

STRESS, COPING STRATEGIES AND SOCIAL SUPPORT AMONGST GRADE 11 STUDENTS IN HISTORICALLY DISADVANTAGED SCHOOLS

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The logo of the University of the Western Cape, featuring a classical building with columns and a pediment.
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KEY WORDS

***STRESS**

***COPING**

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***SOCIAL SUPPORT**

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***ADOLESCENCE**

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***HIGH SCHOOLS**

DECLARATION

The author hereby declares that the following thesis, unless specifically indicated to the contrary in this text, is her own work.



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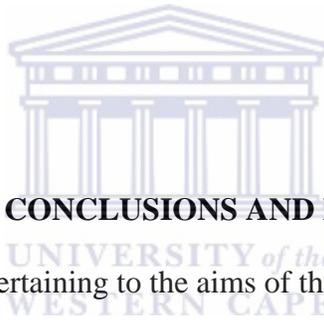


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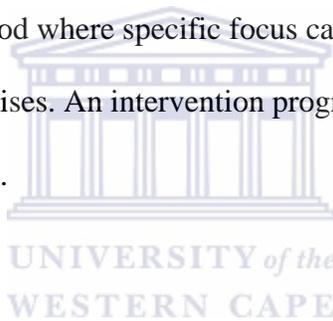
ABSTRACT

Adolescence can be viewed as a crucial part of the continuous life cycle. Coping plays an important factor which prepares the individual for the future, where he or she will have many new experiences and responsibilities thrust upon him or her. The aim of this research was to investigate the stress level, coping strategies and social support among grade 11 students. The rationale of the study was that every year adolescence grapples with the issue pertaining to stress and it requires research as to how adolescence cope with their lives. Richard Lazarus' stress and coping model was used as the theoretical framework. This was a quantitative research study where questionnaires were distributed among 210 grade 11 students. The Adolescent Perceived Events Scale (APES) was used to measure stress and the mean scores indicated that females (33.98) scored slightly higher than the males (31.72). This could be due to females responding to certain events differently. However, there was no significant difference found between the stress levels of males and females. The Ways of Coping Questionnaire (WCQ) measured coping strategies and the findings indicated that the mean scores of social support (17.57) are slightly higher than the characteristics of depression (17.38). The correlation coefficient of -0.51 can be interpreted as a slight-almost negligible relationship. The direction of the relationship is negative which can be interpreted as the higher the social support level, the lower scores on depression. The Perceived Social Support Scale (PSS) consisting of the Perceived Support from friends subscale (PSS-Fr) and the Perceived Support from family subscale (PSS-Fa) was used to measure social support. The mean scores indicated that the females obtained a slightly higher score (17.68) than the males (17.33) but there was no

significant difference found between the level of social support of males and females.

The scores indicated that females and males have more or less the same amount of social support. Recommendations were made as to address the issue of response-bias, information may be elicited by means of parents being more involve in the young person's life through being educated in identifying the signs that their child is not coping and assisting them to deal with daily stressors through attending workshops.

Schools/teachers can assist parents with these workshops where both the parent and child can attend. Schools/teachers can also make provision to educate the young person through having a life skills period where specific focus can be on study skills, nutritional and healthy eating habits, exercises. An intervention program can also be implemented and form part of the curriculum.



CHAPTER 1

INTRODUCTION

1.1 Background

Research studies indicate that nobody escapes stress entirely and sooner or later all fall prey to it. It seems important therefore to acquire knowledge of stress which provides one with a powerful tool, along with adequate stress management skills.

Stress is the usual result of any rapid change and rapid change is what adolescence is all about. Stress is characterized by feelings of tension, frustration, worry, sadness and withdrawal that commence from a few hours to a few days. The majority of young people face the stress of negative life events, find internal or external resources, cope and move on, but for others, the events pile up and the stressors are too great.

According to Schlebusch (2000) stressful experiences alone do not cause stress. It is particularly one's perception of the experiences that does. There are always different ways of looking at the same problem. Changing one's perception can help one to change positively, because what you see and the tool one uses to see it with (perception) will then be more in harmony. In altering one's perception, one effectively changes the negative consequences of the stressor on you. The reason is that one's perception of a stressor has a powerful influence on how one interprets and reacts to the stress it causes in one's life. One can change the harmful effects that stress has on you by changing the way you see the stress.

While the word 'stress' has been used to describe human behaviour for a long time, the concept has only recently been more refined in psychological circles. Contributions from the sciences of physics and engineering have assisted in developing a better grasp of stress and its current use in psychology. Schlebusch (2000) believes that stress originally meant a force. Three terms are used to define this force from this original perspective namely, stress, strain and load. These concepts have been useful in understanding stress from a psychological perspective.

Put differently, stress is your physiological, psychological and behavioural reactions when you attempt to adapt and adjust to internal and or external demands or pressures that you cannot cope with. From a psychological point of view, Schlebusch (2000, p. 4) viewed stress as “any action or situation that places special physical or psychological demands on you that upset your equilibrium”.

According to Tyrer (1980) stress has its good points as well as its bad ones and he views life without stress, not as life, but death. He believes that stress is not something outside us for which we can blame others. It comes from inside, though we can identify individuals, events and places as too partake in a part to play in our reactions, these are not the only causes. To live with stress effectively, we must change our circumstances or ourselves.

Tyrer (1980) regards stress as something which puts one under increased pressure and forces one to act and think more quickly or intensely than one would like.

Young people need to learn to cope in a variety of settings, including school, home, peer groups and with a range of life problems such as divorce and examination.

1.2 Statement of the problem

More and more stress has become a major problem entering the new millennium. Some adolescence become overloaded with stress. When it happens, inadequately managed stress can lead to withdrawal or poor coping skills such as drugs and or alcohol use. The problem at hand is to search for answers as to whether there is a significant difference between the stress levels of males and females focusing on grade 11 students in historically disadvantage schools. Attention will also be turned to adolescence coping strategies as well as their social support structure.

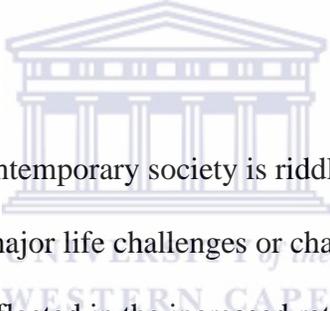
1.3 Aims and objectives of study

The aims of this study were to understand stress, coping strategies and social support amongst grade 11 students.

The objectives of the study were to:

1. Determine if a significant difference exist between stress levels of males and females.
2. Explore whether a significant relationship exist between the characteristics of depression and social support.
3. Explore whether a significant difference exist between the social support levels of males and females.

1.4 Rationale of the study



Life for most adolescence in contemporary society is riddled with stress. The majority of youth experience one or more major life challenges or changes during the adolescence years. The impact of stress is reflected in the increased rates of emotional and behavior problems during adolescence. Depression, alcohol abuse, delinquency and school problems have all been associated with the stresses of adolescence and the feelings of hopelessness and frustration that some adolescence experience. Although the experience of stress at some point during the adolescence years is common, most youth emerge through stressful periods without any long-term negative effects. Some adolescence are at greater risk for problems resulting from stress.

The rationale of the present study is that every year adolescence grapple with the issue pertaining to stress. Reporters speculate about the causes. This issue pertaining to stress requires research as to how adolescence cope with their lives.

In addition, there is a need to prevent tragedies such as suicide from occurring because of stress. Not all worries are so overwhelming that they lead to suicide. How adolescence cope with their concerns can provide clues for suicide prevention and lifestyle enhancement. When youth are unable to cope effectively with worries, their behavior can have an adverse effect on their lives and also on their families and the broader communities.



1.5 Overview of chapters

In Chapter Two different stress models are discuss (for example, environmental model, medical model and psychological model). It also includes an overview about coping, social support, as well as intervention.

Chapter Three focuses on the measuring instruments and the methodology employed in the current study.

Chapter Four presents a report on the results of the study.

In Chapter Five the results are discuss. Recommendations are made in the light of the obtained results and the limitations of the current study.



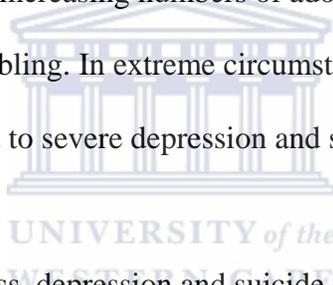
CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

In this chapter, a conceptualization of stress will be provided by reviewing three models of stress. Focus will also be on coping strategies and social support structures.

Schlebusch (2000) believe that increasing numbers of adolescents have concerns that may be both overwhelming and disabling. In extreme circumstances, the problems that weigh on the minds of youth may lead to severe depression and suicide.



