Dispositional Coping Styles and Childhood Abuse History Among Japanese Undergraduate Students

Noriko Shikai*,1, Masayo Uji2, Masahiro Shono3, Toshiaki Nagata4 and Toshinori Kitamura2

1Shikai Clinic, Japan
2Department of Clinical Behavioural Sciences (Psychological Medicine) Kumamoto University Graduate School of Medical Sciences, Japan
3Yuge Hospital, Japan
4Kyushu University of Nursing and Social Welfare, Japan

Abstract: Dispositional coping styles in adulthood may be influenced by one’s experiences as a child. Japanese university students were examined in terms of their coping styles and child abuse history. Regression analyses revealed that an emotion-oriented coping style was predicted by neglect and emotional abuse during childhood.

INTRODUCTION

Coping styles have been studied intensively in psychology and psychiatry because they are pivotal in predicting psychological adjustment and the onset of a variety of psychopathologies [1-3]. There have been two perspectives on coping with stressful situations [4, 5]. One perspective views coping as a situationally dependent process whereby people employ a set of skills or responses to manage specific stressful situations. In this model the type of stressor has a consistent and significant effect on the choice of coping response. For example, McCrae [6] reported that positive thinking was employed significantly more frequently when an event was regarded as a challenge than when it was viewed as a loss or threat. Another perspective views coping as part of an individual’s habitual interaction with their usually stressful environment. This form of coping is regarded as dispositional and is thus interpreted as part of the individual’s personality. In support of this theory, researchers have found correlations between coping styles and personality traits [7-9]. Coping skills used in different situations show moderate correlations with dispositional coping styles [10, 11]. Thus, one’s coping behaviour in real-life stressful situations is derived partly from dispositional coping style.

Personality development is thought to be influenced by both genetic (e.g., [12, 13]) and environmental (e.g., [14-16]) factors, and various researchers have sought to identify the early environmental factors that are associated with adult personality traits [16-23]. However, the possible link between these factors and adult dispositional coping styles has not yet been comprehensively examined.

Leitenberg, Gibson, and Novy [24] reported that among undergraduate women, experiencing more types of childhood abuse (sexual abuse, physical abuse, witnessing domestic violence, having an alcoholic parent, and parental rejection) correlated with greater reliance on disengagement methods of coping (wishful thinking, problem avoidance, social withdrawal, and self-criticism). Shapiro and Levensdorosky [25] found that adolescents’ attachment styles mediated the effects of child abuse on fewer active coping strategies. Hyman, Paliwal, and Sinha [26] reported that among people in the early phases of cocaine abstinence, those with a greater variety of childhood abuse experiences were more likely to use avoidance-oriented coping styles. However, because these studies combined physical abuse, emotional abuse, and neglect under the composite internal variable of “child abuse,” it was impossible to examine specific relationships between the different types of child abuse and coping styles.

Among different categories of child abuse, sexual abuse has been frequently studied. The greater the severity of their child sexual abuse, the more likely adults are to use avoidance [27-29], emotive [30], and internalizing [31] coping strategies and the less likely they are to use support seeking [31]. However, abuse severity did not predict approach or avoidance coping strategies in another study [32]. People who were abused verbally as children are more likely to use emotion-oriented coping styles, while people who were physically abused during childhood are less likely to use problem-oriented coping styles [33].

The current study reports on the link between dispositional coping styles and different types of childhood abuse histories among Japanese undergraduate students.

METHOD

Participants

Participants were part of a weekly follow-up study (nine Waves) that examined numerous aspects of mental health among Japanese undergraduate students. These students were from two universities in Kumamoto. On different occasions they were distributed sets of questionnaires that included the Coping Inventory for Stressful Situations (CISS) [34] (Wave 1, n = 389) and the Child Abuse and Trauma Scale (CATS) [35] (Wave 2, n = 397). A varying number of
students missed a class on different Waves. The total number of students who submitted a dataset containing all variables used in the present analyses was 364. These students consisted of 70 men and 294 women, with a mean age of 19.0 years (SD 1.3) and an age range between 18 and 35. Men (M = 19.5, SD = 2.3) were slightly but significantly (t = 2.2 p < .05) older than women (M = 18.8, SD = 0.9).

