coping focuses on how people detect, appraise, react to, and deal with the actual demands, stressors, and obstacles they encounter in their daily lives. The goal of research on coping is to provide detailed descriptions of these processes and to specify how they work together to shape each other reciprocally over the course of a coping episode, and cumulatively how they contribute to physical and psychological health or disorder. For example, research

analyzes how the characteristics of a *stressor*, such as its severity, chronicity, and controllability, influence how people react to, perceive, and cope with it. Studies target people's *appraisals* of a stressful event, that is, their take on whether it is a challenge or threat, and whether they can do anything to evade or counteract it, and then examine how such appraisals influence individuals' physiological and psychological reactions to it and constrain their choices about how to cope with it.

Good empirical work also considers how the social and personal *resources* available to people, and the higher-order social contexts in which they live, play a role in the number and kinds of stressors that reach them, how they perceive those events, and the ways they can cope with them. Interventionists are especially interested in examining the consequences of different ways of coping, that is, whether problem-solving, support-seeking, escape, rumination, and so on are effective in ameliorating emotional distress and resolving the stressor, or whether they make things worse, either today or in the future. Rare process-oriented studies scrutinize the unfolding of coping episodes (with their feedback loops) over days and weeks, sometimes even marking transition points that punctuate this process, such as diagnosis, treatment, and relapse when dealing with a stressful medical condition.

For those interested in the effects of stress and adversity on human functioning and adaptation, the study of coping takes researchers into the heart of the struggle, right on the ground, where stressors enter the "envelope" of daily life, and focuses attention on how people actually resist, accommodate, or succumb to their effects. In studying people under stress, coping represents a marker for how the entire stress reactivity system is functioning, including social and contextual factors. At the same time, coping can also be considered an active player, akin to the concept of "host resistance" in the study of whether exposure to germs leads to illness, potentially influencing whether stress "infects" or "inoculates" the organism it contacts. Coping depicts one of the processes that mediate between adversity and adaptation, and because it is distinguished by its focus on actual stressful encounters and "everyday resilience," it provides researchers with a possible mechanism that can help to explain how, why, and for whom adversity translates into adaptive or maladaptive short- and long-term sequelae. As such, coping also represents a possible intervention lever to improve developmental outcomes.

## Development and Coping

No one would argue with the assertion that development shapes every part of the coping process. It delineates the kinds of stressors that enter a person's life: Preschoolers are not tasked with moving out on their own, and adolescents are not typically pressured into taking naps. Development influences how stressors are appraised: A mother packing a suitcase does not worry a newborn, and a whirling top does not worry a 10-year-old. It decisively constrains the ways that people can cope: The prototypical way of escaping, that is, by leaving the stressful encounter,

cannot be accomplished until an infant can locomote, and the prototypical way of seeking information, that is, by asking a question, cannot be accomplished until an infant can talk. The way that social partners participate in coping episodes also differs across development: Parents do not help their college-age children with a demanding school project the same way they help their first graders, and an eight-year-old best friend does not provide a shoulder to cry on after hearing stories of family discord in the same way as a sixteen-year-old best friend.

Given this consensus, it may be surprising to discover that no coherent body of research on the development of coping exists today. Instead, the field as a whole has responded to the tacit recognition that development shapes everything about coping by dividing theories and research into narrow age-graded bands. One group of researchers studies the coping of preschoolers, another studies the coping of “middle-aged” children, yet another studies adolescents. Researchers focusing on how infants and young children react to and deal with stressful encounters rarely refer to their topic as “coping”; they are studying emotion regulation, stress reactivity, or temperament. In fact, each of the ways of responding to stress, such as problem-solving, rumination, helplessness, help-seeking, or opposition, has its own research tradition, largely focused on the specific ages when that particular way of coping is most salient.