A study named Adolescent stress, depression and suicide was conducted where focus was on ‘Teens in distress series: Adolescent stress and depression’ in Minnesota provided information about the prevalence of adolescent stress and depression. The stressful events youngsters experience, describe how they deal with stress, indicate the risk factors for young people vulnerable to stress, depression and self destructive behavior.

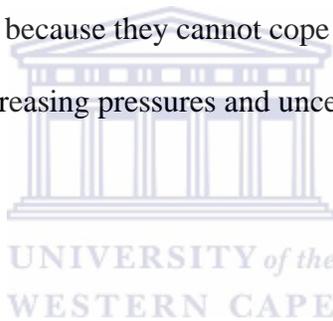
Adults need to be familiar with the family, biological and personality factors that predispose a youngster to depression. They can learn to recognize the kinds of psychological, behavioral and social events that often signal trouble.

According to Swimmer (1996), when adolescents are exposed to stress because of poor family relationships and they have poor coping mechanisms, they may be more predisposed to exhibiting depressive symptoms leading to an increase risk of suicide.

Some stress may be beneficial. For example, although some research has suggested that stress may be a risk factor for suicide, a 2003 study found a higher risk for suicide in women reporting both low and very high stress (www.aabt.org). Those with moderate stress levels, however, had the lowest risk.

Youth who choose death do so, because they cannot cope with the problems at a time when they are vulnerable to increasing pressures and uncertainties.

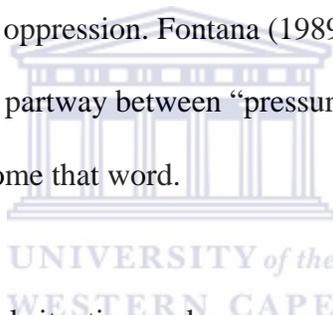
2.1.1 The history of stress



According to Spielberger (1979), the term stress derived from Latin which was first used in English during the 17th Century to describe distress, oppression, hardship and adversity. During the 18th and 19th Century, the meaning of stress shifted to denote a force, pressure or strong influence acting upon a physical object or person. This definition included that an external force induced a 'strain' in an object which attempted to maintain its integrity by resisting the distorting power of this force'. Therefore, stress can be viewed as causing strain.

According to Fontana (1989) the word stress seemed to have originated from the old French word *destresse*, which meant to be placed under narrowness or oppression (old French *estresse*). In its Middle English form it was therefore 'distress' over the centuries the 'di' sometimes got lost through slurring, leaving it with two words 'stress' and 'distress' which carry different meanings. The first one can be viewed as ambivalent and the second one always indicating something unpleasant.

Stress has to do with constriction or oppression of some kind and 'distress' the state of being under this constriction or oppression. Fontana (1989) argued that Modern English seemed to need a word that lies partway between "pressure" and "emphasis" and with the course of time "stress" has become that word.



When people interpret a stressful situation as dangerous or threatening, they experience feelings of tension, apprehension and worry. They tend to undergo a range of physiological and behavioral changes resulting from the activation or arousal of the autonomic nervous system. The intensity of the reaction is proportional to the magnitude of the perceived danger or threat.

Knowledge and awareness are the first steps in coping with stress. Before looking at ways to reduce the stress in your life, one must have a clear idea of what stress is and how much stress one suffers from.

2.1.2 Definition of stress

Stress means different things to different people and what one individual regards as stressful may not necessarily be experienced as stressful by another person.

According to Cox (1978) the concept of stress is elusive because it is poorly defined and there is no single agreed definition in existence. It is a concept, which is familiar to both layman and professional, and it is understood by all when used in a general context but by very few when a more precise account is required. The fields of psychology, ergonomics, psychiatry, internal medicine, physiology and pharmacology, sociology and anthropology all devote substantial resources to the study of stress. The types of phenomena, which they study, as well as the interests they expressed in their work varied. Research methods have varied similarly, reflecting different academic backgrounds and different interests.

McNamara (2000) refers to stress as the internal state of the individual, an external event, or the interaction between a person and his or her environment. Looking at stress as a process represents a useful framework which consists of environmental (stimulus), psychological (transactional) and physiological (health related) variables and processes. Stress can be conceptualized within these three main models (Cox, 1978).

2.2 Environmental model of stress

This model treats stress as an independent factor which arises from characteristics of disturbing environments. Stress is viewed as the load, which is placed upon an individual. Strain is the outcome when deformation (spoil the form or appearance of; put out of shape) occurs. This model originates an 'elastic limit' to an individual where a certain degree of strain is tolerated allowing the individual to return to homeostasis. If the individual is subjected to an intolerable amount of stress, psychological and physical damage may occur.

Stress has been variously conceptualized as an environmental stimulus (Zegans, 1984), as the organism's response to external stimuli (Selye, 1956), while others have emphasized the interaction between the environment and response (Lazarus and Folkman, 1984). The confusion surrounding the concept of stress may partly be explained by the fact that it has evolved from several disciplines.

Leventhal and Tomarken (1987) speak of the multi-leveled nature of stress and conclude that stress may be conceptualized and described at the social, psychological and biological level.

As already mentioned, the concept of stress is difficult to define and debates have been keen regarding its conceptualization and operationalisation. Stress refers to physiological and emotional conditions generally and specifically in humans and animals (Robinson, 1999). Once stress is experienced "as a human and animal phenomenon, it results in intense and distressing experience and appears to be of tremendous influence in

behaviour” (Lazarus, 1966, p. 2). Adolescence who are faced with normative and non-normative stressful life events may find their experiences “intense and distressing”, if they do not have the adequate coping strategies to deal with stressful events it may impact negatively on their emotional adjustment and could therefore be of “tremendous influence in their behaviour”.

Over the past seventy years, the concept of stress has undergone considerable changes in conceptualization. The move from a simplistic biological construct to a more complex biopsychosocial construct is illustrated by the three contemporary approaches to stress; namely the response-based perspective, the stimulus-based view and the transactional approach.

Folkman (1997) believes that stress has three major definitions that are widely used namely, a stimulus-based definition, response-based definition and transactional definition. The stimulus-based definition of stress focus on stress consisting of the environmental demands on the individual. Demands includes major life event affecting a number of people (e.g. disasters, war, etc.), major events affecting a few people (e.g. divorce) and daily hassles (e.g. exams).

The response-based definition posits that stress is the biological and psychological response of the individual to environmental demands. This definition has been used widely in the understanding of the health-related effects of stress. Stress is viewed as the

reaction of the body to daily events and to how one perceives these events. An example is where an individual might perceive an assignment as an opportunity to excel while another perceives this as an overwhelming task.

The transactional definition views stress as a relationship and has received widespread support. Lazarus and Folkman (1984) believed that an individual's perception or appraisal of the experienced event, whether discrete or chronic, is critical in determining how the event impacts on him and ultimately how he will cope with that event.

The transactional definition views stress as a relationship between the person and the environment that is appraised by the person as exceeding their resources and endangering the individual's well-being. The strength of the transactional model is that it views stress as a process that occurs internally and externally, consciously and unconsciously.

Phenomenologically, the effects of stress vary from person to person, adolescent to adolescent. An event, such as living with only one parent, may be perceived as minor and positive by an adolescent but major and extremely negative by another. This viewpoint is also supported by Richard Lazarus and Launier (1978) and the definition is based upon the person-environment interaction model of human action and reaction. It takes account of the interaction between the organism and the environment, the situational variables, the person's characteristics and the individual's appraisal of the situation. The person's perception of the environmental demand and their perceived capability to respond to the

demand will determine the effect of the stressor. This definition is most appropriate and will be applied in this specific paper.

Schlebusch (2000) believe that nothing is stressful unless one interprets it as such. Stress is a relationship between you and your environment when you perceive and evaluate your environment as a threat to your well-being. This normally happens when the environmental demands exceed one's coping resources. A psychological viewpoint is that stress can be viewed as any action or situation that places special physical or psychological demands on an individual that upsets one's equilibrium. The central position in this process is the perception with evaluation or appraisal.

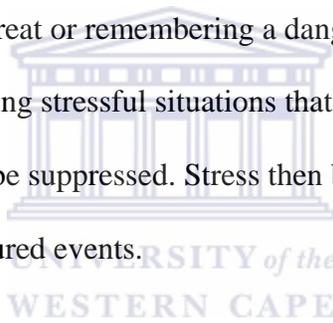
Schlebusch (2000) state the three types of appraisal, which are "primary appraisal, (where one evaluates the importance of the situation (stressor) for one's well-being), secondary appraisal (occurs when one feels that he/she can do something about it) and re-appraisal (where there are changes in one's evaluation as a result of changes in the situation)" (p.4). However, these aspects will be discussed in depth at a later stage.