Measurements

Coping Inventory for Stressful Situations (CISS): The CISS is a self-report measure of coping patterns. It consists of 48 items rated on a five-point scale (0 = not at all, 4 = very much). There are three subcategories – task-oriented coping, emotion-oriented coping, and avoidance-oriented coping. Task-oriented coping is usually adaptive and involves outlining priorities, determining a course of action, and following through with the action involved [2]. Emotion-oriented coping involves blaming oneself for the situation or event and becoming preoccupied about it. Avoidance-oriented coping involves participating in other activities as a way of ignoring the problem. A higher score on a CISS subcategory indicates greater use of that coping style. Furukawa, Suzuki, Saito, and Hamanaka [36] have provided a Japanese translation of the measure, and have demonstrated its reliability and validity. Mean values were substituted for missing items when at least 39 out of 48 CISS items were answered. The CISS was administered on the first Wave.

Child Abuse and Trauma Scale (CATS): The CATS is a self-report measure of the experiences of sexual abuse, neglect, and punishment (physical abuse). It consists of 38 items on a 5-point scale (0 = never, 4 = always). Sanders and Becker-Lausen [35] have suggested three subcategories: sexual abuse (6 items), neglect (14 items), and punishment (6 items). In the present population, we performed an exploratory factor analysis with Promax rotation. The number of items was determined via the scree test and interpretability of the data. After confirming the factor structure of the Japanese version of the CATS, we calculated the subscale scores by adding the scores of items belonging to each factor [37]. The Japanese version of the CATS consists of five subscales: (1) neglect and emotional abuse (14 items, e.g., “Did your parents insult you or call you names?”, “Did your parents ever verbally lash out at you when you did not expect it?”), and “Did your parents ridicule you?”), (2) punishment and scolding (10 items, e.g., “Did your parents yell at you?”), “How often did your parents get really angry with you?”), and “Did your parents blame you for things you didn’t do?”), (3) sexual maltreatment, (6 items, e.g., “Did you engage in any sexual activity with an adult?”), (4) physical abuse (6 items, e.g., “Did you ever have traumatic sexual experiences?”), and “When either of your parents was intoxicated, were you ever afraid of being sexually mistreated?”), (4) authoritarianism (5 items, e.g., “When you were punished, did you feel ‘the punishment fit the crime’?”), “When you were punished, did you feel the punishment was deserved?”), and “When you were punished, did you understand the reason you were punished?”)), and (5) marital disharmony (3 items, e.g., “To what extent did either of your parents drink heavily or abuse drugs?”), “Did your parents verbally abuse each other?”), and “Were your parents unhappy with each other?”)). Mean values were substituted for missing items when at least 31 out of the 38 items were answered.

Procedure

A class lecturer distributed a set of questionnaires to the university students every week. The questionnaires were returned immediately upon completion during the class. An oral announcement that the students had a right to refrain from participating was made before distributing the questionnaires and was written on the face sheet. It was also announced that refraining would not result in any academic disadvantages. Anonymity was assured, but due to the necessity of matching students to questionnaires they filled out on different occasions, students were requested to create a unique “nickname” and use it whenever they answered a questionnaire. The questionnaire survey was repeated weekly. This study project was approved by the Ethical Committee of the Kumamoto University Graduate School of Medical Sciences (equivalent to an Institutional Review Board).

Statistical Analyses

After obtaining basic properties of all the variables used, we correlated all variables. In order to examine the predictive power of the child abuse experience for each of the CISS subcategories, we performed a series of regression analyses. Each of the CISS subcategories was regressed on (1) age and gender, and (2) a set of the CATS scores. In addition, we forced the interaction terms of gender and each CATS score into the regression formula.

