



## Coping self-efficacy mediates the effects of negative cognitions on posttraumatic distress

Roman Cieslak<sup>a,c,\*</sup>, Charles C. Benight<sup>a,b</sup>, Victoria Caden Lehman<sup>b</sup>

<sup>a</sup> Trauma, Health, and Hazards Center, University of Colorado at Colorado Springs, 1420 Austin Bluffs Parkway, Colorado Springs, CO 80918, USA

<sup>b</sup> Department of Psychology, University of Colorado at Colorado Springs, 1420 Austin Bluffs Parkway, Colorado Springs, CO 80918, USA

<sup>c</sup> Department of Psychology, Warsaw School of Social Psychology, 19/31 Chodakowska, Warsaw 03-815, Poland

### ARTICLE INFO

#### Article history:

Received 11 July 2007

Received in revised form

24 January 2008

Accepted 14 March 2008

#### Keywords:

Negative cognitions

Coping self-efficacy

Posttraumatic distress

### ABSTRACT

Although cognitive distortions have predicted posttraumatic distress after various types of traumatic events, the mechanisms through which cognitive distortions influence posttraumatic distress remain unclear. We hypothesized that coping self-efficacy, the belief in one's own ability to manage posttraumatic recovery demands, would operate as a mediator between negative cognitions (about self, about the world, and self-blame beliefs) and posttraumatic distress. In the cross-sectional Study 1, data collected among 66 adult female victims of child sexual abuse indicated that coping self-efficacy mediated the effects of negative cognitions about self and about the world on posttraumatic distress. The same pattern of results was found in a longitudinal Study 2, conducted among 70 survivors of motor vehicle accidents. Coping self-efficacy measured at 1 month after the trauma mediated the effects of 7-day negative cognitions about self and about the world on 3-month posttraumatic distress. In both studies self-blame was not related to posttraumatic distress and the effect of self-blame on posttraumatic distress was not mediated by coping self-efficacy. The results provide insight into a mechanism through which negative cognitions may affect posttraumatic distress and highlight the potential importance of interventions aimed at enhancing coping self-efficacy beliefs.

Published by Elsevier Ltd.

### Introduction

Several theoretical approaches have suggested that cognitive factors may contribute to the development of posttraumatic stress disorder (PTSD) and are influential during recovery processes (e.g., Brewin, Dalgleish, & Joseph, 1996; Ehlers & Clark, 2000; Foa & Rothbaum, 1998; Horowitz, 1976; Janoff-Bulman, 1992). Janoff-Bulman (1992) emphasized the challenges related to beliefs about the world as a benevolent and meaningful place and the worthiness of the self. Ehlers and Clark (2000) focused on the sense of threat appraisals specifically related to the trauma and the development of traumatic memories. Brewin et al. (1996) emphasized the role of verbally and situationally encoded memories. Finally, Foa and Rothbaum (1998) detailed specific negative schemas about the world and self as an important cognitive component related to trauma recovery. Brewin and Holmes (2003) provided an in-depth critique of these different cognitive theories. In this paper, we are particularly focused on Foa and Rothbaum's (1998) model.

\* Corresponding author at: Trauma, Health, and Hazards Center, University of Colorado at Colorado Springs, 1420 Austin Bluffs Parkway, Colorado Springs, CO 80918, USA. Tel.: +1 719 262 4180; fax: +1 719 262 4166.

E-mail address: [rcieslak@uccs.edu](mailto:rcieslak@uccs.edu) (R. Cieslak).

Besides trauma-specific theories, the mechanisms in which cognitive factors affect PTSD development and recovery may be explained by other more general approaches to human adaptation to stressful situations, such as social cognitive theory (Bandura, 1997). Social cognitive theory is a broad theory of human motivation and behavior with specific emphasis on self-efficacy beliefs. In this set of investigations, we were particularly interested in the mediational role of coping self-efficacy between more general negative cognitions and posttraumatic distress. This hypothesis was tested in two studies. The first was a cross-sectional study conducted among adult victims of child sexual abuse (CSA) (Study 1). The second was a longitudinal study investigating the recovery process among motor vehicle accidents survivors (Study 2).