A stressor normally brings on stress. Schlebusch (2000), views a stressor as any event, situation, person or object that one perceive as stressful, one have a difficulty in coping with and that can result in negative stress.

Different people may respond differently to stress but a sure fact of life is that stressors form part of everyone's existence.

According to Schlebusch (2000) people can experience internal and external stressors. Internal stressors can be physical (for example, infections) or psychological (for example, intense worry about an event that may or may not occur). External stressors include adverse physical conditions such as pain, hot or cold temperatures etc.

Stressors can also be defined as short-term (acute) or long-term (chronic). Common acute stressors include noise (which can trigger a stress response even during sleep, isolation, infection, high technology effects (for example, playing video games frequently ringing mobile phones), imagining a threat or remembering a dangerous event. Chronic stress is where modern life poses on-going stressful situations that are not short-lived and the urge to act (to fight or to flee) must be suppressed. Stress then becomes chronic which includes on-going highly pressured events.



In prehistoric times, the physical changes in response to stress were an essential adaptation for meeting natural threats. Even in the modern world, the stress response can be an asset for raising levels of performance during critical events such as a sport activity, in situations of actual danger or crisis. If stress becomes persistent and low-level, however, all parts of the body's stress apparatus (the brain, heart, lungs, vessels and muscles) become chronically over-or under-activated. This may produce physical or psychological damage over time. Acute stress can also be harmful in certain situations.

2.2.1 Memory, concentration and learning

Stress affects the brain, particularly memory, but the effects differ significantly depending on whether the stress is acute or chronic.

Effects of acute stress on memory and concentration. Studies indicate that the immediate effect of acute stress impairs short-term memory, particularly verbal memory. On the positive side high levels of stress hormone during acute stress have been associated with enhanced memory storage and greater concentration on immediate events.

Effect of chronic stress on memory. If stress becomes chronic, sufferers often experience loss of concentration at work and at home and they may become inefficient and accident-prone. In children, the physiologic responses to chronic stress can clearly inhibit learning.

The process of learning to control stress is life-long and will not only contribute to better health, but a greater ability to succeed in one's own agenda.

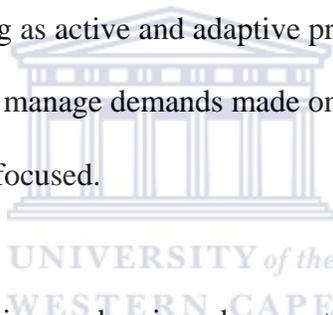
Past experiences, anticipation and imagination can also be powerful stressor. An example is that one can complain of anxiety when he/she perceives a future event to be stressful. This refers to anticipatory anxiety.

Anticipation of a future event and the consequences can also stir up stress (for example, writing exams). One might worry about a past event (for example, especially something

one can now do little about) that makes one feel stressed or about something that does not matter or cannot be changed. In perceiving a situation as controllable, it forms an essential part of one's sense of competence and coping. When one perceives the situation as uncontrollable, it contributes to stress because one feels that he/she cannot cope.

The way one deals with stress is referred to as coping. Lazarus (1991) defines coping as 'the cognitive and behavioral efforts to manage specific or internal demands (and conflicts between them) that are appraised as taxing or exceeding the resources of a person'. (p.112)

Schlebusch (2000) views coping as active and adaptive processes. It is the constantly changing efforts one employ to manage demands made on an individual. Coping can be problem-focused or emotional-focused.



Problem-focused coping strategies can be viewed as an attempt to control a stressful situation, locating its causes and then changing or removing them. This is viewed as primary control where one adjusts the situation to help one cope with stress.

Emotional-focused coping strategies are one's actions which serve to decrease negative emotions. These attempts at secondary control aim to reduce the increased arousal caused by the stress and to regulate one's emotions caused by stress.

2.3 Medical model

Stress, according to the medical model, is defined as an outcome variable emphasizing the responses of the individual. Selye (1956) and Cox and Griffiths (1995) describe stress as a general physiological response of the body to any demand made upon it. The authors emphasized the 'General Adaptation Syndrome,' which consist of three stages namely the alarm, resistance and adaptation or exhaustion stage. They also believed that stored energy supplies were mobilized by physiological responses which protected the individual in the short term but were harmful if prolonged. There are individual differences in patterns of physiological reactions to stress which involve heart rate, respiratory rate and galvanic skin response. Different types of stress draw out different types of physiological response. The type of coping strategy employed will affect the pattern of physiological responses. Active coping results in catecholamine release (for example, adrenalin) and sympathetic nervous system activation and passive withdrawal result in the production of stress hormones such as corticosteroids. Situations that inspire anxiety have been linked to increased adrenaline release and those which produce aggression appear to stimulate the release of noradrenaline.

2.4 Psychological model

Stress is commonly viewed as a relationship between the events which happen to us, our attitudes to them and the way our body reacts. The assumption is that there's an

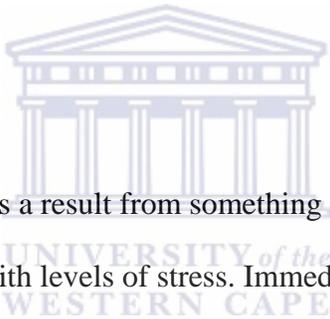
interactive relationship between us and our environment. Our environment has an effect on us, we have an effect on our environment and we can determine the effect the environment will have on us through our interpretations of the world we live in. Lazarus (1966) defined stress as ‘a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being’ (p.6). Lazarus believed that two fundamental processes mediate this relationship namely those of cognitive appraisal and coping. Cognitive appraisal consists of two types of appraisal namely primary and secondary appraisal. Their function is to enquire whether the individual’s well-being is at risk and if it is, what resources are available to deal with this risk. Primary appraisal may lead the individual to evaluate the situation as harm, loss, threat, challenge or benign. Secondary appraisal takes into account access to coping options, their appropriateness and chances of success. Frequently it occurs for individuals to re-appraise the situation as it unfolds and they receive more information.

Tyrer (1980) does not define stress by its causes, but by a person’s reaction to the cause, technically called the stressor. The mind and the body are closely intertwined and stress can show itself in the body’s reactions without the conscious mind being aware.

According to Tyrer (1980) the best definition of stress is that “it is the reaction of the mind and body to change’ (p.5). The definition is very broad and takes in a large range of reactions that many people do not find unpleasant. The question at hand is how we adapt to the change when it takes place. If we adapt, then the stress is hardly noticed but if we

can't, the stress becomes distress. In persisting, it breaks down mental and physical health. The definition includes all kinds of change, pleasant, unpleasant, exciting and boring. People react differently to change because they have different personalities and different ways of coping. We need to know what goes on in our minds and bodies when we are under stress and to decide when the stress is helpful and when it is harmful. The focus of stress is often the mind rather than the body. There are many ways in which stress can show itself. It is difficult to adjust to severe changes if they tend to catch one unprepared.

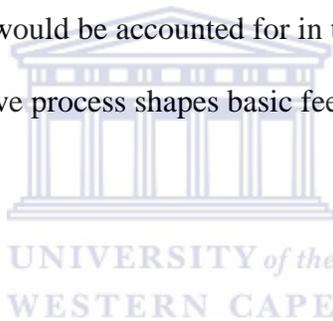
2.5 Stress and emotion



Hart (1992) views stress often as a result from something that is beyond one's control. Control has a great deal to do with levels of stress. Immediate and severe stress is when someone dies suddenly. One is forced to adjust to a change, which he/she might never have contemplated. Adjustment is painful and difficult but one usually adapts in the end. Sometimes, if the task seems too much, one tends to take the easy way out. Although at one level one accepts the loss, at an emotional level, one pretends it has not happened. The distress and unhappiness that one should be feeling is not showing at all. Some emotions can make one experience anxiety, depression. This can lead to hopelessness and death by means of suicide might be considered as the only solution.

The experience of stress is not usually reported in terms of 'being stressed'. It is often described in ways associated with emotions such as anger, anxiety, depression, fear, grief, guilt, jealousy and shame. The experience of stress is an emotional one. Most

psychologists made a distinction between two types of emotional experience namely, the pleasant or positively toned emotions and the unpleasant or negatively toned emotions. Lazarus (1976), terms the negatively toned emotions the 'stress emotions' and sees them solely as products of the occurrence of stress. However, such a direct relationship between the negatively toned emotions and stress is one possibility and it is more likely that the aetiology of these emotions is multifactorial and that stress is but one important factor. Each specific negatively toned emotion possibly reflects a particular transaction between the person and his environment and a particular antecedent context. According to Kagan (1975), these factors would be accounted for in the person's cognitive appraisal of the situation and this cognitive process shapes basic feelings into a specific emotion.



