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Proactive Coping in Youth and Old Age as an Indicator of Identity Formation in an Anormative Context

Abstract

Objective: This paper provides a comprehensive investigation of coping with distress, with a focus on the proactive approach, which is of particular significance for individuals who manage identity transition periods. The researchers discuss the findings from two independent projects which analyzed individual variation in strategies for coping with difficult situations at two sensitive periods for identity development: adolescence and old age. Both studies were conducted between 2014 and 2016. In the first project, proactivity preferences were analyzed in a sample of 332 adolescents. The second project on proactive strategy was larger, involving a sample of 1,552 seniors. The Proactive Coping Inventory for Adolescents (PCI-A) and the Proactive Coping Inventory for Adults (PCI) were used in the respective studies.

Results: Our findings show that the strategies preferred by the adolescent group included proactive coping, looking for emotional support, and

preventive coping, whereas the results for the elderly group revealed a preference for looking for emotional support and reflective and preventive coping. Nevertheless, the proactive coping strategy was chosen by both adolescents and the elderly. The analysis demonstrated no statistically significant difference in the reflective coping strategy for the two age groups. **Conclusions:** These findings show that the assumptions of normative theories of human development are losing descriptive and explanatory functions in many contexts. Moreover, they argue for a more person-centered idiographic approach to studying the process of person development. This is how a growing body of decollective biographical pathways is being created (Loos, 2012).

Keywords: proactivity, adolescence, aging, transition, identity, medical practice, education

Introduction

Globalization (Bauman, 2000; Lee, 2005; Błachnio, 2011; Cierzniewska, 2017) has opened up multiple areas of development and self-improvement for the modern person, but has also created some issues. The periods which are the most critical are adolescence and old age, in which a clear pluralization of lifestyles occur (Błachnio, 2013, 2017). The number of opportunities available to an individual (Wrosch and Freund, 2001; Błachnio, 2006) can result in a prolonged delay to early adulthood (Arnett, 2000, 2015), and possibly to old age as well.

Therefore, in Erikson's perspective, significant temporal changes are identified within adolescence and late adulthood, each including key solutions based on the earlier "capital" collected throughout life, and requiring that all the previous conflicts be dealt with. If they are satisfactorily resolved, it may lead to the achievement of a successful identity integration. However, in each of the periods in question, such integration has different constitutive and developmental meanings. It should be emphasized that in both adolescence and late adulthood the temporal perspective plays a special role (Erikson, 2002; Puchalska-Wasył & Oleś, 2008).

All spheres of human existence (ethos, soma, and psyche) are subject to changes which make it necessary to re-define oneself and accumulate the potential needed to the self-transgression. In Erikson's view, they include a longing for rebirth (Erikson, 1997, 2002). Both self-exploration and self-commitment, which are the key processes that shape an individual's identity, require an active "I" with a sense of authorship, self-directedness, and self-reliability (Erikson, 2002; Sedikides & Skowroński, 2004; Obuchowski & Błachnio, 2011). In this process of re-adaptation, the presence of other people is very important, as it provides identification patterns, as well as the opportunity to "confirm oneself," read the meanings, and finally to re-upgrade oneself and others through others (Erikson, 1997, 2002; Ricoeur, 2005).

The cultural patterns also give content to the ethos, soma, and psyche that creates a buffer against the sense of meaninglessness of one's existence (Boski, 2008). However, the modern excess of offers and opportunities introduces ambiguity to individual choice (Bauman, 2008). This forces people to look for, select, and interpret information. They create and recreate meanings and determine goals and the ways of achieving them (Baumeister, 1998). A reflective approach to one's dilemmas in life prevents one from being a mere passive viewer or the subject of others' manipulation. The sense of authorship and having an influence on reality protect one from negative information about oneself (Taylor & Brown, 1988). Such a synthetic description of the changes taking place in both adolescence and late adulthood illustrates certain similarities of developmental tensions and highlights common areas of the individual's commitment in going to another level in epigenesis.