Researchers studying children and adolescents have generally adopted conceptualizations of coping from work on adults, and at each age, they focus largely on individual differences, looking at the personal and social factors that contribute to stress responses, and examining how different responses are in turn connected to positive and negative consequences. However, if studies focus only on individual differences, researchers can overemphasize individual-centric “coping-style” psychology—like some of the ego psychologists of the 1960s and 1970s or some of the personality psychologists and neuroscientists of today—who seem to assume that neurological factors, like high stress reactivity, and individual factors, like optimism, are immutable characteristics that determine coping now and will continue to do so in the future. Or, investigators can overemphasize the opposite side of the coin, as embodied by some of the work on coping in adulthood today, assuming that all coping is a temporary installation, created *de novo* on the basis of momentary circumstances and fleeting perceptions, to be expressed once and then to disappear forever.

A developmental perspective acknowledges the incomplete validity of both of these seemingly contradictory viewpoints and integrates them, using two key assumptions. First, it holds that an organism always brings selected parts of its history with it into the present, and this developmental signature can help us understand essential things about what the organism finds stressful, how strongly it reacts, what it is capable of pulling together in response, and what it takes away from the encounter. Second, a developmental perspective holds that this historical trace is brought to bear in a dynamic present. What went before constrains and scaffolds future development, but is not deterministic: It is combined with current

conditions to create new integrations and reorganizations that can never be fully predicted by initial conditions. In other words, although researchers can take a snapshot at any point, coping is part of an open, dynamic, and developing system.

## Purpose of this Book

The purpose of this book is to review what is known about the development of coping from infancy to emerging adulthood and to begin to build conceptual and empirical bridges between coping, on the one hand, and the development of regulation and resilience, on the other. In order to integrate research on age differences and changes in coping, and to explain why this is such a challenging task, Part I lays out a “developmentally-friendly” framework for the study of coping. Chapter 1 provides a brief outline of the history of conceptualizations of coping, as well as a critique of the current state of the field, emphasizing recent work that defines coping as “action regulation under stress.” Chapter 2 provides an overview of the “building blocks” of the field, or ways of coping, along with a critique of the current state of the field, and a summary of recent work on hierarchical families of coping, which have allowed developmentally-graded members of those families to be identified. This chapter also analyzes the field’s struggles to agree on which ways of coping are “good news” and “bad news,” and to examine how a developmental perspective can suggest criteria for making this determination.

The foundational issues covered in this first section are prelude to the next three sections, which explore more deeply how coping develops normatively from birth through emerging adulthood and how problems in the subsystems that underlie or scaffold coping can predispose children to the development of psychological and behavioral difficulties. More specifically, Part II reviews and integrates current research on the development of coping: Chapter 3 summarizes studies on age differences and changes in ways of coping across childhood and adolescence and begins to integrate these age trends. Chapter 4 outlines the neurophysiological developments that likely underlie age changes in stress and coping. Part III, in many ways the heart of the book, outlines a theory of the normative development of coping in the context of developing relationships, especially with caregivers. Chapters 5 through 10 each focus on a specific developmental period and borrow from research on the development of many different forms of regulation to sketch a picture of how these might work together as subsystems that accumulate developmentally to shape age-graded shifts in stress reactions and coping, as they unfold within the interpersonal relationships provided by caregivers.

Part IV, in Chaps. 11 and 12, reviews research on how early adversity, temperament, attachment, parenting, and family stress may not only undermine the development of adaptive coping, but also lead individuals to rely more heavily on maladaptive coping strategies, and reviews evidence that, in combination, these may be the foundations for diverging developmental cascades toward risk or resilience. Chapters in Part IV also consider how the different ways these qualitative

transitions are resolved may place children and adolescents at risk for the development of psychopathology or may allow them to build personal and social resources to cope more constructively with future challenges. We end with a final chapter that summarizes key themes in the book, outlines some suggestions for strategies that may be useful in making progress on the further study of coping, and attempts to articulate three big lessons we learned while writing the book—about what it means to try to understand the development of coping.

Portland, Oregon, USA  
Southport, Queensland, Australia

Ellen A. Skinner  
Melanie J. Zimmer-Gembeck

The Development of Coping  
Stress, Neurophysiology, Social Relationships, and  
Resilience During Childhood and Adolescence

Skinner, E.A.; Zimmer-Gembeck, M.J.

2016, XIX, 336 p. 15 illus., Hardcover

ISBN: 978-3-319-41738-7