2.6 Stress or Distress

Stressors (the causes of stress) can be pleasant or unpleasant. Studies suggest that the inability to adapt to stress is associated with the onset of depression or anxiety. In one study, two-thirds of subjects who experienced a stressful situation had nearly six times the risk of developing depression within that month.

Stress diminishes the quality of life by reducing feelings of pleasure and accomplishment and relationships are often threatened. Simmons (2002) believes whether stress is fun or a horror, it is still putting on pressure and the demands on the person and the need for adjustment remain the same. It is only the depth and the number of stressors that affect

the ability to cope. Pleasurable stress is exciting, so one tends not to recognize it easily but if it becomes too much, one can still become pressurized. Distress is horrid, so one focus on it with anguish, get angry and discontented, adding even more pain. Whether stress is pleasant or unpleasant, it is using up one's physical and emotional resources.

2.7 Coping

Lazarus (1976) and Dewe (1993) state that coping is best considered as a form of problem solving in which the stakes are the person's well-being and the person is not entirely clear about what to do. It refers to dealing with demanding situations which are experienced as stressful. Through coping, the person attempts to master these situations. Lazarus (1966, 1976) believed coping can involve two processes, namely direct action and palliation.

Direct Action refers to actual behaviour aimed at changing the person's relationship with his environment and can take several forms such as preparation against harm, aggression and avoidance. 'Avoidance' refers here to removing oneself from the presence of actual danger or threat.

Preparation against harm is a form of true avoidance behaviour in which the person can take action in anticipation of danger. If the avoidance behaviour is appropriate and effective, then the signs of danger will recede, if not the danger may manifest.

Possibilities which exist for this form of direct action are the reduction of the actual danger and the reduction of its threat value. Both may take the form of strengthening the person's resources to withstand the danger when it occurs. Lazarus (1976) believe that aggression often appears to accompany the experience of stress but may not always be appropriate and effective form of coping. As a form of coping, it involves attacking the source of the person's problem, which may be perceived as a particular individual or group of individuals. Destroying or at least hurting the source of the problem may remove the person from danger, or reduce his experience of stress. Escape is another form of direct-action coping. According to Lazarus (1966, 1976) anger is often cited as the emotional correlate to aggression, then fear is cited as the same for escape. Aggression and escape have been described as responses to stress. It is renamed as fight or flight. Another concept named inactivity, which is renamed freezing is an immediate response to the onset of stress.

Palliation is a matter of moderating the distress caused by the experience of stress and reducing its psycho-physiological effects. This may be achieved in several ways distinguished between symptom-directed modes and intra-psychic modes (Lazarus, 1976).

Symptom-directed modes include the use of alcohol, tranquillizers and sedatives, training in muscle relaxation and other body-centered techniques. Intra-psychic palliation is

discussed in terms of cognitive defense mechanisms which focused on the development of psychoanalytical thought. Freud (1946) used the term defense mechanism, referring to an unconscious psychological maneuver by which means the person may deceive himself about the presence of threatening impulses or external dangers.

'Defense' refers to the perception of the treat of danger that is reduced and not its reality. Lazarus (1976) discusses intra-psychic palliation in terms of these mechanisms which consist of identification, displacement, repression, etc.

The categorization of coping responses are emotion-or problem-focused. However, this has been extended to include a broader range of coping strategies. Frydenberg and Lewis (1993) have identified some coping strategies which consist of seeking social support, problem solving, worrying, investing in close friendship, seeking to belong, wishful thinking and ignoring the problem. Frydenberg and Lewis (1993) grouped them as problem-solving, non-productive coping and reference to others.

2.8 Gender differences in coping

A study named Adolescent life events, stress and coping conducted by Plunkett (2000), indicate different rates of depression, anxiety and well-being which emerge in adolescence between boys and girls have been attributed to gender differences in coping styles. Young women have been reported as having the highest rate of depression and anxiety and poorer perceptions of well-being. Female adolescence are more prone to seek

peer and institutional social support at times of stress. Emotion venting, acceptance, religion and positive reinterpretation, together with wishful thinking and consumptive habits, such as shopping and eating have been indicated as more frequently used coping strategies in young women.

Another study, Adolescent least able to cope (Frydenberg, 2004), indicates male adolescents have been found to show a stronger preference for using humour, alcohol and drugs, sporting activities, hobbies and diversions as coping strategies. They are also more prone to present themselves as stable and hard to irritate. Gendered socialization patterns and structural influences on sources of stress may also contribute to the development of different coping styles in males and females. Male coping strategies which tend towards distraction and alcohol use may in turn be associated with higher rates of aggression, alcoholism and substance abuse. Hormonal factors may also contribute to higher rates of reported depression in women.

2.9 Social support

Social support can be defined as ‘interpersonal transactions involving tangible help, emotional support and affirmation’ (McNamara, 2000, p.17). House (1981) refers to emotional, instrumental, informational and appraisal social support. Social support may have an impact on stress-related symptoms by preventing stressful, life events and daily hassles from occurring, making the individual feel less vulnerable when they do occur,

reducing the impact, intensity and duration of the symptoms and providing help, advice and support to remove the stressor or the strain. Procidano and Heller (1983) conducted a study named, 'Measures of perceived social support from friends and family,' where it was found that high levels of emotional support and self-esteem have been found to moderate the relationship between daily hassles and physical symptoms on the day the hassles occurred and the following day. Lack of social support has been linked with increased rates of morbidity and mortality. According to Kahn and Byosier (1992), evidence suggests that social support has a buffering effect on mental health. Potential stressful events may be directly influenced by social support therefore affecting levels of strain. They believed that support may be conceptualized and measured subjectively or objectively, through perception of or actual availability of support. Cohen and Hoberman (1983) reported that perceived availability of social support and increased positive life events, moderating the relationship between negative events and depression and physical symptoms. McNamara (2000) suggests that social support may be one of the most important factors in buffering the effects of potentially stressful situations. It tends to alter initial perceptions of situations, allowing them to appear less threatening, reducing the likelihood of the development of disease-provoking outcomes.

Social support has also been considered one of the cornerstones of the coping process. Krenke (1995) and Moos (1994) described social support as 'interpersonal transactions involving tangible help, emotional support and affirmation' (p.4). There is evidence that suggest that emotional support may have a 'buffering effect' on physical and mental health.

Barrera (1986), points out that in addition to conceptualization difficulties, the search for a universal definition for social support is further complicated by multidimensional nature. Tyrer (1980) identifies the sources of support (for example, friends), types of support (for example socio-emotional), amount of support and the structure of the social support network as the different dimensions of social support. However, for the purposes of this project, focus will be on the support of family and friends.

2.10 Adolescence and stress

Lay usage of the term ‘adolescence’ often refers to the teenage years from ages 13 to 19. According to McNamara (2000) adolescence may be defined as ‘the period of transition from childhood to maturity with universal changes in morphology, physiology and cognitive ability’ (p.30). It is characterized by rapid processes of change in social and psychological functioning and marked physical growth. Few developmental periods (excluding infancy) feature the same degree of change on many levels. These levels include changes due to pubertal development, changes in emotions, values and behaviour, self-image, school transitions and emergence of sexuality. Changes which occur in these domains are interrelated and occur in most societies.

According to McNamara (2000) research has found support for a relationship between major life stress and depression and suicide, decreased levels of self-esteem, antisocial

behaviour and poor school performance. There have been a lot of attempts to classify the range of stressful events, which adolescents may encounter. The resulting categories may represent the domain in which the stressor occurs or the relative frequency with which it occurs. Examples of the former include Frydenberg's (1999) findings that students concern fall into three categories namely achievement (success in examinations, finding a good job and suitable partner) relationships (including family and peers) and altruistic issues (for example, nuclear war, poverty and issues relating to sexual equality).

2.11 Influences:

2.11.1 Influence of the family on adolescent



The pervasive influence of the family on the adolescent's psychological and physical development has received support. According to McNamara (2000), family stressors have been reported to exert a strong negative impact on adolescent health. Family members tend to have dispute concerning relatively trivial issues. These may include conflict over chores, relationships, curfews and appearances. Despite the superficiality of many arguments, minor disagreements can prove stressful for adolescents and parents and may lead to make serious conflicts.

2.11.2 Influence of the peers on adolescent

Peer groups are highly influential in determining the sources and outcomes of stressful life events. It tends to provide social support but peer relations may also prove stressful. McNamara (2000), believe that cliques emerging in early adolescence tend towards exclusion and social prejudice and great importance is placed on issues of loyalty, confidentiality and generosity. A lack of these qualities may disqualify the adolescent from the clique causing distress and alienation.