#### *Negative beliefs about the world and self and their effects on posttraumatic distress*

Negative cognitions related to the self and the world have been seen as important in the development and maintenance of PTSD symptoms after trauma. According to Foa and Rothbaum's (1998) emotional processing theory, two broad categories of negative cognitions mediate the effects of traumatic events on PTSD development and maintenance. The first refers to a belief that the world is extremely dangerous and the second reflects victims' beliefs about being incompetent. These cognitive distortions after trauma are usually measured by means of the Posttraumatic Cognitions Inventory (PTCI; Foa, Ehlers, Clark, Tolin, & Orsillo, 1999), which distinguishes three negative cognitions: negative cognitions about self, negative cognitions about the world, and self-blame.

Many cross-sectional studies yielded that these PTCI scales correlated positively with PTSD symptoms (Foa et al., 1999; Kolts, Robinson, & Tracy, 2004; Laposa & Alden, 2003), depression (Foa et al., 1999), and anxiety (Foa et al., 1999). The PTCI scales also discriminated between trauma victims with and without PTSD (Beck et al., 2004; Foa et al., 1999). The PTCI total score predicted Acute Stress Disorder following motor vehicle accident and non-sexual assault (Nixon & Bryant, 2005). Kolts et al. (2004) demonstrated that negative cognitions predicted PTSD symptom level after controlling for depression. In a longitudinal study of a sample of firefighters, Bryant and Guthrie (2005) showed that pre-trauma negative cognitions about self predicted PTSD symptoms. However, other negative cognitions indexed by the PTCI (along with the pre-trauma PTSD symptoms, the number of traumatic events, and severity of the worst trauma) were not predictive of PTSD symptoms measured at follow-up.

There is also evidence suggesting that the self-blame subscale of the PTCI does not explain PTSD symptoms, at least in some samples of trauma survivors (e.g., motor vehicle accidents survivors; Beck et al., 2004). These results indicated that cognitions measured with the PTCI may operate in different ways. Finally, experimental research demonstrated that an intervention aimed at changing negative cognitions after trauma may result in more positive beliefs and therefore less severe posttraumatic distress (Foa & Rauch, 2004).

Although these results generally support the assumption that negative cognitions are related to PTSD symptoms, the effects of negative cognitions measured with the PTCI scales on posttraumatic distress are not always clear. Moreover, previous research does not provide evidence related to the mediational processes by which negative cognitions may influence posttraumatic distress. Further research investigating mediational models of cognitive mechanisms is critical to understanding these processes. In addition, studies employing longitudinal designs are needed. Although several mechanisms have been offered to explain the influence of negative thoughts on PTSD development and maintenance (Brewin & Holmes, 2003; Ehlers & Clark, 2000; Foa & Rothbaum, 1998), the mediating effect of trauma survivors' beliefs about their capabilities to cope with trauma has not been investigated.

#### *Coping self-efficacy and posttraumatic distress*

Trauma survivors' self-beliefs of coping capability (i.e., coping self-efficacy) are critically important for understanding the unfolding coping response to trauma and integral to the self-evaluative mechanisms of human adaptation (Benight & Bandura, 2004). Coping self-efficacy (CSE), a belief in one's ability to cope with posttraumatic stress demands, affects various aspects of human functioning through four processes: cognitive, motivational, affective, and environmental selection (Bandura, 1997). All of these processes may be involved in development and maintenance of posttraumatic distress (Benight & Bandura, 2004). Research on trauma-specific CSE showed that CSE predicted PTSD symptoms following different types of traumatic events, even after controlling for the influence of other variables (Benight et al., 1997; Benight, Flores, & Tashiro, 2001; Benight, Ironson et al., 1999). Moreover, studies on trauma-specific CSE indicated that the effects of some trauma-related factors on posttraumatic distress may be mediated by CSE. For example, in a longitudinal study, CSE mediated the effects of acute stress response on PTSD symptoms and global distress measured 1 year after flood and fire disaster (Benight & Harper, 2002). In a longitudinal study of Hurricane Andrew survivors, CSE mediated the influence of lost resources on subsequent distress (Benight, Ironson et al., 1999). Among Hurricane Opal survivors the effects of loss of resources and social support on trauma-related distress was mediated by CSE. Perhaps more pertinent to the present investigation, CSE mediated the effect of a cognitive factor, optimism, on posttraumatic distress (Benight, Swift, Sanger, Smith, & Zeppelin, 1999).

Overall, these studies exploring relationships between CSE and posttraumatic distress indicated that enhanced CSE helps to manage psychological recovery after trauma. Importantly, some studies testing the mediating role of CSE demonstrated that the level of CSE is influenced by the loss of resources, social support, and optimism.

متن کامل مقاله

دریافت فوری ←

**ISI**Articles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات