The Study of the relationship between stress coping strategies, emotional atmosphere of the family and high-risk behaviors in first year high school students Bandar Abbas, Iran

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Original Article
Abstract

Introduction: Adolescence is a transition period from childhood to adulthood. Important patterns that can affect a person's life throughout his/her lifetime are formed during this period. Therefore, it is necessary to study the variables associated with behavioral patterns, especially the high-risk behaviors among adolescents.

Methods: The purpose of this study was to investigate the relationship between emotional atmosphere of the family, stress coping strategies, and high-risk behaviors among first year high school students in Bandar Abbas. The statistical population of this study consisted of first year high school students in Bandar Abbas, in the academic year of 2014-2015. The sample size of the research consisted of 3506 randomly selected participants. The data collection tool was the Ministry of Education's Mental-Behavioral Health Scale.

Results: Regression analysis showed that the emotional atmosphere of the family and the stress coping strategies explain 12% of the changes in the high-risk behaviors. However, the results showed that stress coping strategies alone explain 11% of the changes in the variance of the high-risk behaviors, and the emotional atmosphere of the family explains about 4.5% of the changes in the variance of high-risk behaviors.

Conclusion: Generally, it can be said that the emotional atmosphere of the family, as well as stress coping strategies are important variables related to high-risk behaviors among adolescents.

Key words: Coping Behavior, Family Dynamics, Risk Behavior, Adolescents

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Introduction: The adolescence period is the most sensitive period of people's lives in terms of the tendency toward high-risk behaviors, including drug abuse. The most important risk factors in adolescence are unsafe sexual behaviors, addiction, having car accidents, psychological problems, suicide attempts, and unemployment, which may bring about long-term problems for adolescents in their future life (1, 2). These problems will sometimes remain with adolescents until adulthood and even senescence. Many risk factors of adolescence begin and become more intense with the natural changes of this period. During adolescence, adolescents experience a lot of physical and evolutionary changes during adolescence. High-risk behaviors are a new term for naming some of the newly emerging behavioral trends that have become prevalent among adolescents and young people. High-risk behaviors are those that tend to be physically, psychologically, and socially harmful to
individuals. In other words, high-risk behaviors refer to behaviors that endanger the health of the community, adolescents, youth, and other community members (3, 4). The reason for the growth of high-risk behaviors in schools may be that the world and developing countries have not yet come to the conclusion that they need to understand endless energy and the ambitions of adolescents and young people and create real opportunities for young people. In our country, although there is no official data on drug abuse, clinical observation in counseling centers and treatment and rehabilitation clinics shows that addiction to new psychosocial drugs in adolescents is relatively high (5, 6). In recent years, studies have shown that adolescents’ tendency toward high-risk behaviors such as smoking, alcohol consumption and hazardous driving has been increased in Iran (6).

Coping strategies are a process by which individuals control issues arising from stress and excitement and generally address cognitive and behavioral efforts to prevent, manage, and reduce the level of stress. Based on the psychological theories, coping strategies have an important role in reducing stress and, consequently, the general health of individuals (7, 8).

Endler and Parker (1990) proposed three types of problem-oriented, emotion-focused, and avoidant coping strategies. In problem-oriented coping strategy, the emphasis is placed on the problem. As far as this strategy is concerned, individuals are compiling the information about the stressful incidents they had and, prepare a plan by evaluating their available resources. In emotion-focused coping strategy, the emphasis is placed on controlling emotion and emotional responses. As far as this strategy is concerned, individuals deal with stress through emotional actions, crying, screaming and getting angry (aggression). In the avoidant strategy, individuals try to get away from the stressful situation and escape and avoid this situation through getting away from the problem and strive to receive emotional supports. Andler and Parker (1990) also argue that the use of inappropriate strategies in dealing with stress can increase problems, while applying a proper coping strategy can have beneficial outcomes. It has long been reported that some educational tendencies of parents are related to the emergence of non-conforming behaviors of children (9).

Numerous studies conducted on educational methods and how parents interact with children show that parents’ educational methods have long-term effects on behavior, expectations and, ultimately, on the individual’s personality in the future. Parents who do not allow their children to express their opinions will prevent the development of emotions and inner feelings of their children, and as a result, these children will become distressed and anxious in the future. Parents’ lack of attention to improving the psychological and emotional environment of children and adolescents and the lack of appropriate relationships make them, in most cases, to be encountered with emotional deficiencies, motivation and psychological problems such as anxiety disorders (10, 11).

In sum, numerous studies have shown that the high-risk behaviors among adolescents are related to the structure and emotional atmosphere of the family. In other words, the more tumultuous family atmosphere, the more obscure the structure and patterns of contact between family members and the greater the risk of developing high-risk behaviors that threaten both the adolescents and others (12, 13).

Therefore, the purpose of this study is to find an appropriate answer to the question of whether there is a relationship between stress coping strategies and the emotional atmosphere of the family with high-risk behaviors among students in the first elementary school in Bandar Abbas.

Methods:

In this descriptive study, family atmosphere variables and stress coping methods are considered as predictor variables and high-risk behaviors variables are considered as criterion variables. Because there is no manipulation or changes in the population or participants, the purpose of the study was to examine the relationship between each of the variables.

The statistical population of the present study includes all first year high school students in Bandar Abbas in the academic year 2013-2014, with a population size of 5530 students. The sampling method used in this research was multi-stage random cluster sampling. The sample
of this study was calculated about 3506 participants.

In the present study, the students’ mental-behavioral health questionnaire was used to collect data. This test was developed by Anbari (2010) ordered by the Ministry of Education of the Islamic Republic of Iran. Preliminary studies were carried out to construct this tool in the city of Qazvin. The validity of this test was investigated using a validation factor analysis method, which resulted in an appropriate estimation and its structural validity was confirmed. The overall reliability of this tool was calculated and obtained as equal to 0.89 using Cronbach’s alpha; which was at a desirable level. Reliability of the present study was obtained to be equal to 0.88 using the Cronbach’s alpha.

Multivariate linear regression test (with entering model) used for analysis of data in this study. Also the statistical package of social science (spss) version 19 used for running statistical tests.

Results:

Participants consisted of 1549 (44.2%) boys and 1957 (55.8%) male. The participant’s age ranged from 14.5 to 16.5 years old. The table of below showed descriptive statistics indices (such as minimum, maximum, mean and std division) of research variables. The coefficient of determination was 0.12. In other words, 12% of the high-risk behaviors of the first year high school students in Bandar Abbas were explained by emotional atmosphere of the family and stress coping strategies. The regression model was:

\[ y = 29.55 + (-0.06)(\text{Emotional atmosphere}) + (0.13)(\text{Family bonding}) + (-0.18)(\text{Family support}) + (0.10)(\text{Problem-oriented}) + (0.48)(\text{Emotion-focused}) \]

The coefficient of determination for stress coping alone was equal to 0.11. In other words, 11% of high-risk behaviors of the first year high school students in Bandar Abbas were explained by stress coping strategies.

On the other hand, the coefficient of determination for emotional atmosphere alone was equal to 0.045. In other words, 4.5% of the high-risk behaviors of the first year high school students in Bandar Abbas was explained by the emotional atmosphere of the family variables.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Subscale</th>
<th>Number</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional atmosphere of</td>
<td>Family bonding</td>
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<td>0</td>
<td>79</td>
<td>44.65</td>
<td>16.65</td>
</tr>
<tr>
<td>the family</td>
<td>Parental monitoring</td>
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<td>53.93</td>
<td>18.98</td>
</tr>
<tr>
<td>Family support</td>
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<td>72</td>
<td>47.81</td>
<td>16.08</td>
<td></td>
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<tr>
<td>Problem oriented</td>
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<td>0</td>
<td>72</td>
<td>48.74</td>
<td>17.57</td>
<td></td>
</tr>
<tr>
<td>Stress coping strategies</td>
<td>Emotional focused</td>
<td>3506</td>
<td>0</td>
<td>70</td>
<td>55.06</td>
<td>21.41</td>
</tr>
</tbody>
</table>