2.11.3 Influence of the school on adolescent

In feeling unhappy at school can cause enormous stress to young people and it affects their prospects for personal and career development. School stressors have been found to include concerns over grades, teachers, homework and general worries about the future. According to McNamara (2000), girls frequently cited more school stressors which include concerns over grades, teachers, homework and general worries about the future. The author also believed that girls frequently cite more school stressors than boys but this often decrease between the ages of 16 and 18 to a level comparable with boys. Parental pressure towards scholastic achievement may combine with certain pressures generated by the school environment itself. Hurrelmann (1992) found that poor school performance may enhance tension that can interfere with satisfactory relations between adolescents

and their parents. Increasing tendency towards testing in schools with its specification of standards at different levels, constitute an additional school stressor.

2.12 Historically disadvantaged schools

The C2005/OBE (Curriculum 2005/Outcomes-Based Education) implementation viewed historically disadvantaged schools as having insufficient funds, large class sizes, discipline problems, crime such as theft and vandalism, lack of proper sport facilities, lack of sufficient support from parents, inadequate infrastructure such as classrooms, lack of appropriate and sufficient resource and learning materials.

According to Dugmore (<http://www.wcpp.gov.za>), historically disadvantaged schools refer to schools (in extreme cases) where there is a lack of basic infrastructure like buildings. Where this basic infrastructure exists, many schools do not have electricity, telephone lines or computers. In less extreme cases, focus turns to where the policy of apartheid deliberately discriminated against and deprived schools from resources for example non-availability of key Information and Communication Technology (ICT), integration of these into teaching and learning and the curriculum of schools. According to Naidoo and Lewin (1998), focus was mainly on large class sizes and the resources. The minister of Cultural Affairs, Sports and Recreation associated 'disadvantaged' with the lack of sports equipment in schools (<http://www.wcpp.gov.za>). In this paper, historically disadvantaged high schools will be defined by the class size, crime rate (violence), availability of resources (e.g. computers (internet), sports equipment and distribution of textbooks).

2.13 Sexual Stereotyping

According to Fontana (1989), there is no clear evidence as to which sex copes better with stress. The reason for this is because individual differences and the range of potential stressors are so great that crude divisions along sex lines are not also helpful. Sexual stereotyping emphasis different kinds of stress upon the two sexes and also allows different kinds of stress response from them. Women face far more stress in terms of poor status, uncertainty, powerlessness and lack of variety (probably also time pressures). Men face more stress caused by unsociable hours, conflict with colleagues. As far as responses to stress are concerned, women are usually allowed more scope for tears, withdrawal, absenteeism and men more scope for anger and aggression.

According to Focus Adolescent Services (FAS, 2000), there are many things that can be done to constructively dispel stress and that can be enjoyable at the same time. These are; exercise and eat regularly, learn relaxation techniques like deep breathing, practice ways to state present feelings without being overly passive or aggressive, learn to take breaks from stressful situations, stop negative self talk, build strong ties with friends and learn to feel proud when a task is successfully completed (FAS, 2000). Taking hold of even a couple of these pointers might not erase stress completely, but will help the feeling of control return. Fortunately, with control comes relaxation and peace. However, more attention will focus on the above mentioned shortly.

Stress may have a positive as well as negative effect where the negative aspects normally get the most attention. According to Spielberger (1979) stress refers both to the circumstances that place physical or psychological demands on an individual and to the emotional reactions experienced in these situations.

2.14 Interventions

2.14.1 Preventive programmes

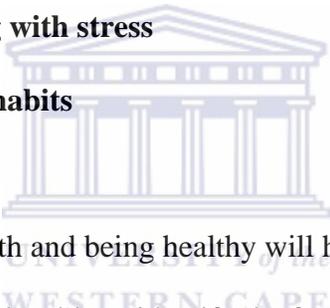
Compass (1993) emphasize the importance of delivering and evaluating preventive programmes during adolescence. Compass (1993) argue that ‘the multiple stresses associated with adolescence, especially early adolescence, make the attainment of effective coping skills an important development task during this period’ (p.6). The author outlined three possible levels at which adolescent interventions may be targeted. Adolescent interventions can comprise of programmes aimed at ameliorating coping skills, programmes aimed at developing a healthy social environment and programmes aimed at promoting mental health through public policy. The author argued that these should be delivered as part of the school curriculum and should aim to develop a sense of self-efficacy and positive feelings towards the self as well as general coping and social skills. Compass (1993) believe that stress management for adolescents should teach them to identify sources of stress in their lives, recognize the physical and emotional consequences of stress and implement adaptive coping responses.

Stress management training for adolescents falls into the first of these two categories. It is a preventive strategy aimed at ameliorating the personal resources of adolescents.

Hurrelmann (1990) identified six skills as vital components of such a programme. These skills are largely derived from research on resiliency. It consist of general problem-solving and decision-making skills, general cognitive skills, skills for increasing self-control and self-esteem, adaptive coping strategies for relieving stress and anxiety, interpersonal skills and assertive skills.

2.14.2 Physical ways of coping with stress

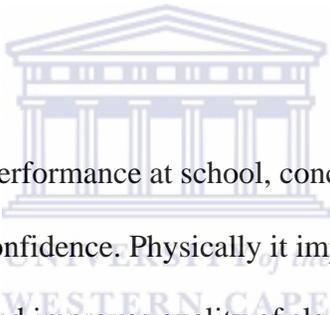
2.14.2.1 Nutrition and eating habits



Eating well is vital to good health and being healthy will help young people cope better with life's stresses. It is good to be able to identify the food, which makes one feel energetic and positive as well as fatigued and negative. Nutrition plays an essential role in preventing headaches, sluggishness, irritability and premenstrual syndrome. The general principles to healthy eating are to reduce saturated fats, sugar, salt, caffeine and alcohol, increasing fibre, starches, fruit and vegetables. According to McNamara (2000), diet should contain a variety of foods and individuals should try to maintain their ideal weight and use exercise to regulate appetite and weight. It is also recommended that one eats calmly, frequent meals and take a multi-vitamin tablet daily if one feels run down/tired. Starches should form the main source of energy in one's diet. Starch has also been referred to as natural tranquillizers because they exert a positive effect on mood for

example potatoes, rice, pasta, breakfast cereal. Young people are often worried that these foods are fattening but they need to be informed that they can actually keep weight down by controlling the appetite and prevent sudden drops in blood glucose levels, which cause snacking. They should have a well balanced diet, which contains fresh fruit, and vegetables and if they feel tired and run down, they are not eating well. Caffeine for example coffee, tea, chocolates contribute to irritability, tiredness and sleeping problems because it is a stimulant.

2.14.2.2 Exercise



Mentally exercising improves performance at school, concentration and memory. It lifts depression and improves self-confidence. Physically it improves self-image, boosts energy level, lowers body fat, and improves quality of sleep. It affects behavior by reducing hostility and irritability.

2.14.2.3 Study skills

According to McNamara (2000), studying for exams is one of the most stressful and difficult challenges one tends to face. The most important study technique is to invest time in study. No amount of study tips will allow one to escape the fact that the more time one spends working; the more one will learn and achieve. The young person who

studies for exams must take into consideration where he or she studies, how he or she studies and why he or she studies. Exams stress is normal for students to worry before an exam but it is important to convert the worry into action and get focused. To worry is a normal reaction and result of the pressure the youngster has been under to do well.

2.15 Theoretical framework

Most approaches to coping research conceptualize a problem-focused and an emotional-focused aspect. The transactional theory of coping, conceptualized by Richard Lazarus and his colleagues (Lazarus & Folkman; 1968, 1980, 1984, 1991, 1993, Dewe, 1993), is the most frequently cited theory of coping. This theory is based on two theoretical frameworks. The cognitive phenomenological theory, labeled as cognitive transactional theory and the emotion-focused coping.

The world is experienced by an individual as containing the necessary to understand behaviour. The individual perceive the world in a unique way and their perceptions make up the phenomenal field. The individual reacts to the environment as they see it. The concept of transaction was developed to describe how variables of person and environment are combined into new concepts. Cognitive activities termed appraisal were found to play a prominent role in this approach. According to Lazarus and Launier (1978, p.302) appraisals consist of a 'continuously changing set of judgments about the flow of events for the person's well-being'. One of the major principles of Lazarus' theory of stress and coping is that the way a person appraises an encounter determines how he or

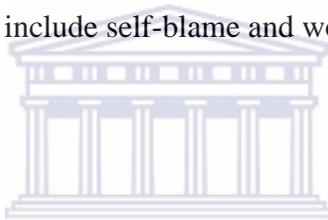
she will cope. Frydenberg (2004) also distinguish between two appraisals, namely primary and secondary appraisal.

