"Approach" and "Avoidance" Coping and PTSD Symptoms in Inner-City Youth

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This study examined the function of approach and avoidant coping on the relations between exposure to violence and post-traumatic stress disorder (PTSD) symptoms. The sample included seventy African-American, inner-city children (ages eleven to fourteen). Tests of moderating effects investigated the mechanism of two avoidant coping strategies, cognitive distraction and behavioral avoidance. Cognitive distraction was found to moderate the level of violence exposure such that, as violence increased, the use of cognitive distraction was related to an increased frequency of cognitive arousal. Behavioral avoidance moderated violence such that, under higher exposure to violence, the lowered use of behavioral avoidance was related to an increased frequency of behavioral arousal. Tests of moderating effects examined the function of two approach strategies, problem-solving and social support. Neither strategy showed significant effects. This study provided a first-step in the examination of coping within inner-city children.

There has been an increased recognition of the emotional and behavioral difficulties associated with children who have been exposed to chronic violence (Attar, Guerra, and Tolan, 1994). There has been a paucity of literature to date focused on how children cope with those chronic and pervasive stressors. Researchers have maintained that a systematic examination of the process and outcomes of coping within minority, inner-city children has been greatly needed, particularly in regard to those children who have been exposed to ongoing violence and trauma (Fletcher, 1996; Gonzales and Kim, 1997; Tolan, Guerra, and Montaini-Klovdahl, 1997).

Children exposed to community violence have often been found to suffer negative psychological sequelae. An increased risk of negative outcomes has been associated with children who have experienced repeated and chronic exposure to traumatic stressors (Garmezy, 1987). One of the most frequent difficulties reported by children who faced persistent community violence has been the development of post-traumatic stress disorder (PTSD) symptoms (e.g., Pynoos and Nader, 1988; Singer, Anglin, Song, and Lunghofer, 1995; Warner and Weist, 1996). Fitzpatrick and Boldizar (1993) found in nearly 200 children and adolescents that 82 percent reported PTSD re-experiencing symptoms, 41 percent reported PTSD avoidance symptoms, and 54 percent reported PTSD physiological arousal symptoms. Children who manifest PTSD symptoms may show impaired emotional functioning, difficulty with emotional regulation, and greater emotional lability (Armsworth and Holaday, 1993). Fletcher (1996) proposed that early emotional responses to stress in children with PTSD are likely to parallel their later responses to affectively laden situations. Therefore, if responses to stress are
predictive of later adjustment, then coping may be an ideal domain in which to distinguish resilient and at-risk adolescents, and to target prevention and intervention efforts. Few studies have examined children’s coping with emotional distress in children living in environments of high-risk neighborhoods. Authors have urged that an investigation of the coping process in inner-city children, particularly in regard to emotional stressors, would be critical to our understanding of the development and prevention of emotional disturbances (e.g., Barbarin, 1993).

In an attempt to discern the process of coping, several theoretical models of stress and coping have emerged. Coping has been suggested to have direct effects on child adjustment. Rudolph, Denning, and Weisz (1995), reviewed children’s coping in medical settings, and they posited that coping may directly effect the level of adjustment in the child. However, they contended that the path between coping and outcome may also be mediated by a number of individual (attributional style, self-esteem, problem solving orientation), family (social support, family functioning), and situational (controllable, uncontrollable) characteristics. Other researchers have asserted that coping may moderate the effect of the stressor as manifested in the adjustment of the child (e.g., Tolan et al., 1997). Rogers and Holmbeck (1997) have defined a moderator as “a variable (which) interacts with a predictor variable such that the impact of the predictor on the outcome varies depending on the level of the moderator” (p. 126). Tolan et al. (1997), in their model of coping among inner-city youth, have posited that coping strategies may serve to moderate the stressor experienced, thereby impacting the outcome. In this instance, if coping acted as a moderator, then coping would interact with the predictor variable (exposure to violence), and differentially impact the child’s adjustment measure (PTSD symptoms).

If coping acts as a moderator of stress, this may inform our understanding of the mechanism by which stressors are linked to outcomes. Significant moderator effects would provide support for a contextual model in which coping is seen as a product of the person-environment relationship (Aldwin, 1994; Folkman, 1991), as opposed to the notion that coping outcomes are primarily a function of one’s personality. As Aldwin explained, when coping serves as a moderator, “coping has an effect on outcomes only to the extent that coping moderates the effect of stress on the outcome” (p. 139). However, more empirical support is needed in the literature to demonstrate the function of coping within inner-city children who are exposed to violence.

The purpose of this study was to examine the role of coping in the link between exposure to violence and post-traumatic stress disorder symptoms in children living in an inner-city environment. Previous research has investigated the outcomes associated with the use of approach and avoidant coping strategies in children. Typically, approach coping strategies have been related to positive emotional and behavioral functioning, whereas avoidant strategies have been associated with negative outcomes (Holahan, Moos, and Schaefer, 1996; Sandler, Wolchik, MacKinnon, Ayers, and Roosa, 1997; Spaccarelli, 1994). More specifically, studies have indicated that positive outcomes were achieved when approach coping strategies were used in the face of controllable stressors, and when avoidant coping strategies were used to manage stressors.