Table 2. Summary of regression model, [the relationship] between the emotional atmosphere of the family and stress coping strategies and high-risk behavior

<table>
<thead>
<tr>
<th>Variables</th>
<th>Components</th>
<th>B</th>
<th>β</th>
<th>T</th>
<th>P</th>
</tr>
</thead>
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<td>31.95</td>
<td>0.01</td>
</tr>
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<td>the family</td>
<td>Emotional atmosphere</td>
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<td>-0.07</td>
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<td>4.58</td>
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<td>Parental monitoring</td>
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<td>0.02</td>
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<td>0.45</td>
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<tr>
<td>Family support</td>
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<td>-0.11</td>
<td></td>
<td>-4.62</td>
<td>0.01</td>
</tr>
<tr>
<td>Problem-oriented</td>
<td>0.10</td>
<td>-0.11</td>
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<td>-3.47</td>
<td>0.01</td>
</tr>
<tr>
<td>Emotional-focused</td>
<td>0.48</td>
<td>0.43</td>
<td></td>
<td>14.16</td>
<td>0.01</td>
</tr>
</tbody>
</table>

*SD: Standard Deviation
Table 3. Summary of regression model, (the relationship) between emotional atmosphere of the family and the high-risk behaviors

<table>
<thead>
<tr>
<th>Variables</th>
<th>Components</th>
<th>B</th>
<th>β</th>
<th>T</th>
<th>P</th>
</tr>
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<tr>
<td>Stress coping strategies</td>
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<td>35.99</td>
<td>0.01</td>
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<td></td>
<td>Problem-oriented</td>
<td>-0.11</td>
<td>-0.12</td>
<td>-4.18</td>
<td>0.01</td>
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<td></td>
<td>Emotional-focused</td>
<td>0.48</td>
<td>0.43</td>
<td>14.25</td>
<td>0.01</td>
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Table 4. Summary of regression model, (the relationship) between the emotional atmosphere of the family and the high-risk behaviors

<table>
<thead>
<tr>
<th>Variables</th>
<th>Components</th>
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<th>β</th>
<th>T</th>
<th>P</th>
</tr>
</thead>
<tbody>
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<td>Emotional atmosphere of the family</td>
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<td></td>
<td>37.58</td>
<td>0.01</td>
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<tr>
<td></td>
<td>Emotional atmosphere</td>
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<td>-0.08</td>
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<td>0.01</td>
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<td></td>
<td>Family bonding</td>
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<td>0.18</td>
<td>6.30</td>
<td>0.01</td>
</tr>
<tr>
<td></td>
<td>Parental monitoring</td>
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<td>0.10</td>
<td>3.83</td>
<td>0.01</td>
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<tr>
<td></td>
<td>Family support</td>
<td>0.00</td>
<td>0.00</td>
<td>0.021</td>
<td>0.98</td>
</tr>
</tbody>
</table>

Conclusion:
Exercise performance reportedly has great effects on generally, the correlation coefficient between the emotional atmosphere of the family, coping strategies and aggressiveness and high-risk behaviors was equal to 34%. The coefficient of determination was equal to 0.12. In other words, 12% of the high-risk behaviors of the 9th grade students in Bandar Abbas are explained by the emotional atmosphere of the family and stress coping strategies. The results showed that the emotional atmosphere of the family dimensions including emotional atmosphere of the family (β = 0.07, p <0.01), family bonding (β = 0.13, p <0.01), and family support (β=0.11, p <0.01) had a significant relationship with high-risk behaviors of students. The parental monitoring dimension (p <0.02, β = 0.45) did not show a significant relationship with high-risk behaviors of students. On the other hand, problem-oriented (β= 0.11, p <0.01), and emotion-focused stress coping strategies (β = 0.43, p <0.01) had a significant relationship with high-risk behaviors of students.

To explain this finding, it can be said that psychosocial, cognitive and biological changes during adolescence and youth provide an unlimited number of opportunities for adolescents to engage in behaviors that are implicitly associated with the adoption of unhealthy or health-threatening life strategies. In the following, some family-related factors that predict the high-risk behaviors are mentioned. Making parental bond, for example, is one of the ways of raising children, which includes three factors of care, over protection and authoritarianism. In other words, parental bonds point to the children's assessment of the quality of their attachments to their parents. Some scholars believe that the type of parental bonds is closely associated with some psychological disorders in adulthood. They believe that the poor parental bonds cause psychosomatic personality disorders. In the meantime, the lack of maternal care, as an aspect of a poor bond, is associated with the pathology of the adult age and emergence of this personality trait. Poor paternal over protection also increases the authoritarianism, control and adjustment of the cognitive processes of the children. Based on the findings, social factors such as family bonding are the strongest predictor of alcohol consumption, smoking and other substances in adolescents that directly and indirectly predict the individual and social abilities of drug abuse (5).

Concerning coping strategies, it can be stated that ineffective coping strategies intensify stress effects on adaptability, and thus, adolescents will experience more stress and may turn into some high-risk behaviors as a way to reduce stress. In this way, a vicious circle is formed and will lead to more involvement of adolescents in risky behaviors. In contrast to the application of problem-oriented coping strategies, according to the situations, are associated with many positive outcomes such as self-esteem, positive self-efficacy and perceived competence in different domains. Therefore, it can be said that the results of this study also confirm this finding (14). The finding of the present study was consistent with
the findings of the studies conducted by Shuk (12, 15), Cynthia, and Wally Kamilowicz (16) and Raelene et al. (17).

The results of the second regression equation showed that the correlation coefficient between stress coping strategies and high-risk behaviors was equal to 0.33, and the coefficient of determination was equal to 0.11. In other words, 11% of the high-risk behaviors of the 9th grade students in Bandar Abbas are explained by stress coping strategies. The problem-oriented (β = -0.12, p < 0.01) and emotion-focused stress coping strategies (β = 0.43, p < 0.01) also had a significant relationship with the high-risk behaviors of children.

To explain this finding, it can be said that one of the characteristics of adolescence is rapid and inclusive changes in almost all aspects of life that may lead to a lot of psychological stress. Probably due to the lack of an internal controller and the use of problem-oriented strategy in stress coping skills, they are more prone to high-risk behaviors. In addition, it can be said that in problem-oriented coping, people are determined to accurately define the problem and examine the possibility of changing or mastering it to reduce the adverse effects of mental stress. In the emotion-focused coping, these actions are done with things like mental rumination, imaginative mapping or other conscious activities that are related to emotion regulation. This will increase the risk of high-risk behaviors (18). This finding is consistent with the results of Holland et al. (19) and Copeland (20).

In the third regression equation, the multiple correlation coefficient between the emotional atmosphere of the family and high-risk behaviors was obtained to be equal to 0.21. The coefficient of determination was equal to 0.045. In other words, 4.5% of the high risk behaviors of 9th grade students in Bandar Abbas are explained by the emotional atmosphere of the family. The results showed that emotional atmosphere of the family dimensions including the emotional atmosphere of the family (β = 0.08, p < 0.01), family bonding (β = 0.18, p < 0.01), and parental monitoring (β = 0.10 p < 0.01), had a meaningful relationship with high-risk behaviors of students.