Primary appraisal relates the event to its significance for the person's well-being and is concerned with the motivational relevance of what is happening. There are three types of primary appraisal, namely harm-loss, threat and challenge. All three types involve some negative evaluations of one's present or future state of well-being. Harm-loss refers to damage already experienced and threat refers to harm or loss that has not yet occurred but is anticipated. Challenge involves the potential for mastery and gain. Challenge is considered as a stress appraisal because Lazarus believed that a person must mobilize himself in order to cope with obstacles and to ensure a positive outcome. The distinction made between threat and challenge is a matter of positive or negative tone, meaning whether one emphasizes the potential harm or the potential gain. According to Lazarus and Launier (1978), this distinction may be related to a person's belief and way of thinking especially because some people 'put a good face on things' even in the face of adversity. This is an indication that in a given situation, an individual may respond as if threatened, whereas another may feel challenged and another may feel that the situation is irrelevant.

Secondary appraisal is where other aspects of the situation are evaluated (i.e. appraisal of the event is oriented toward what can be done). Evaluative judgments are made about whether any action can be taken to improve the troubled person-environmental relationships. If improvement can take place, one also needs to look at which coping option may work.

Secondary appraisal does not mean that it follows primary appraisal but it is a crucial supplement. Primary appraisal (harm, threat or challenge) depends on how much control one thinks one can exert over outcomes. The two forms of appraisal influence each other.

The other aspect of Lazarus' theoretical framework is the emotion-focused coping. Some emotion-focused strategies (for example focus on the positive) are associated positively with desired outcome, such as perceptions of self-efficacy and academic achievement and have been represented as productive strategies (Frydenberg, 1999). On the other hand, non-productive strategies include self-blame and worry (Frydenberg & Lewis, 1996).



A recent study by Frydenberg (2004) focused on how adolescents respond to their stresses. This study was conducted over a period of two years in three regions in Melbourne with 11 government and private coeducational schools. Focus was on pupils from the ages of 11 to 18 years. Only a small proportionate of matriculants was included in the study, which formed the smallest part of the sample.

The Adolescent Coping Scale (ACS) was used which consist of 79 questions, which illicit ratings of an individual's use of 18 coping strategies, plus a final open-ended question. The findings take the inspection of the gender balance into consideration. Girls generally report more inability to cope than boys. The percentage of girls in the total sample was 49, 55 and 58%. In contrast, there was a mild support for previously reported associations between age and professed inability to cope.

2.16 Overview of chapter

- Stress means different things to different people and what one individual regards as stressful may not necessarily be experienced as stressful by another person.

McNamara (2000) refers to stress as the internal state of the individual, an external event, or the interaction between a person and his or her environment.

- The concept of stress is illustrated by three contemporary approaches; namely the stimulus-based perspective (environmental demands on the individual), the response-based view (biological and psychological response of the individual to environmental demands) and the transactional approach (relationship between the person and the environment that is appraised by the person as exceeding their resources and endangering the individual's well-being.)
- The way one deals with stress is referred to as coping. Lazarus (1991) defines coping as 'the cognitive and behavioral efforts to manage specific or internal demands (and conflicts between them) that are appraised as taxing or exceeding the resources of a person (p.112). Coping can be problem-focused or emotional-focused. Problem-focused coping strategies can be viewed as an attempt to control a stressful situation, locating its causes and then changing or removing them. Emotional-focused coping strategies are one's actions which serve to decrease negative emotions.

- Social support can be defined as ‘interpersonal transactions involving tangible help, emotional support and affirmation’ (McNamara 2000, p.17).



CHAPTER 3

METHODOLOGY

3.1 Introduction

In this chapter, the focus is on the research design and specific procedures used to obtain the data. There is also a description of the biographic and demographic characteristics of the sample, different instruments used pertaining to stress, coping strategies and social support and the ethics of the study.



3.2 Research design

A survey design was used to conduct the study. This was the most appropriate method because a more general viewpoint was needed in order to obtain an idea about the level of stress, coping strategies and social support amongst grade 11 students.

The method used to gather information was a questionnaire. The questionnaire consisted of a booklet which was divided into three sections, focusing on the three aspects namely stress, coping strategies and social support. Section one was a list of events, which occurs to people and the participant needed to chose how good or bad the event was when it happened. It also comprises of 43 questions.

Section two focused on a specific stressful situation and how one would cope. A Likert scale was used and this section consisted of 37 questions.

Section three had two parts: Relationship with friends and Relationship with family.

Participants had to choose “yes or no” on 13 and 14 questions, respectively.

3.3 Procedures

According to the Minister of Cultural Affairs, Sport and Recreation (www.capegateway.gov.za), the most historically disadvantaged high schools in Cape Town are in the following areas namely, Bonteheuwel, Elsies River, Gugulethu, Langa, Mannenberg, Mitchell’s Plain, Nyanga, Paarl and Phillippi. An article written by Shilowa (1999) named ‘SASchools’ highlighted that disadvantaged schools can be located in different areas in the City of Cape town, the list are endless and the above mentioned schools reflect only a small proportion of disadvantaged schools. Due to time constraints in conducting this study, the researcher could not cover all nine areas. One area was selected using random sampling. After the selection process, an investigation was done as to how many high schools were situated in that area (for example, Bonteheuwel). After establishing the number of high schools, the names of each high school were placed in a hat and three schools drawn randomly. This method ensured that each class had an equal chance of being selected.

After this procedure, classes were selected. There were four grade 11 classes and due to time constraints, only two of the classes took part in the study. The numbers of the

classes were placed in a hat and two were drawn. After establishing which classes to focus on, another draw took place to determine which class will take part in the pre-test. This was done to determine whether the participants struggled in understanding the questions in the questionnaire, whether the questionnaire was too long or short, how long the participant took in completing the questionnaire, so that one could negotiate time when the actual questionnaire had to be completed, if need be. The pretest took a couple of hours because only one specific day was given to complete this process. This meant that the three high schools had to complete the pretest on the same day, at different time slots.

Reporting on the results, data editing had to take place. The participants suggested that one question be placed in the questionnaire which dealt with suicide. The length of the questionnaire was adequate where only some struggled with certain terms used. In order to avoid this from happening with the actual group, the questionnaire was modified.

Afterwards, the questionnaire was satisfactory to the supervisor, administration took place. In order to minimize error, two assistance were firstly trained to assist in administering the questionnaire to the participants and their main duty was to check whether the participant completed the entire questionnaire.

In administering the questionnaires during interval, it was completed under an hour.

However, permission and negotiation with teacher and the researcher took place.

3.4 Biographic and Demographic characteristics of sample

A frequency test was prepared to determine whether there was a significant difference between variables. It was conducted in terms of race, gender (sex), age and home language. The results are indicated as follows:

3.4.1 Participants

The questionnaires were distributed among 210 grade 11 students. From each of the three historically disadvantaged high schools, only 2 classes (which consisted of 35 students per class= 70 students per school) were selected to conduct the current research. The two Grade11 classes were selected by means of random sampling. In total, 196 participants took part in the study, where 32 (16%) were Black and 164 (84%) Coloureds as shown in Table 1.

TABLE 1: RACE OF PARTICIPANTS

Race	n	%
Black	32	16.3
Coloured	164	83.7
Total	196	100.0

As shown in Table 2, females dominated the study 132 (67%) and 64 (33%) males.

TABLE 2: GENDER OF PARTICIPANTS

Gender	n	%
Female	132	67.3
Male	64	32.7
Total	196	100.0

Table 3 indicates that in the age group 16, there were a total of 89 (45%) students that participated in the study. In the age group 21 and 24 there was only one participant (0, 5%).

TABLE 3: AGE OF PARTICIPANTS



Age	n	%
15	14	7.1
16	89	45.4
17	45	23.0
18	31	15.8
19	9	4.6
20	6	3.1
21	1	.5
24	1	.5
Total	196	100.0

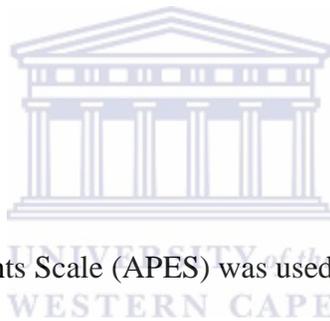
Most of the participants (74%) were Afrikaans speaking since Manenberg is predominantly an Afrikaans speaking area .The rest spoke Xhosa (15%) and English (11%) as shown in Table 4.

