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Coping Strategies As Pillars Of Posttraumatic Growth Among Widows

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Abstract

During the journey of life, one has to face so many challenges. For the smooth sailing of ship of life in the face of an inevitable dreadful storm, one has to accommodate oneself by adopting certain adaptive/maladaptive coping strategies, which fuel the pursuits that lead to enhanced psychological growth. After pondering over these notions, the present study is an attempt to explore the coping strategies used by rural Indian widows which may result in their posttraumatic growth. A purposive sample of 100 literate widows, aged 30-50 years, was drawn from the rural areas of Haryana and Punjab states with five years of married life and at least one year of widowhood. Widow's coping strategies and post traumatic growth were assessed by using reliable and valid scales/tests. Descriptive statistics was computed which indicated above average level of posttraumatic growth and more usage of avoidance oriented coping strategies followed by approach-oriented strategies, thereby indicating coping flexibility as per demand of the situations. Further correlational analysis indicated the significant and positive correlation of various types of coping strategies with posttraumatic growth (overall and its various domains). Problem solving (an approach oriented coping strategy) emerged as a robust predictor of overall PTG and its various domains except the two domains such as "new possibilities" and "appreciation of life". Conversely positive reappraisal (an avoidance cognitive strategy) was found to be the only strategy which completely failed to predict overall PTG and any of its domain. The current findings have highlighted the fact that both types of coping strategies (approach as well as avoidance) played a stringent role in growth aftermath trauma of death of a husband.

Key words: Post traumatic Growth, Coping Strategies, Widows.

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During the trajectory of life, one has to face so many challenges and has to maintain equilibrium not only to survive but to thrive in life. Behavior is the most immediate and effective way for individuals to respond to environmental challenges by adopting flexibility to cope up with the existing scenario. Coping has been defined as "the process of managing external and internal demands that are perceived as taxing or exceeding the person's resources". Coping is a crucial determinant in the face of traumatic event with its outcome depending largely on the types of strategies employed. Lazarus (1984) has categorized coping strategies into two types (i) Problem focused coping strategy refers to elimination of stressor by either moving away from stressor or learning new skills. (ii) Emotion-focused coping strategy refers to alleviation of distress by minimizing, or preventing the emotional components of a stressor. It may include techniques of seeking social support, reappraisal, self-control, avoidance and distancing oneself.

Coping plays a significant role in the face of crises of life. There is an innate tendency in human beings to restore balance even after getting imbalanced during the adverse circumstances of life. As Freud stated that there is an inborn desire to reduce tension, hence maintain equilibrium. Later on, Maslow (1954) and Rogers (1961) emphasized upon an innate tendency to grow leading to a state of self-actualization. Further Erikson (1963) emphasized upon the psycho-social development of humans in terms of eight stages. At each stage one has to face crisis. For adequate growth one has to come out of that crisis successfully by adopting certain coping strategies. These, crises are part and parcel of life. They are not essentially destructive in nature; they may provide an opportunity to grow and develop in life. Hence some people experience growth after facing crises of life which is called post-traumatic growth (PTG). Calhoun and Tedeschi (1999, 2001) defined post-traumatic growth in terms of positive psychological change experienced as a result of struggle with high challenging life circumstances. However earlier in the ancient times Hinduism, Buddhism and Islam focused upon transformative power of suffering (Tedeschi and Calhoun, 1995). During 20th century a good number of clinicians addressed the ways in which critical life crises offered opportunities for positive personal change (e.g. Frankle, 1963; Caplan, 1964; Dohrenwood, 1978; Yalom, 1980).There is overwhelming literature related to growth after facing trauma of loss of loved ones (Calhoun and Tedeschi 1989 and 1990; Edmonds and Hookre, 1992; Hogam, Morse and Tasam, 1996; Nerken 1993;Taku, Tedeschi and Cann, 2004; Zhang, Wang, Yao, Luo, Li, Hung, Li, Yin and Zhang, 2016; Roderiguez-Rey, 2017).