Therefore, the global context of human life and development may be seen as a set of stressful situations which a person has to cope with. Depending on the strategy one adopts, the effects of one's actions differ in terms of expenditure and benefits. The need to take up developmental challenges and prepare new coping strategies, which occurs in both phases, is related to the optimization of individual development. This problem systemizes the model of proactive coping (Schwarzer & Taubert, 1999, as cited in Greenglass, 2002), which (1) links planning and prevention with

the proactive mechanism of self-regulation that includes the intentional determination and consistent fulfilment of goals, (2) aims at ambitious and self-improving goals – a proactive approach – with the identification and use of social resources, and (3) proves the relationship between proactivity and the strategy of emotional coping (Greenglass, 2002). Proactivity positively correlates with well-being, the quality of the individual's life (Gamrowska & Gałkowska-Bachanek, 2014), and their life energy (Ogińska-Bulik, 2009).

In this aspect, proactive behavior, as compared to reactive behavior, becomes adaptive. It is not enough to diminish stress (Carver et al., 1989; Matthieu & Ivanoff, 2006; Walinga, 2008). Ideally, one anticipates difficult situations and, through proactive actions, prevents or limits the distress before it even occurs.

This proactivity is generally associated with youth. However, due to the economic environment being driven by new technologies and being globally competitive, many young people lose their stability and narrow their temporal perspective to the present. Over the past few decades, the retrospective orientation of seniors has also diminished. As a consequence of the "silver revolution," many elderly people are present-oriented, and some of them are even future-oriented.

These changes in the functioning of individuals and society raise the question of whether and to what extent young people and seniors show proactive coping in difficult situations. In case of youths, globalization leads to the deregulation of their life paths, especially in the educational and professional realms. Society's expectations of a young person are now multiplied. The process of learning has to be dynamic, and it should be fulfilled in an intercultural, virtualized space. Education does not only take place in a formal way, but it is omnipresent and easily accessible, which results in the fact that the only problem is selecting what is worth learning and understanding. Coping with the excess of opportunities generates anxiety and uncertainty, as society does not offer ready solutions. In the case of the "silver generation," the distress stems from the opportunity to counterbalance individual and environmental resources, on the one hand (Martin et al., 2001), and the pressure of matching the

model of aging in an attractive manner, on the other hand (Błachnio, 2017). Successful lifestyles of youths and seniors are culturally defined by extreme individualism (not being a burden to anyone); by emotionality (controlling and anticipating emotions, remaining distant in social interactions); by focusing on tasks and effectiveness (bringing added value makes one important); by consecutive projects (which become the meaning of life); and by the aggressive estheticization of life and body (illness, old age, and weakness are marginalized or even pushed out of the social sphere). The results of such cultural oppression are very serious for both groups. There is a constant sense of inadequacy that accompanies many people or even social groups, leading to destructive tendencies from depression or suicide to separatist movements and social revolutions (Cierzniewska, 2017; Marody, 2015). Therefore, for both groups, reactive or even preventive actions should be replaced with proactive activities.

Proactive entities are more efficient because they know that results do not depend on luck, coincidence, or favorable external circumstances. Their coping strategy in difficult situations is based on their own responsibility, vision of the future, and awareness of the available resources (Greenglass, 2002). At the same time, they obtain the basis of positive self-valuation, which is precious for the construction of the "I" at every stage of development (Sedikides & Skowroński, 2004).

Objective

The purpose of this study was to explore if coping strategies patterns differ in adolescence and aging. The research problem was to find out whether proactivity preferences occur during adolescence and are limited to this period. Changes due to globalization in economic mobility, the deregulation of life paths, and the self-exploitation of the individual (Kowalik, 2015) argue for a revision of the normative future orientation among adolescents. In turn, the widely disseminated paradigm of a successful, active old age leads seniors to abandon past orientation in favor of present or even future orientation. The subject of our empirical verification was

to what extent the reconstruction of “coming of age” and “coming to wisdom” changes an individual’s preferences for coping strategies. The research was conducted in two separate projects using the same tool, but adapted to the given age groups; the Polish version of the Inventory of Coping with Difficult Situations was used (Pasikowski et al., 2002).

