

COSA (Coping Skills Assessment)

As we learned in the previous article, coping strategies are typically categorized into two categories: Adaptive (healthy) and Maladaptive (unhealthy). In 1966 (and then in 1984, with the help of Susan Folkman) Richard Lazarus further expanded on the concept of “adaptive” and “maladaptive” by breaking down adaptive strategies into two categories: Emotion-focused and Problem-focused. Lazarus believed that it’s not the stressor that matters as much as the type of resources you use to deal with it.

When a stressor can be changed by taking action, Lazarus and Folkman recommend using problem-focused techniques. If the stressor is long-term and/or not within your power to control, they suggest using emotion-focused strategies in order to help you deal with the feelings that are associated with the stressor. Unhealthy or “empty strategies” should be used as little as possible, if at all.

In our coping assessment (see more information on [COSA](#)) we expand on Lazarus and Folkman’s theory. Here’s how the coping strategies break down:



- ❖ **Problem-Focused Coping:** These methods of handling stress consist of taking action in order to change the stressor and/or resolve the issue that brought it about.
 - Problem-Solving: This involves actively looking for a solution to a stressful situation or at least improving the circumstances surrounding it. For example: Seeking the help of a professional, or getting advice from someone who has been through the same problem you are struggling with.
 - Information-Seeking: This consists of seeking out information to increase your understanding of the problem and how to deal with it. For example: Researching current solutions, treatments and therapies, local or online support groups, etc.

- Negotiation: This requires adjusting your goals, behavior, or mindset in order to accommodate the constraints of the stressful situation. For example: Negotiating a deadline extension so that you're less rushed; meeting someone halfway in order to resolve a conflict.
- ❖ **Emotion-Focused Coping:** Given that some problems are not within your ability to change (e.g. a death of a loved one, a break-up with no chance of reconciliation, dealing with long-term construction detours on your work route), the goal of these coping strategies are to manage the negative emotions surrounding the stressor.
 - Social Support: This can include looking for emotional support from friends, loved ones, a support group, or a therapist.
 - Positive Cognitive Restructuring: This involves changing the way you view a stressful situation in order to feel better about it. For example: Focusing on what you have gained rather than lost, or creating a gratitude journal.
 - Emotional Regulation: This consists of using relaxation techniques to help you achieve calmness, or finding outlets to release negative emotions in a healthy way, like exercising.
 - Distraction: Albeit a temporary solution, this technique consists of temporarily ignoring a stressful situation and simply having fun, like playing with your pet or watching a comedy.
- ❖ **Empty Coping Methods:** These coping strategies are generally not very helpful in stressful situations and could, in fact, make things worse.
 - Rumination: While a problem should be given its due consideration, once you've come up with a workable solution (or are waiting to receive more information) you need to let the issue go. When you think obsessively about a problem, endlessly overanalyze it, and lose sleep over it, you are engaging in rumination.
 - Avoidance: This simply involves avoiding what needs to be done in order to resolve an issue, or refusing to think about a problem at all (which is not necessarily easy).
 - Helplessness: This consists of giving up, conceding defeat, and not taking any action at all.
 - Social Withdrawal: While some people seek out the company and support of others when dealing with difficult emotions, those who engage in this defense will intentionally isolate themselves. They won't share their problem, answer calls or go out. They simply prefer to avoid being around people until they feel better.
 - Opposition: The complete opposite of social withdrawal, people who use opposition are more likely to be "in-your-face." They take their stress, frustration, and anger out on innocent people and/or blame others for their problems.



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