To explain this finding of the present research, it can be said that individuals who have grown up in families with tumultuous emotional atmosphere cannot act comfortably when they are in inconsistent situations, due to their weakness in tolerating and dealing with the stressful situation. On the other hand, due to unstable reactions to stresses created in confusing situations, the likelihood of having impulsive and extreme behaviors by these people becomes very high, which, in addition to the lack of appropriate coping strategies, the tendency toward risky behaviors may be doubled in them (21). This finding is consistent with the findings of Harris, Mullan & Boisjoly (22); Zadeh Mohammadi & Ahmad Abadi (23), and Behzadpoor, Sadat Motahhar, & Godarzy (24).

In a general conclusion, it can be said that since the findings of this research have shown that family function is effective on high-risk behaviors, it is therefore necessary for administrators, teachers and middle school counselors to be trained through books, virtual networks, educational CDs and brochures in this area. Also, the results of this study showed that coping strategies are associated with high-risk behaviors among students. Therefore, it is imperative to teach students about the right ways to deal with stress through books, virtual networks, educational CDs and brochures in this area. Finally, it seems [necessary] to carry out qualitative or quantitative research to better clarify the subject matter of the present research.

References:


The relationship between problem solving and resilience and high-risk behavior in the adolescent population is explored in the current study. Several studies have investigated the role of spiritual well-being and coping strategies in risky behaviors among adolescents. A replication study of the structure of the adolescent coping scale: Multiple forms and applications of a self-report inventory in a counseling and research context was conducted. The structure of the adolescent coping scale: Multiple forms and applications of a self-report inventory in a counseling and research context was investigated. The association between stress, coping, and sexual risk behaviors over 24 months among African American female adolescents was examined. The relationship between parental bonding and self-assertiveness was evaluated in a sample of Chinese adolescents. The prevalence of cigarette smoking, alcohol drinking, and illegal drugs use among Iranian adolescents was reported. The relationship between problem solving and resilience and high-risk behavior in the adolescent population is explored in the current study.
بررسی رابطه میان سبکهای مقابله با استرس و جو عاطفی خانواده با رفتارهای پرخطر در دانش آموزان پایه اول متوسطه شهر بندرعباس

مظفر شهدوست 1 سید حمزه صدیق 2 حمید حقیقی 3

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نوبت پزشک هرمزگان سال بیست و دوم شماره انویل صفحات 349-362

چکیده

مقدمه:
نوجوانی دوره انتقالی از کودکی به بزرگسالی است. الگوهای رفتاری مهمی که می‌توانند در طول عمر بر زندگی فرد اثر گذارند، در این دوره شکل گیرند. از این رو، بررسی متغیرهایی مرتبط با الگوهای رفتاری به خصوص رفتارهای پرخطری، ضروری است.

روش کار:
هدف پژوهش حاضر بررسی رابطه جو عاطفی خانواده و روش‌های مقابله با استرس با رفتارهای پرخطری در دانش آموزان بود. جامعه آماری جمعیت 1129 مرکز حاضر و دانش آموزی 396 نفر بود. ابزارجمع آوری اطلاعات عبارت از مقایسه سلامت روانی، رفتاری، وزارت آموزش و پرورش وارید، بررسی به صورت جداگانه وارد معادله رگرسیونی شدند. نتایج نشان داد که 83 درصد تغییرات متغیر رفتارهای پرخطر را تبیین می‌کنند، همچنین نتایج نشان داد که متغیر جو عاطفی خانواده 99 درصد از تغییرات واریانس رفتارهای پرخطر را تبیین می‌کند.

نتیجه‌گیری:
در مجموع مطالعاتگفت که جو عاطفی خانواده به دنبال آن رفتارهای مقابله با استرس از متغیرهای مهم و مستمری با گروه رفتاری پرخطر در میان دانش آموزان محسن می‌باشد.

کلیدواژه‌ها: رفتار مقابله، پویایی خانواده، رفتار پرخطر، نوبت پزشک

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