Method

The data were collected between 2014 and 2016 in two independent projects. One related to various aspects of the functioning of adolescents, while the second focused on the determinants of successful aging among the elderly in Poland. The first study was carried out collectively in five schools in a population of pupils between the ages of 13 and 15, with a total of 332 completed questionnaires. For the selection criteria, please refer to Cierzniewska et al. (2017). The inclusion criteria for the group of elderly participants were as follows: at least 60 years of age, absence of diseases that may cause death within 6 months, and absence of significant cognitive disorders. The study sample included 1,555 respondents conducted via snowball sampling. The research was carried out individually with each participant being fully informed of their rights and the objective of the study as well as being asked to express their willingness to participate in the study. Three incomplete questionnaires were not taken into account in the analysis.

As previously mentioned, the study on proactively coping with difficult situations was carried out using the Polish version of the Proactive Coping Inventory for Adults (PCI) as well as the Proactive Coping Inventory for Adolescents (PCI-A) (Pasikowski et al., 2002). The tool in both versions consists of 55 items. The respondents gave their answers on a modified 4-point Likert scale (1 – never; 4 – always). The questionnaire included subscales describing various strategies for coping with difficult situations:

- (1) proactive coping scale (PCS; 14 items) – the formulation and fulfillment of objectives;

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- (2) reflective coping scale (RCS; 11 items) – the tendency to think about possible actions and compare their potential effectiveness;
 - (3) strategic planning scale (SPS; 4 items) – the process of creating goal-orientated action plans in which larger tasks are divided into smaller sub-tasks that are easier to carry out;
 - (4) preventive coping scale (PrevCS; 10 items) – predicting possible threats and stressors and preparing for them even before they fully manifest;
 - (5) instrumental support seeking scale (ISSS; 8 items) – the search for information, advice, and help from other people;
 - (6) emotional support seeking scale (ESSS; 5 items) – dealing with emotional distress by sharing one's feelings with others, evoking kindness, and searching for the company of friends; it is a kind of an emotional catharsis "with the use" of significant others; and
 - (7) avoidance coping scale (ACS; 3 items) – the tendency to avoid actions in the face of a difficult situation (Greenglass et al., 1999).

The collected data were analyzed using Statistica 12.5.

Results

A total of 332 pupils (181 females [56%], 126 males [34%], and 25 missing data [7.5%]) participated in the adolescent study. The mean age was 14.98 years (Sd = 0.82).

The sample of 1,552 seniors consisted of 840 females (54%) and 712 males (46%). The mean age of the participants in this project was 72.79 years (Sd = 7.15). The age and sex distribution in both samples are shown in Table 1.

Table 1. Age and Sex Distribution in the Samples

Variable		Seniors (N = 1,552)		Adolescents (N = 332)	
		Women n = 840	Men n = 712	Women n = 181	Men n = 126
Age (years)	Average (Av)	72.49 (7.16)	73.16 (7.13)	14.94 (0.79)	15.04 (0.88)
	Min.–Max.	60–93	60–94	14–16	14–16

The reliability of the PCI and PCI-A was analyzed using Cronbach’s α . The coefficients for each sub-scale are presented in Table 2, which also shows the values of Cronbach’s α for the Canadian version of the tool and its Polish adaptation (Pasikowski et al., 2002).