All statistical analyses were conducted using the Statistical Package for Social Science (SPSS) version 13.0.

RESULTS

In bivariate analyses, all three CISS subcategory scores were correlated with each other (Table 1). Some of the five child abuse scores were also correlated significantly with each other. Emotion-oriented coping in women was correlated with neglect and emotional abuse and punishment and scolding. Women were significantly more likely to use emotion-oriented and avoidance-oriented coping than men (Table 1).

Regression analyses showed that both emotion-oriented and avoidance-oriented coping were predicted by female gender. After controlling for age and gender, only emotion-oriented coping was predicted by childhood abuse history, particularly neglect and emotional abuse (Table 2). The interaction terms between gender and each of the CATS subcategories did not improve prediction of the CISS scores.

DISCUSSION

The results of this study suggest that childhood neglect is linked to the tendency for undergraduate female students to use emotion-oriented coping. The absence of links between coping styles and other types of child abuse history may be due to the lower prevalence of some forms of maltreatment, particularly sexual abuse. This may be because we examined a non-clinical student population in which child sexual abuse was relatively infrequent, or because the participating students avoided answering uncomfortable questions about their pasts.

This study provides an understanding about the link between adult emotion-oriented coping style and childhood neglect. In several of the previous studies, it is reported that
The emotion-oriented coping style is related to psychological maladjustment [1-3]. In this vain, the understanding about these two factors may be very important, and it may be of clinical importance to pay attention carefully to the early life experiences among patients whose coping style is emotion-oriented. Behavioral approach to "rectify" and make them realize their coping styles is no doubt recommendable but at the same time the thorough scrutiny of their childhood environment may reveal the hidden reasons why they adopt such maladaptive coping styles. Psychotherapeutic intervention into the link between childhood abuse experiences and dispositional coping styles may further the patients' enduring psychological well-being in addition to the current betterment of the coping in an everyday life.

A limitation of this study is the retrospective nature of its assessment methods. While validity of retrospective reports on childhood experiences has been a focus of several debates [38-43], retrospective recall has been shown to correspond well with collateral reports and available archival data [44-47].

Another drawback of this study is its lack of information on which parent was abusive, a problem that arises because the CATS asks questions about "parents" rather than about each parent individually. Gender of the parents has been shown to influence the effects of parental physical and emotional abuse on adolescent-onset mood and anxiety disorders [48]. Thus, the present research should be replicated using abuse-related data about the father and mother individually.

Table 1. Basic Properties of and Correlations Between All the Variables Used in This Study for Men and Women