There are many internal and external factors such as personality traits, core self-evaluation traits and coping styles which affect the process of posttraumatic growth. There is a wealth of

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empirical evidences which revealed that approach-oriented coping especially problem focused coping style proved to be effective in handling various types of trauma which may be related to chronic illnesses (such as depression, cancer, HIV/AIDS), natural disasters (e.g. earthquakes), war terror, loss of loved ones (Widows, Jacob, Booth-Jones and Field, 2005) ultimately result in post-traumatic growth in targeted sample. Besides problem focused coping style there are other coping styles such as emotion focused (i.e. avoidance. Street, Gibson, Daus and Holohan, 2005), cognitive coping strategies (i.e. positive reinterpretation and positive reframing, Widows, Jacob, Booth-Jones and Field, 2005) appeared to play a significant role in leading to growth aftermath various types of trauma.

After going through such a vast literature related to various types of trauma which resulted in PTG, the current researcher found a very handful of studies related to bereavement particularly the trauma of the death of husband and PTG with specific reference to Indian rural widows. Thus, the researcher decided to explore coping styles adopted by rural Indian widows leading to a state of growth aftermath trauma. The following objectives were formulated.

Objectives

1. To explore post traumatic growth among widows.
2. To identify and highlight the coping strategies adopted by rural widows.
3. To examine the relationship of various types of coping strategies with post traumatic growth of rural widows.
4. To highlight the predicting power of various types of coping strategies with regard to posttraumatic growth among rural widows.

Method

Design

A correlation design was used in the current research work.

Sample

In the present study a purposive sample of 100 literate rural widows (i. e. who can read and write Hindi language) both employed and unemployed, aged 30 years to 50 years, at least 5

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years of marriage and one year of widowhood was drawn from the rural areas of Haryana and Punjab, India.

Tools

In the current study the following tools were used.

1Post traumatic Growth Inventory (PTGI, Tedeschi and Calhoun, 1996): -

It consists of 21 items, to be answered on a 6-point Likert scale ranging from 0 (i.e. do not experience this change as a result of my crisis) to 5 (i.e. experienced this change to a very great degree as a result of my crisis). It consists of five major domains i. e. Relation to others (7items), New possibilities (5items), Personal strength (4 items), Spiritual changes (2 items), and Appreciation of life (3 items). The range of scores is 0-5, where scores up to 2 indicates low growth, scores >2 to 3 indicates average growth whereas scores >3 to 4, high and>4 to 5 refers very high level of post traumatic growth. The internal consistency is indicate found be .90 and test retest reliability is found to be r=.71. The positive moderate level of correlation with optimism, extroversion, openness and religion participation and negative correlation with neuroticism indicate that the inventory has quite good concurrent and discriminate validity.

In the present research work Hindi version of PTGI was used. English version of PTGI was translated in Hindi by the current researcher by using back translation technique. The Cronbach's alpha was found to be .85.

2Coping response Inventory: Adult form (CRI – Adult, Moos, 1993)

The adult form of Inventory (CRI adults) measures eight different types of coping responses to stressful life circumstances. It consists of 48 items, each item to be responded on four-point scale. It primarily measures eight types of coping responses, such as (i) logical analysis, (ii) positive reappraisal, (iii) seeking guidance and support, (iv) problem solving, (v) cognitive avoidance, (vi) acceptance or resignation, (vii) seeking alternative reward, and (viii) emotional discharge. The first set of four scales measures approach coping responses, the second set of four scales measures avoidance coping responses including its various aspect at both cognitive and behavioral level. In general, approach coping is problem-focused, it reflects cognitive and behavioral efforts, to resolve life stressor. In contrast avoidance coping

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tends to be emotion focused; it reflects cognitive and behavioral attempts to avoid thinking about a stressor and its implications, or to manage the affect associated with it.The raw scores obtained on each coping strategy has to be converted into standardized T scores (as per given in norms i.e. mean of 50 and SD = 10) for interpreting the results, where scores less than 34, 35 to 40, 41 to 45, 46 to 54, 55 to 59, 60 to 65 and greater than 65 indicate considerably below average, well below average, somewhat below average, average, somewhat above average, well above average and considerably above average respectively. The test – retest reliability is r = .48. Hindi version of the inventory by using back translation (Kumar and Midha) was used in the current research work. The Cronbach alpha was found to be .92

Results and Discussion

The current study was aimed to explore posttraumatic growth as well as various coping strategies used by rural widows. Table 1 depicts the magnitude of posttraumatic growth/ (overall and its various domains) of rural widows.