Table 2. Cronbach’s α Values for Each Sub-Scale on the Proactive Coping Inventory Questionnaire

Sub-scales	Canadian (α)	Polish adaptation (α)	PCI (α)	PCI-A (α)	No. of items in the sub-scale
Proactive Coping Scale (PCS)	0.85	0.87	0.84	0.76	14
Reflective Coping Scale (RCS)	0.79	0.86	0.86	0.83	11
Strategic Planning Scale (SPS)	0.83	0.74	0.68	0.63	4
Preventive Coping Scale (PrevCS)	0.71	0.79	0.76	0.74	10
Instrumental Support Seeking Scale (ISSS)	0.85	0.81	0.84	0.85	8
Emotional Support Seeking Scale (ESSS)	0.73	0.72	0.72	0.76	5
Avoidance Coping Scale (ACS)	0.61	0.67	0.68	0.55	3

The values of Cronbach’s α for the PCI sub-scales (adults) fell within the range of 0.68 to 0.86, which are comparable to the results of the Canadian and Polish samples collected during the cultural adaptation of the tool (Pasikowski et al., 2002). The Cronbach’s α values for the PCI-A (youths) sub-scales were slightly weaker; the weakest value of only

0.55 was obtained in the Avoidance Coping sub-scale. The value was a little higher for Strategic Planning (0.63), but this was still below the reference level of Cronbach's α (0.70). The shortest sub-scales included three and four items; therefore, we may assume that the values were satisfactory.

Table 3. Inter-Correlations Between the PCI Sub-Scales

Sub-scales	Canadian (α)	Polish adaptation (α)	PCI (α)	PCI-A (α)	No. of items in the sub-scale
Proactive Coping Scale (PCS)	0.85	0.87	0.84	0.76	14
Reflective Coping Scale (RCS)	0.79	0.86	0.86	0.83	11
Strategic Planning Scale (SPS)	0.83	0.74	0.68	0.63	4
Preventive Coping Scale (PrevCS)	0.71	0.79	0.76	0.74	10
Instrumental Support Seeking Scale (ISSS)	0.85	0.81	0.84	0.85	8
Emotional Support Seeking Scale (ESSS)	0.73	0.72	0.72	0.76	5
Avoidance Coping Scale (ACS)	0.61	0.67	0.68	0.55	3

As can be seen in Table 3, the PCS positively correlated with the PrevCS, RCS, and SPS. Similar results were obtained for the Canadian version of the tool as well as the Polish adaptation of the PCI (Pasikowski et al., 2002). Weaker positive correlations were obtained between the PCS and the ESSS, as well as between the PCS and the ISSS. The weakest negative correlation occurred between the PCS and the ACS. Those correlations also occurred in the Canadian and Polish measures, after the scale adaptation.

Table 4. Inter-Correlations Between the PCI-A Sub-Scales

Variable p < 0.05;	N = 332								
	M	St. Dev.	(PCS)	(RCS)	(SPS)	PrevCS	(ISSS)	(ESSS)	(ACS)
(PCS)	39.71	5.72	-	0.40	0.28	0.45	0.13	0.16	-0.33
(RCS)	29.94	5.65		-	0.48	0.67	0.27	0.15	-0.11
(SPS)	9.74	2.45			-	0.54	0.26	0.19	-0.12
PrevCS	28.31	4.63				-	0.21	0.17	-0.15
(ISSS)	21.57	4.87					-	0.72	-0.14
(ESSS)	14.22	3.36						-	-0.18
(ACS)	6.92	1.88							-

From a psychometric perspective, the results obtained from the PCI-A were weaker. In the correlation matrix, the direction of relations was maintained, but the values of the coefficients were weaker. The only exception was the higher value of the correlation coefficient between PCS and ACS, which was -0.33.

**Table 5. Strategies for Coping with Difficult Situations
Among Adolescents and Seniors**

Project on adolescence	Students (N = 332)		Project on aging	Seniors (N = 1,552)	
	M	St. Dev.		M	St. Dev.
(PCS)	39.71	5.72	(PCS)	35.82	6.53
(RCS)	29.94	5.65	(RCS)	29.34	5.89
(SPS)	9.74	2.45	(SPS)	10.20	2.43
PrevCS	28.31	4.63	PrevCS	26.68	4.88
(ISSS)	21.57	4.87	(ISSS)	20.07	4.41
(ESSS)	14.22	3.36	(ESSS)	13.52	2.88
(ACS)	6.92	1.88	(ACS)	7.33	1.95

The results of the study show that the participants displayed a similar level in all of the strategies, without a definite prevalence of any of them. Basically, the strategy for proactive coping was preferred by the youths, while for the seniors it was the fourth most preferred strategy. In the case of the RCS, the average values were similar in both groups. In comparison to the youths, the seniors obtained higher results in the SPS and ACS. Those strategies were not preferred by them. They obtained the highest results in three sub-scales: looking for emotional support, as well as reflective and preventive coping. However, the strategies preferred by the youth included: proactive coping, ESSS and PrevCS. They also displayed a relatively high value in the RCS and ISSS. However, they clearly did not prefer behavior related to avoidance or building a strategy.

Discussion

The study indicated that the nature of developmental challenges faced by people “coming of age” and “coming to wisdom” are relatively similar. In both adolescence and old age, an individual (re)discovers their own potential and (re)constructs their identity. Young people attempt to achieve autonomy, new social status, and high self-esteem at the beginning of adulthood, while seniors reconstruct their identity in a new, culturally depreciated situation of a person at post-production age. In this case, it is also necessary to fight for one’s autonomy, social status, and meaning in life.

The results indicate some differences between the two groups, although both obtained relatively high average results in the scales of proactively coping with difficult situations. In a developmental sense, this may confirm adaptive functioning and a mastered ability to anticipate the future and manage change. In the “fluid reality,” those are the key competences necessary to achieve success – both individually as well as for entire generations.

The results for the seniors indicate that they most often looked for emotional support and more often dealt with stress through reflective

and preventive coping based on anticipating the further, uncertain future. They were less likely to use the instrumental way of coping with stress. The seniors also used avoidance, but this strategy was the least preferred action out of all available options. This means that as they get older, people who face new and difficult situations look for advice, information, and support from family and friends before resolving them. Although they still have a need for a high level of autonomy, they are less independent in gathering the knowledge required to make decisions. Through mobilizing and wisely managing their own resources and taking reflective and preventive actions in a stressful situation, seniors try to eliminate difficulties in the maximum possible way. The sense of uncertainty induces them to create protective mechanisms, which is not surprising when we take into account their awareness of the passage of time, the frequent deaths of their loved ones, and their limited financial resources and increased costs of medical care due to the gradual loss of health and fitness. The strategic planning and avoidance coping methods they adopted are likely to be logically connected and to result from an increased awareness of the passage of time, a loss of vital energy and social activity, and an ability to abandon less important commitments. Therefore, what we are dealing with is the "economy of expenditure" of accumulated personal resources and time, which at that developmental stage must be a significant factor in commitment and activity. Late adulthood, as our research has also confirmed, is characterized by deep reflectiveness, that is, weighing and choosing what is worthwhile (Luyckx et al., 2006).

In both groups, comparatively high results were found for the strategy of reflectively coping with stress. However, reflectiveness is not a simple process. Deep post factum reflection is the most desirable and consequential in terms of life and development. The second type is broad reflection, which is the thought process that precedes action and prepares a person for making a decision; the third type is ruminative reflection, which hinders activity (Crocentti et al., 2008; Luyckx et al., 2006). The third type of reflection is characterized by destructive, ineffective "emotional rumination" of previous experiences and negative events which may block proactivity and may occur in both the broad and deep

reflection phases (Słowińska & Oleszkiewicz, 2012). As can be seen from the results obtained from the seniors, some of them choose the avoidance strategy, which may be the consequence of ruminative reflection (Luyckx et al., 2006).