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Task-Oriented Coping</td>
<td>---</td>
<td>.26*</td>
<td>.52***</td>
<td>.21</td>
<td>.26*</td>
<td>.18</td>
<td>.13</td>
<td>.05</td>
<td>.19</td>
</tr>
<tr>
<td>2 Emotion-Oriented Coping</td>
<td>.17**</td>
<td>---</td>
<td>.39**</td>
<td>-.09</td>
<td>.17</td>
<td>.02</td>
<td>.18</td>
<td>-.09</td>
<td>.07</td>
</tr>
<tr>
<td>3 Avoidance-Oriented Coping</td>
<td>.34***</td>
<td>.26***</td>
<td>---</td>
<td>.15</td>
<td>.30*</td>
<td>.25*</td>
<td>.24*</td>
<td>-.00</td>
<td>.22</td>
</tr>
<tr>
<td>4 Age</td>
<td>.09</td>
<td>-.03</td>
<td>.06</td>
<td>---</td>
<td>.21</td>
<td>.29*</td>
<td>-.09</td>
<td>.01</td>
<td>.09</td>
</tr>
<tr>
<td>5 Neglect and Emotional Abuse</td>
<td>.09</td>
<td>.33***</td>
<td>.05</td>
<td>.01</td>
<td>---</td>
<td>.81***</td>
<td>.32**</td>
<td>.13</td>
<td>.66***</td>
</tr>
<tr>
<td>6 Punishment and Scolding</td>
<td>.09</td>
<td>.23***</td>
<td>.05</td>
<td>.14*</td>
<td>.71***</td>
<td>---</td>
<td>.33**</td>
<td>.14</td>
<td>.60***</td>
</tr>
<tr>
<td>7 Sexual Maltreatment</td>
<td>-.01</td>
<td>.13*</td>
<td>-.01</td>
<td>-.04</td>
<td>.28***</td>
<td>.30***</td>
<td>---</td>
<td>-.01</td>
<td>.43***</td>
</tr>
<tr>
<td>8 Authoritarianism</td>
<td>-.15*</td>
<td>.04</td>
<td>.01</td>
<td>.00</td>
<td>.35***</td>
<td>.22***</td>
<td>.11</td>
<td>---</td>
<td>.31**</td>
</tr>
<tr>
<td>9 Marital Disharmony</td>
<td>.05</td>
<td>.10</td>
<td>.07</td>
<td>.01</td>
<td>.49***</td>
<td>.48***</td>
<td>.13*</td>
<td>.31***</td>
<td>---</td>
</tr>
<tr>
<td>Mean a</td>
<td>27.7</td>
<td>17.1</td>
<td>22.5</td>
<td>19.5</td>
<td>9.2</td>
<td>6.4</td>
<td>0.6</td>
<td>7.8</td>
<td>1.2</td>
</tr>
<tr>
<td>S.D. a</td>
<td>27.8</td>
<td>21.4</td>
<td>28.2</td>
<td>18.8</td>
<td>11.1</td>
<td>6.3</td>
<td>0.2</td>
<td>7.3</td>
<td>1.5</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01; *** p < .001; ns, not significant; Figures over the orthogonal apply to male students, figures below the orthogonal to female students.

Table 2. Regression of CISS Subscale Scores by Age, CATS Scores, and PBI Scores

<table>
<thead>
<tr>
<th></th>
<th>Task-Oriented Coping</th>
<th>Emotion-Oriented Coping</th>
<th>Avoidance-Oriented Coping</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R² Increase</td>
<td>Standardised Beta</td>
<td>R² Increase</td>
</tr>
<tr>
<td>Step 1:</td>
<td>(.015 (2, 361)</td>
<td>.017 (2, 361)</td>
<td>**</td>
</tr>
<tr>
<td>Age</td>
<td>.117</td>
<td>.060</td>
<td>.082</td>
</tr>
<tr>
<td>Gender</td>
<td>.001</td>
<td>.121*</td>
<td>.223***</td>
</tr>
<tr>
<td>Step 2:</td>
<td>(.038 (5, 356)</td>
<td>.104 (5, 356)</td>
<td>***</td>
</tr>
<tr>
<td>Neglect and Emotional Abuse</td>
<td>.158</td>
<td>.372***</td>
<td>.066</td>
</tr>
<tr>
<td>Punishment and Scolding</td>
<td>-.023</td>
<td>-.031</td>
<td>-.024</td>
</tr>
<tr>
<td>Sexual Maltreatment</td>
<td>.005</td>
<td>.049</td>
<td>.043</td>
</tr>
<tr>
<td>Authoritarianism</td>
<td>-.168**</td>
<td>-.076</td>
<td>-.036</td>
</tr>
<tr>
<td>Marital Disharmony</td>
<td>.049</td>
<td>-.071</td>
<td>.075</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01; *** p < .001; df (v1, v2) in brackets.
It is also important to examine a larger population that includes both non-clinical and clinical subjects with a wide age range, using psychopathology measurements in addition to those used here. The link between childhood neglect and adult emotion-oriented coping may be mediated by yet another attribute. Personality traits such as neuroticism and low self-directedness may be possible candidates.

CONCLUSION

Despite these drawbacks, this study suggests that adult dispositional coping styles may be in part influenced by childhood abuse history, particularly among female students. Further studies may clarify the links between abuse history and the onset of psychopathology.

REFERENCES


The Open Family Studies Journal, 2008, Volume 1 79