Table 1

Descriptive statistics (Mean and SD) of scores obtained on PTG inventory by rural widows

Variable	Mean	St. Deviation	Range of scores
PTG (Overall)	3.5485	.40180	0-5
*RTO	3.5543	.60822	
*NP	3.4640	.45650	
*PS	3.4860	.48789	
*SC	3.6650	.53680	
*AFL	3.7066	.39436	

***RTO (Relation to others), *NP (New possibilities), *PS (Personal strength), *SC (Spiritual change), *AFL (Appreciation for life).**

From Table 1 it is clearly evident that rural widows have an above average level of transformation aftermath trauma of death of their husband. The maximum benefit is visible in the domain of appreciation of life which indicates that widows after the death of their spouse have actually experienced the value of life which is priceless, uncountable, hence this kind of

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appreciation is being felt "in their bones". Further it has been observed that they acknowledged the spiritual principles which were derived after experiencing pain and helped them to reconcile the feelings of emptiness and depression through maintaining sound relations with others. They experienced moderate level of personal growth while experiencing new possibilities in life which still offer them.

In order to attain second objective of the study "To identify and highlight coping strategies adopted by rural widows" the obtained raw scores and T-scores on various type of coping strategy have been depicted in Table 2

Table 2

Descriptive statistics (Mean and SD) of raw scores as well as standardized T-Scores obtained by widows on various types of copying strategies

Coping strategies	Domain	Mean	SD	T-Score	Interpretation based on T-Scores
ApproachCognitive	LA	11.7600	2.75652	51.76	Average
	PR	12.7900	2.79355	55.88	Somewhat Above Average
Behavioural	SG	12.6600	2.91017	57.84	Somewhat Above Average
	PS	12.2800	2.96471	53.24	Average
Avoidance Cognitive	CA	12.100	2.91461	62.18	Well Above Average
	AR	13.1600	2.82743	63.79	Well Above Average
Behavioural	SA	12.4400	2.99265	65.48	Well Above Average
	ED	10.0500	2.16667	67.71	Considerably Above Average

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LA – Logical analysis PR – Positive reappraisal SG – Seeking guidance and support

PS – Problem solving CA – Cognitive avoidance AR – Acceptance or support

SA – Seeking alternative reward ED – Emotional discharge

The information gleaned from T-value depicted in Table 2 clearly indicated that rural widows adopted more of avoidance coping strategies than approach coping strategies, thereby indicating that widows adopted maladaptive means of coping for reducing their distress. These avoidance oriented coping strategies may act as self defense mechanisms which help them to manage emotional distress for a shorter period of time. The maximum use of coping strategy is emotional discharge i.e. through catharsis and rumination widows may be capable of adjusting themselves in the existing scenario. They also frequently used other avoidance oriented behavioral coping strategies such as seeking alternative rewards and cognitive strategies such as cognitive avoidance, and acceptance/resignation. The, current findings are in line with earlier findings of Street et al, 2005., Kunz; 2017. The well above average usage of these avoidance strategies indicated their withdrawal, denial and complete surrender to the prevailing situation. Further Table shows the almost above average usage of both behavioral as well as cognitive approach coping strategies such as seeking support from others and positive reappraisal respectively. These findings supported the earlier findings of Widows et al; 2005; Morris; 2007; Bussel et al 2010. They also moderately adopted behavioral as well as cognitive approach-oriented coping strategies such as problem solving. These, findings corroborate with the findings of Desmond et al; 2006. However logical analysis appears to be the least preferred strategy adopted by widows.

Thus, on the basis of current findings it may be stated that widows adopted coping flexibility meaning that they used both types of coping strategies (i.e. avoidance as well as approach) in order to reduce the distress. The above findings have been beautifully captured in figure drawn below.