Among the adolescents, the proactive coping strategy was important, but was connected to both support from family and friends and preventive coping. In addition, the young people often used a reflective strategy and instrumental support, but they hardly ever used strategic planning. The high tendency for them to choose the first of these strategies is a natural consequence of the developmental phase (searching for, experimenting, and committing to even risky activities). Existential dependence on parents and risk-taking, which are often experienced by young people, make them reach for the easiest and the most unconditional emotional support, which they usually receive. This is a mechanism that is practiced from birth; however, they should gradually become independent of it. While analyzing the research results, we may assume that such a mechanism is still strong. In adolescence, preventive coping is also a natural and developmentally beneficial strategy for long-term future planning, which includes making educational and professional choices. However, it should be noted that at that stage of development young people consult with their families and that the consequences of their choices have an effect not only on themselves but also their families.

In addition, the reflective and instrumental support strategies were often chosen by the adolescents. The instrumental support strategy refers to coping with a lack of knowledge: collecting information or developing skills that make it possible to perform particular tasks. However, strategic planning (adopting certain goals and planning to fulfill them within shorter periods of time) was not selected very often; therefore, we may hypothesize that these are reactive behaviors. In other words, the adolescents focus on coping with external tasks and in order to deal with them they look for emotional and/or instrumental support. This means that their proactivity is strongly channeled, which must make it difficult for them to solve crises brought about by their developmental phase, in which case the crises last longer. Another conclusion could be that we are dealing

with a broad – penetrating – reflection (instrumental strategy), which tests the individual's power in a relatively safe social and educational environment, characterized by existential security – the strategy of emotional support (Luyckx et al., 2006). Therefore, the results in the strategic planning and reflectiveness scales were lower. Likely because of the strong influence of their parents, prevention is a useful and preferable strategy for them. It is important to note that girls clearly prefer strategies related to looking for emotional and instrumental support, a view which was supported by Ficková (2009).

These findings do not fully tackle all of the issues related to difficult situations and the coping strategies adopted by adolescents and the elderly. Future research projects should focus on attempts to clarify the inter-dependence between proactivity and emotionality (fear or aggression) as well as wellbeing. This may help us better understand the conditions under which youths go through the transition to adulthood and in which seniors adapt to the process of aging and old age. The initial results suggest that the seniors who prefer proactive coping strategies present a higher quality of functioning (Brzezińska, 2011; Błachnio, 2017) as well as more positive attitudes towards old age (Gamrowska & Gałkowska-Bachanek, 2014). Further exploration of these issues may help us prepare more effective forms of re-adaptation and re-education for old age. Similarly, the research could be made more detailed by introducing tools to identify the domains of withdrawal and/or proactively coping with stress over a lifetime (Crocetti et al., 2008; Luyckx et al. 2008; Kłym and Ciecucha 2015).

Conclusions

A deeper understanding of the similarities and differences in the coping strategies of young and older adults can facilitate support during these critical developmental phases, that are focused on the processes of constructing (for adolescents) and reconstructing (for seniors) their identities. Meanwhile, education and professional training still refer firmly to theories that are called into question by the changes observed in society

and within individuals (Olson & Tooman, 2012). On the whole, it results in the limited effectiveness of education on clinical practice. As for the discussion on strategies for proactively coping with difficult situations, the analyses argue in favor of functional representativeness on behalf of adolescents as well as seniors.

Proactivity in late adulthood is different from the proactivity of adolescents, and it is safe to say that the results justify such an interpretation. In addition, theoretical descriptions based on psychoanalysis suggest that there are qualitative changes in people's behavior which continue in their development throughout their life. The seniors we have surveyed mainly coped with an uncertain future by engaging in proactive coping, but they used slightly different strategies for "managing" their lives than adolescents. In late adulthood, the less frequent use of new knowledge and reflection, which may become more ruminative, may have significant consequences for the individual or society at large. Therefore, it deserves further research attention. Adolescents have a tendency to mix proactive and reactive coping strategies, which may be a consequence of their developmental conditions and may have an impact on the length of the transition phase to adulthood, which requires more responsibility.

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