TABLE 4: HOME LANGUAGE OF PARTICIPANTS

Home language	n	%
Afrikaans	144	73.5
English	22	11.2
Xhosa	30	15.3
Total	196	100.0

3.5 Instruments

3.5.1. Stress



The Adolescent Perceived Events Scale (APES) was used to measure stress. The scale comprises of 43 items providing a comprehensive list of major events (e.g. death of a relative) as well as daily stressors (e.g. taking care of younger siblings) in the lives of adolescents. Respondents indicate those events which have occurred and rate these events on 4-point Likert Scale for their desirability (+1= good, +2= very good, -1= bad and -2= very bad).

The scoring of the Adolescent Perceived Event Scale (APES) for this particular study was done by conducting a simple count of the events appraised as negative by the respondents and then calculating the mean stressfulness of these negative events. This method was employed in order to determine the impact of negative stressful events of the sample.

This canceled the need to calculate the total weighted positive events scores as positive events have not been shown to predict psychological problems (Siegel and Brown. 1988). The reliability and validity of the APES was determined by administering to 95 adolescence at 2 points in time, 2 weeks apart. Test-retest reliability co-efficient over the two-week period for the adolescent group was 0.85, 0.86 and 0.78 ($p>0.01$). This was determined by compromising the self-reported life events of 34 older adolescence attending their first year at university with the reports of their roommates who had close relationships with them. The percent of agreement for event reports by the two sources were 82% (the sum of events reported by both respondents as occurring plus events reported by both respondents as not occurring, divided by the total number of events). This method was used to test the validity of the older adolescent version of the APES but not the younger- or middle adolescent versions, a shortcoming, which they admit. To date, the APES has not been administered to a South African sample. It may, however, be useful in a local context, as it provides a comprehensive list of major and daily stressful events experienced by adolescents in general.

3.5.2 Coping strategies

In measuring the coping strategies, the Ways of Coping Questionnaire (WCQ) was used. According to Lazarus and Folkman (1980) coping can be defined as the constantly changing cognitive and behaviour efforts used to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person. The scale

can be used to investigate the role of coping in the relationship between stress and adaptational outcome. It assesses thoughts and actions used to cope with stressful encounters. It tends to measure the coping processes not dispositions or styles. It is however, not advisable to use this scale to measure general traits but to relate it to specific stressful encounters.

The Ways of Coping Questionnaire (WCQ) scale consists of 8 subscales:

1. Confrontative coping describes aggressive efforts to alter the situation and suggests some degree of hostility and risk taking.
2. Distancing describes cognitive efforts to detach oneself and to minimize the significance of the situation.
3. Self-controlling describes efforts to regulate feelings and actions which includes characteristics of depression, anxiety, anger and confusion. Brage and Meredith (1994) state that research links low self-esteem to emotional problems, especially depression in adolescents
4. Seeking social support describes efforts to seek informational, tangible and emotional support.
5. Accepting responsibility is where one acknowledges ones own role in the problem with a concomitant theme of trying to put things, right.
6. Escape-Avoidance describes wishful thinking and behavioral efforts to escape or avoid the problem.
7. Planful problem solving describes deliberate problem-focused efforts to alter the situation, coupled with an analytic approach to solving the problem.

8. Positive reappraisal describes efforts to create positive meaning by focusing on personal growth.

Focusing on the WCQ, the individual is asked to think about the most stressful experience that took place during the last week. Before responding to the statements, the individual is asked to recall the details of the situation. This contributes that the individual is focused on a specific situation and not responding to the statements with their behavior in mind since the scale is not designed to measure traits. Individuals respond to 37 items on a 4-point Likert scale indicating the frequency with which each strategy is used ranging from (0) does not apply or not used, (1) used somewhat, (2) used quite a bit, and (3) used a great deal.

The Cronbach's coefficient alpha for the eight scales ranges between 0.61 and 0.79, which were determined in a study done by Lazarus and Folkman (1968) during the development of the scale. The scale has face validity due to the strategies described in the items are those that individuals had reported using to cope with the demands of stressful situations. Results of these studies are consistent with theoretical predictions.

3.5.3 Social support

The Perceived Social Support Scale (PSS) was used to measure social support. It measured the extent to which an individual perceives that his or her needs for support, information and feedback are fulfilled by friends and family (Procidano and Heller,

1983). The self-report measure requires a 'yes' or 'no' answer to 27 declarative statements. The scoring of the Perceived Social Support Scale (PSS) for this study was done by conducting a simple count of the positive events appraised by the respondents and then calculating the mean social support of these positive events. This method was employed in order to determine the impact of positive social support events of the sample. This disapproves the need to calculate the total weighted negative events scores.

The PSS consists of two subscales, viz. the perceived support from friends' subscale (PSS-Fr) and the perceived support from family subscale (PSS-Fa).

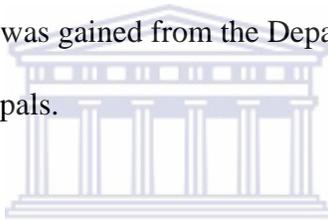
According to Procidano and Heller (1983) found a Cronbach's alpha of 0.88 for the PSS-Fr and 0.90 for the PSS-Fa providing the internal consistency of the scale. Focus was also on the vulnerability of the scales to temporary changes in attitudinal sets. The scale was found to be fairly stable where the PSS-Fa was unaffected by positive and negative self-statements used before a retest to check how results would contrast with the results of the initial testing. The PSS-Fr was somewhat affected by the negative statements for a sample of first year college students. The results could have been influenced by the fact that first year students were still making new friends, while family relations are usually of longer duration. Procidano and Heller (1983) also found that though the two scales were related, it appeared to have separate valid constructs. When Pretorius (1991) used the scale on a sample of 450 South African students confirmed the internal consistency of the scales (alpha coefficients: Fr = 0.85, Fa = 0.92) and supported the factorial structure for a South African sample. Separate principal factor analyses with varimax rotation for the

two scales indicated that the scales were composed of a single factor (eigenvalues > 1) explaining 71.4% of the variance in the PSS-Fr and 84% of the variance in PSS-Fa.

3.6 Ethics

The purpose of the study was explained to the principals of the high schools, class coordinators and the subjects of the study.

Permission to conduct research was gained from the Department of Education and from the participating school's principals.



Informed consent was obtained from the parents/guardian of the student through writing a letter in asking permission. The parents/guardian signed it and it was handed back to the school. Students were informed that their participation was voluntary and they maintained the right to refuse participation. All the participants were informed of the study, its aims and the nature of the measuring instruments.

Anonymity was stated in the letter, informing the parent who would have access to the information. Access was given to the Department of Education, the school's principals involved in the study and to the University of the Western Cape, Psychology Department. Every participant also remained anonymous and this aspect was clearly emphasized before administering the questionnaire. To ensure this, participants were asked not to

write their names anywhere on the questionnaire. Every questionnaire was therefore treated anonymously.

Confidentiality was assured in the questionnaire where the participant's identity remained confidential.

The researcher carried out the study with respect and concern for the dignity and welfare of the participants.



CHAPTER 4

RESULTS

4.1 Introduction

This chapter presents the results of the statistical analyses for the study. The Statistical Package for the Social Sciences-SPSS-PC (Norusis, 2001) was used in all statistical calculations. An analysis was made of the psychometric properties of the scales used. This analysis yielded descriptive statistics for each of the subscales in the form of means. The three hypotheses stated relating to stress, coping strategies and social support amongst grade 11 students was discussed and lastly, an overall summary is provided. Attention will now be centered on the three hypothesis, mentioned above.

4.2 Hypothesis:

4.2.1 Stress

The Null Hypothesis of stress states the following:

There will be no significant difference between the stress levels of males and females.

This hypothesis was tested by using the t-test.

The mean scores in Table 5 indicate that females (33.98) scored slightly higher than the males (31.72). High scores indicate high levels of stress and in this case viewing the two groups, only a slightly higher score was detected. The reason for this could be females respond differently to certain events and it might affect them differently too. However, there was no significant difference found between the stress levels of males and females.

TABLE 5: STRESS SCORES BETWEEN MALES AND FEMALES

Sex	n	\bar{X}	t	Significance
1 Female	132	33.98	.054	.817
2 Male	64	31.72		

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4.2.2 Coping strategies

The Null Hypothesis states that:

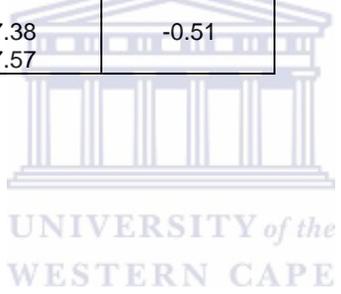
There is no significant relationship between the characteristics of depression and social support.