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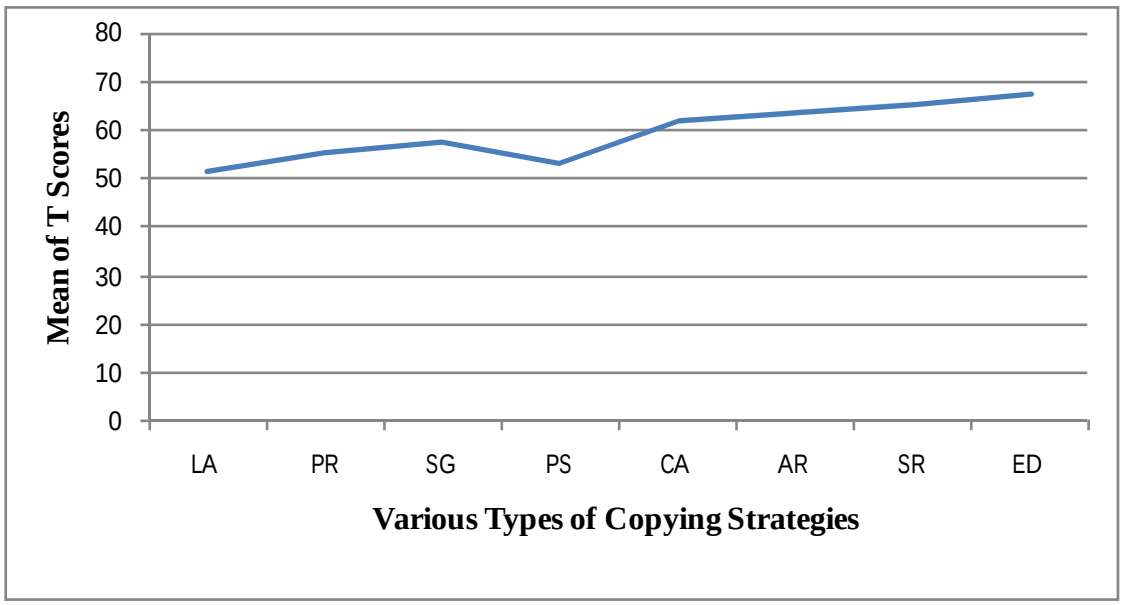

Figure: Various types of coping strategies adopted by rural widows

From figure it is clearly visible that widows adopted more of avoidance oriented coping strategies as compared to approach-oriented strategies.

In order to attain the third objective of the study i.e. "To examine the relationship of various types of coping strategies with posttraumatic growth of rural widows." 3rd Table depicted the correlational matrix, highlighted the correlation among various types of coping strategies with posttraumatic growth (overall and its various domains).

Table 3

Correlational matrix, highlighted the correlation among various types of coping strategies with posttraumatic growth (overall and its various domains)

	PTG	RTO	NP	PS	SC	AFL	LA	PR	SG	PSS	CA	AR	SR	ED
PTG	1	.981**	.938**	.950**	.921**	.938**	.637**	.525**	.605**	.708**	.641**	.646**	.693**	.566**
RTO		1	.934**	.963**	.921**	.962**	.654**	.531**	.595**	.724**	.644**	.661**	.709**	.553**
NP			1	.938**	.855**	.921**	.594**	.511**	.631**	.679**	.688**	.626**	.652**	.538**
PS				1	.840**	.957**	.619**	.534**	.591**	.703**	.666**	.658**	.695**	.548**
SC					1	.859**	.607**	.475**	.566**	.656**	.619**	.611**	.649**	.497**
AFL						1	.638**	.512**	.596**	.676**	.650**	.640**	.707**	.577**
PR							1	.180	.669**	.354**	.211*	.235*	.331**	
SG								1	.392**	.447**	.409**	.546**	.206*	
PSS									1	.312**	.345**	.420**	.265**	
CA										1	.689**	.516**	.493**	
AR											1	.573**	.417**	
SR												1	.369*	
ED													1	

*p< .05 **p< .01

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It is clearly apparent from Table 3 that overall posttraumatic growth and its various domains (such as relation to other, new possibilities, personal growth, spiritual change and appreciation of life) are significantly positively correlated with both types of coping strategies (i.e. approach-cognitive, behavioral and avoidance-cognitive as well as behavioral). The significant positive relation of both types of strategies (approach as well as avoidance) with posttraumatic growth (overall and its various domains) indicated the uniformity in PTG construct thereby indicating the flexible, situational dependent use of both types of strategies rather than cognitively approaching trauma persistently which contributes to this experience. The intense and enduring challenges as a result of death of a husband may have required extreme and competing types of coping overtime (Bonanno and Burton, 2013). As per Joseph and Linley's model (2005) of PTG it may be explained that in the initial phase of trauma widows may have adopted avoidance coping strategies to reduce their stress and further relied approach-oriented coping by ultimately giving way for cognitively approaching it, hence leading to a state of adoption of "coping flexibility" (Kunz et al., 2017).

In order to attain fourth objective of the study i.e. "To highlight the predicting power of various types of coping strategies with regard to post traumatic growth among rural widows". Stepwise multiple regression analyses were computed and have been illustrated in Table no. 4 to 9.

Table 4

Stepwise multiple Regression of post traumatic growth (overall) on various types of coping strategies among rural widows

Model	Dependent variable Post traumatic growth overall	Independent variable	R	R^2	Std. error	β	F	Sig.
	Step 1	PS	.708	.501	.28521	.708	98.484	.000
	Step 2	PS CA	.834	.696	.22372	.563 .465	111.157	.000
	Step 3	PS CA SR	.876	.767	.19681	.469 .325 .328	105.545	.000
	Step 4	PS CA SR ED	.896	.803	.18222	.450 .237 .301 .220	96.592	.000
	Step 5	PS CA SR ED SG	.907	.823	.17345	.417 .193 .232 .238 .180	87.450	.000
	Step 6	PS CA SR ED SG LA	.916	.838	.16676	.372 .173 .175 .198 .210 .164	80.292	.000

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While observing Table 4, it is evinced that various types of coping strategies except two i.e. positive reappraisal (a type of approach cognitive strategy) and acceptance or resignation (a type of avoidance cognitive strategy) emerged as predictors (either strong or weak) of posttraumatic growth among rural widows. Problem solving (an approach behavioral coping strategy) emerged as a robust predictor of PTG (overall). The value of R^2 (i.e. .501) indicates that fifty percent variance in PTG (overall) is accounted by problem solving strategy. The value of β i.e. .708 reveals that almost 71% increase in PTG (overall) with one unit increase in problem solving strategy. The significant value of F validates the fitness of the model. The present findings supported the earlier findings of Widows et al; 2005,and. Subsequently it has been observed in step2 that problem solving in combination with cognitive avoidance(an avoidance – cognitive strategy) explain the 69.9% (value of R^2) variance in PTG (overall) whereas β value (i.e. .465) indicates that 46.5% increase in PTG with one unit increase in the usage of cognitive avoidance strategy. Step 3 shows that seeking reward also emerged a predictor of overall PTG. The value of R^2 (.767) indicates that a combination of three strategies such as problem solving, cognitive avoidance and seeking alternative reward (SR) collectively explain 76.7% variance in PTG (overall) whereas β value i.e. .328 reveals that per unit increase in the usage of SR would lead to 32.8% increase in overall PTG. Similarly steps 4, 5 and 6 indicate the addition of one coping strategy in each step, as emotional discharge, seeking guidance and support and logical analysis respectively. The significant values of F at each step indicate the fitness of the model.

On the basis of the above results it may be inferred that problem-solving coping strategy emerged as a robust predictor thereby indicating the behavioral effects put by the widows to deal with the stressors effectively which resulted in their growth aftermath trauma of the death of a husband. However logical analysis "appeared as the weakest predictor of growth indicates that cognitive efforts to understand the trauma did not result in optimum psychological growth among widows. Conversely cognitive avoidance helped the widows in their overall posttraumatic growth. The current findings indicated that avoidance-cognitive strategy (i.e. emotion focused) than approach-cognitive strategy enabled the avoidance for psychological growth in the aftermath trauma of death of their husband. The current findings are in line with the previous findings of Sheet et al; 2005, Yeung et al., 2016. Further the current findings revealed that avoidance-behavioral coping strategies such as seeking alternative reward and emotional discharge are more helpful in boosting overall growth than approach behavioral (i.e. seeking social support) and cognitive (i.e. logical analysis) strategies. In other words, it may be stated that growth found in widows may be due to their behavioral efforts to involve in new activities after the death of their husband. However, venting of negative emotions also helped in their overall growth may be due to catharsis

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effect. Subsequently two coping strategies such as positive reappraisal and acceptance/ resignation failed to predict overall PTG may be due to their inability to positively accept the problem. Thus, it may be stated that widows adopted coping flexibility (i.e. usage of both approach as well as avoidance) depending on prevailing situations. (Kunz et al; 2017). Despite finding the predictors of overall PTG, the predictors of various domains of PTG separately were also explored and have been shown in Table 5 to 9.

Table 5

Stepwise multiple regression of Relation to others (a domain of PTG) on various types of copying strategy among rural widows

Model	Domain of PTG	Independentvariables	R	R^2	Std. error	β	Ƒ	Sif
Step 2	Relation to others							
	Step 1	PS	.724	.524	.42189	.724	107.759	.000
	Step 2	PS				.517		
		SR	0850	.723	.32337	.492	126.619	.000
	Step 3	PS				.480		
		SR				.344		
		CA	.892	.795	.27937	.316	124.412	.000
	Step 4	PS				.464		
		SR				.320		
		CA				.230		
		ED	.907	.823		.194	110.419	.000
	Step 5	PS	.907	.823	.17345	.437	96.153	.000
		SR				.264		
		CA	.915	.836	.25243	.203		
		ED				.209		
		SG				.146		
	Step 6	PS				.388	10.926	.000
		SR				.202		
		CA	.924		.23948	.181		
		ED		.854		.165		
		SG				.179		
		LA				.178		
	Step7	PS		.863		.383		
		SR	.929			.170		
		CA			.23355	.113	82.774	.000
		ED				.163		
		SG				.176		
		LA				.165		
		AR				.138		

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Excluded variable: Positive Reappraisal (PR)

While observing Table 5, it is found that problem solving strategy followed by seeking alternative reward →cognitive avoidance→ emotional discharge → seeking guidance and support → logical analysis and least was acceptance/or resignation emerged sequentially as predictors (in a descending manner) of relation to others (a domain of PTG). The findings indicated the mixed usage of approach as well as avoidance coping strategies leading to enhanced relation to others. However out of 8 coping strategies only one i.e. positive reappraisal (a type of approach cognitive strategy) failed to predict growth in relation to others after the death of a husband.

Table 6

Stepwise multiple regression of New Possibilities (a domain of PTG) on various types of coping strategies

Model	Domain of PTG	Independent variable	R	R^2	Std. error	β	Ƒ	Sig
	New possibilities							
	Step 1	CA	.688	.473	.33318	.688	87.846	.000
	Step 2	CA PS	.844	.712	.24759	.527 .115	119.767	.000
	Step3	CA PS SG	.874	.763	.22556	.431 .441 .266	103.165	.000
	Step 4	CA PS SG LA	.892	.795	.21078	.356 .359 .284 .215	92.343	.000
	Step5	CA PS	.901	.812	.20288	.298 .356	81.443	.000

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SG	.289
LA	.165
ED	.159

Excluded variables: positive reappraisal (PR), Acceptance or resignation (AR), seeking alternative rewards (SR)

From Table 6 it is clearly apparent that out of 8 coping strategies 5 strategies such as cognitive avoidance → problem solving → seeking guidance and support → logical analysis → emotional discharge emerged as predictors of New possibilities (a domain of PTG) in a descending manner. Indeed 3 strategies such as positive reappraisal, acceptance or resignation and seeking alternative rewards failed to predict growth in exploring new positive possibilities. The present findings indicated that widows explored and struggled for new activities in their life initially may be by avoiding their stressor but later on through logically analyzing the stressors with the help of others tried to solve their problems by exploring new activities rather than sticking on old ones.

Table 7

Stepwise multiple regression of Personal Strength (a domain of PTG) on various types of coping strength

Model	Dependent variable	Independent variable	R	R^2	Std. error	β	Ƒ	SIG
1	Personal Strength							
	Step 1	PS	.703	.494	.34867	.703	95.845	.000
	Step 2	PS	.846	.715	.26309	.549	121.734	.000
		CA				.494		
	Step 3	PS	.884	.782	.23150	.458	114.567	.000
		CA				.359		
		SR				.318		
	Step 4	PS	.897	.805	.21967	.442	98.341	.000
		CA				.287		
		SR				.295		
		ED				.180		
	Step 5	PS	.905	.819	.21314	.415	84.950	.000
		CA				.215		
		SR				.240		
		ED				.195		
		SG				.145		
	Step 6	PS	.910	.828	.20852	.379	74.825	.000
		CA				.235		
		SR				.194		
		ED				.163		
		SG				.169		
		LA				.131		
	Step 7	PS	.914	.835	.20529	.375	66.735	.000
		CA				.173		
		SR				.165		

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ED	.159
SG	.167
LA	.118
AR	.125

Excluded variable: Positive reappraisal (PR)

The 7thTable clearly shows that all the coping strategies either approach (both cognitive and behavioral) or avoidance (both cognitive and behavioral) except one i.e. positive reappraisal – an approach cognitive strategy, emerged as predictors of personal growth (a domain of PTG) of widows. The problem solving emerged as robust while acceptance/or resignation emerged as the weakest predictor of personal growth. Coping flexibility is also seen in enhancing personal growth.

Table 8

Model	Dependent variable	Independentvariable	R	R^2	Std. error	β	Ƒ	Sig
1	Spiritual change							
	Step 1	PS	.656	.431	.40715	.656	74.092	.000
	Step 2	PS CA	.788	.620	.33415	.513 .459	79.246	.000
	Step 3	PS CA SR	.824	.679	.30871	.427 .331 .299	67.781	.000
	Step 4	PS CA SR LA	.837	.700	.3002	.379 .298 .242 .181	55.483	.000
	Step 5	PS CA SR LA SG	.849	.721	.29094	.337 .253 .162 .221 .185	48.602	.000

Excluded variables:Positive Reappraisal (PR), Acceptance or Resignation (AR), Emotional Discharge (ED)

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For experiencing spiritual change, 5 out of 8 coping strategies such as problem solving, cognitive avoidance, seeking reward, logical analysis and seeking guidance and support emerged predictors (sequentially in terms of valence) of spiritual change. However, 3 coping strategies viz positive reappraisal, acceptance/or resignation, and emotional discharge failed to anticipate growth in spirituality among widows.

Table 9

Stepwise multiple regression of Appreciation of life (a domain of PTG) on various types of coping strategies

Model	Dependentvariable	Independentvariable	R	R^2	Std. error	B	Ƒ	Sig
1	Appreciation of life							
	Step 1	SR	.707	.500	.28041	.707	97.810	.000
	Step 2	SR PS	.821	.674	.2274	.514 .460	100.281	.000
	Step 3	SR PS ED	.870	.757	.19742	.416 .418 .313	99.682	.000
	Step 4	SR PS ED CA	.891	.793	.18306	.329 .401 .230 .241	91.106	.000
	Step 5	SR PS ED CA SG	.900	.810	.17631	.266 .371 .247 .201 .164	80.261	.000
	Step 6	SR PS ED CA SG LA	.908	.825	.17020	.210 .327 .207 .181 .149 .162	73.080	.000

Excluded variable: positive reappraisal (PR) acceptance or Resignation (AR)

As far as appreciation of life (a domain of PTG) is concerned, 6 coping strategies except two i.e. positive reappraisal and acceptance or resignation failed to predict appreciation of life aftermath trauma of death of a husband. The current findings indicated that appreciation of

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life was attained by widows by relying on seeking satisfaction through new sources of activities by solving existing problems with the help of others, sometimes through vent up of negative emotional by avoiding the situation and logically pondering over the circumstances.

To conclude it may be stated that rural widows have an above average level of growth after facing the trauma of death of their husband by adopting coping flexibility i.e. usage of avoidance as well as approach coping strategies as per demands of the situation.