The Pearson's Correlation was used to test the hypothesis.

The correlation coefficient of -0.51 was found which indicated that the relationship between depression and social support was negative with high scores on social support associated with lower scores on depression. However, the results indicated that there was no significant relationship found between depression and social support.

TABLE 6: COPING STRATEGIES SCORES BETWEEN MALES AND FEMALES

	n	\bar{X}	r
Depression scale	196	17.38	-0.51
Social support	196	17.57	



4.2.3 Social Support

The Null Hypothesis states that:

There will be no significant difference between social support of males and females.

The Hypothesis was tested by using the t-test.

The mean scores in Table 7 indicated that females obtained a slightly higher score (17.68) than the males (17.33) but there was no significant difference between the level of social support between males and females detected. The scores indicate that females and males have similar social support.

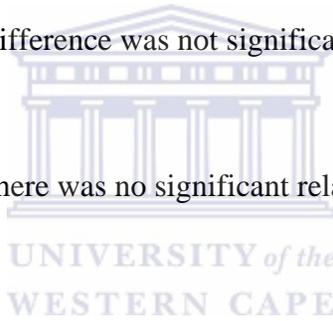
TABLE 7: SOCIAL SUPPORT SCORES BETWEEN MALES AND FEMALES

Sex	n	\bar{X}	t	Significance
1 Female	132	17.68	1.457	.229
2 Male	64	17.33		

4.3 Summary

The mean scores for stress indicated that females (33.98) scored slightly higher than the males (31.72). However, this difference was not significant.

The results also indicated that there was no significant relationship found between depression and social support.



The mean scores of social support indicated that the females obtained a slightly higher score (17.68) than the males (17.33) but this was not significant. The scores indicate that females and males have similar amount of social support structure.

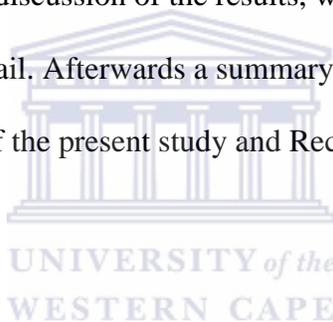
CHAPTER 5

DISCUSSION

5.1 Introduction

As already mentioned, the purpose of the study was to investigate stress, coping strategies and social support amongst grade 11 students in historically disadvantaged schools.

This chapter will centre on the discussion of the results, where the above mentioned aspects will be discussed in detail. Afterwards a summary of the findings will be provided. Lastly, Limitations of the present study and Recommendations will also be discussed.



5.2 Discussion of the results pertaining to the aims of the study:

a) Is there a significant difference between stress levels of males and females?

The results indicated that there was no significant difference found between the stress levels of males and females.

It's believed that the research literature indicated that Fontana (1989), found no clear evidence as to which sex copes better with stress. The reason for this is because individual differences and the range of potential stressors are so great that crude divisions

along sex lines are not also helpful. Sexual stereotyping emphasis different kinds of stress upon the two sexes and also allows different kinds of stress response from them.

According to McNamara (2000), girls frequently cited more school stressors and it include concerns over grades, teachers, homework and general worries about the future. The author also believed that girls frequently cite more school stressors than boys but this often decrease between the ages of 16 and 18 to a level comparable with boys. This is why in mentioning the above, evidence supports the notion that there is no significant difference found between the stress levels of males and females.

A few studies were conducted to measure the levels of stress but the main focus was on high school students in general. These studies took place in Western countries such as Minnesota.

These results corresponded with another study that was conducted pertaining to stress. According to Robinson (1999) males and females experience similar levels of stress, adolescent females are more likely to experience stress in their relations with parents and friends.

b) Is there a significant difference between depression and social support?

The results indicated that there was no significant relationship between depression and social support.

Unnamed studies found on the website www.nimh.nih.gov, suggested that the inability to adapt to stress is associated with the onset of depression or anxiety. In one study, two-thirds of subjects who experienced a stressful situation had nearly six times the risk of developing depression within that month.

According to Robinson (1999) depression was more common among adolescents who experienced high level of conflict with others. He also stated that there was no direct link found to there social support structure.

The impact of stress is reflected in the increased rates emotional and behavior problems during adolescence. Depression has been associated with the stresses of adolescence and the feelings of hopelessness and frustration that some adolescents experience. Increasing numbers of adolescents have concerns that may be both overwhelming and disabling. In the extreme circumstances the problems that weigh on the minds of youth may lead to severe depression.

According to Swimmer (1996), when adolescents are exposed to stress because of poor family relationships, they may be more predisposed to exhibiting depressive symptoms. The findings of this study indicated that there was no significant relationship between depression and social support.

Hart (1992) suggested that in not dealing with the loss of a loved one, the distress and unhappiness that one should be feeling is not showing at all. Some emotions can make one experience anxiety, depression, etc. This can lead to hopelessness and even death by means of suicide as the only solution.

The experience of stress is not usually reported in terms of 'being stressed'. It is often described in ways associated with emotions such as anger, anxiety, depression, etc. The experience of stress is an emotional one.

c) Is there a difference between the social support of males and females?

The results indicated that there was no significant relationship found between the social support of males and females.

The literature indicated that according to Moos (1995) much evidence has been provided to suggest that social support may be one of the most important factors in buffering the

effects of potentially stressful situations. No evidence could be detected and substantiated as to whether there is a significant difference between the social support of males and females. In this study, however evidence shown, that there was no significant difference found between the social support of the sexes.

However, other authors for instance Cohen and Hoberman (1983) highlighted that perceived availability of social support, moderates the relationship between negative events and depression.

House (1981) believed social support may have an impact on stress-related symptoms by preventing stressful, daily hassles from occurring, making the individual feel less vulnerable when they do occur, reducing the impact, intensity and duration of the symptoms and providing help, advice and support to remove the stressor or the strain.

High levels of emotional support and high levels of self-esteem have been found to moderate the relationship between daily hassles on the day it occurred and the following day.

5.3 Summary

Discussion of the results pertaining to the aims of the study, indicated:

- There was no significant difference found between the stress levels of males and females. Robinson (1999) supports these findings and stated that males and females experience similar levels of stress.
- Relating to whether there was no relationship between depression and social support, results indicated that no significant relationship could be found. According to Robinson (1999) depression was more common among adolescents who experienced high level of conflict with others. He also stated that there was no direct link found to there social support structure.
- The results indicated that there was no significant relationship found between the social support of males and females.

5.4 Limitations of the present study

- The Adolescent Perceived Event Scale (APES), as a self-report measure, relies on the participants to provide a subjective appraisal of the stressful events. According to Lazarus and Folkman (1984) there are sound theoretical arguments for the objective appraisal of events and it does have its own limitations. Response-bias can also occur.

- This study was done only in one area where three historically disadvantaged schools were detected. The sample was not representative of all the historically disadvantaged schools. Therefore, the results cannot be generalized to other sectors.

5.5 Recommendations

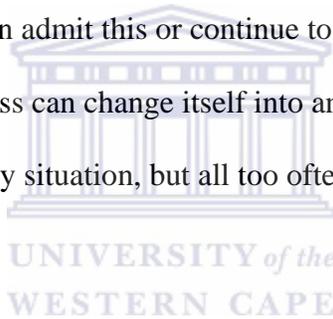
In the light of the study, the following recommendations are made:

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- In addressing the issue of response-bias, information may be elicited by the following means:
 - Parents being more involve in the adolescent's life through being educated in identify the signs that their adolescent is not coping and assisting them to deal with daily stressors through attending workshops.
 - Schools/teachers can assist parents with these workshops where both the parent and child can attend.
 - Schools/teachers can also make provision to educate the adolescent through having a life skills period where specific focus can be on study skills, nutritional and healthy eating habits, exercises, etc.

- An intervention program can also be implemented and form part of the curriculum.

5.6 Conclusion

If we are aware of the danger of stress, it can be eliminated. We live in an age in which an explanation is demanded for every happening and more and more answers are forthcoming but we shall never have all the answers and many things will remain inexplicable. Rather than admit this or continue to look for the answer, people can put it all down to stress. As stress can change itself into any shape at will, it will obviously fit the demands of any situation, but all too often it is an explanation in a vacuum.



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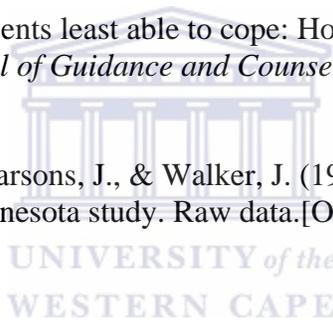
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