In a nutshell it may be inferred that tears in widow's life may lead to triumph in their life while coping successfully by either adopting adaptive or maladaptive strategies. Grief provided an opportunity to spark the growth among rural widows.

References

Barbir, L. (2016). Positive Psychology and Trauma: Understanding and Enhancing Posttraumatic Growth. *Positive Psychology: Theory & Application, 11*(1), 21-26.

Benight, C. C., & Bandura, A. (2004). Social cognitive theory of posttraumatic recovery: the role of perceived self-efficacy. *Behavioral Research and Therapy, 42*, 1129-1148.

Benight, C. C., &Harper, M. L. (2005). Coping self-efficacy perceptions as a mediator between acute stress response and long-term distress following natural disasters. *Journal of Traumatic Stress, 15*(3), 177–186.

Brnnon, L & Feist, J, (2009). *Heath Psychology 7th ed.* Wadswort Cenage Learning, pp121.

Bonanno, G. A. (2008). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events?*Psychological Trauma: Theory,Research, Practice, and Policy, 5*(1), 101-113.

Bonanno, G. A., & Burton. (2013). Regulatory Flexibility: An Individual Differences Perspective on Coping and Emotion Rrgulation. *Perspect Psychol Science.*

Brady, K. L., Acierno, R. E., Resnick, H. S., Kilpatrick, D. G., & Saunders, B. E. (2004). PTSD Symptoms in Widowed Women with Lifetime Trauma Experiences. *Journal of Loss and Trauma, 9*(1), 35-43.

Bussel, J. B., Ellinor, I. B., Biree Andemariam.,& Wei Yin. (2010). Complement activation on platelets correlates with a decrease in circulating immature platelets in patients

ISSN:0971-1260
Vol-22- Issue-14-December-2019

with immune thrombocytopenic purpura. *British journal of haematology.* 148(4) 638-645.

Caplan, G. (1964). *Principles of preventive psychiatry.* New York: Basic Books

Calhoun, L. G., Tedeschi, R. G. (1989-1990). *Positive aspects of critical life problems: Recollections of grief.* Omega. 20. 265-272

Calhoun, L.G., Tedeschi, R.G. (1999). *Facilitating posttraumatic growth: A clinician's guide.* Mahawah, NJ: Lawrrnce Erlbaun Association, Inc.

Calhoun, L.G., Tedeschi, R.G. (2001). Posttraumatic growth: The positive lesion of loss. In R. A. Neimeyer (Ed.), *Meaning re-construction and the experience of loss* (pp. 157-172). Washington, DC: American Psychological Association.

Calhoun, L. G., & Tedeschi, R. G. (2004). The foundation of posttraumatic growth: New considerations. *Psychological Inquiry,* 15, 93-102

Carroll, M. (2014). Personal growth after traumatic experiences. *Nursing Times, 110*(31), 23-25.

Christopher, M. (2004). A broader view of trauma: a biopsychosocial-evolutionary view of the role of the traumatic stress response in the emergence of pathology and/or growth. *Clinical Psychology Review, 24*(1), 75-98.

Desmond, J. C., Lehman, s., O'Kelly, J., Kumagai, T., & Mori, A. (2006). Capsaicin, a component of red peppers, inhibits the growth of androgenpindependent. P53 mutent prostate cancer cells. *Cancer Research.* 66(6), 3222-3229.

Dohrenwend, B. S. (1978). Social stress and community psychology. *American Journal of Community Psychology.* 6. 1015

Dekel, S., Ein-Dor, T., & Solomon, Z. (2012). Posttraumatic growth and posttraumatic distress:A longitudinal study. *Psychological Trauma: Theory, Research, Practice, and Policy,4*(1), 94-101.

Edmonds. S., & Hooker, K. (1992). *Perceived changes in life meaning followingbereavement.* Omega. 25. 307-318

Erikson, E H, (1959). *The problem of ego identity,* Psycho journal, (I), 379

Erikson, E. H. (1963). *Childhood and Society.* New York: W.W Norton

Eriksen, L W, (1967). *Cognitive responses to intensely cued anxiety.* New York: Academics

ISSN:0971-1260
Vol-22- Issue-14-December-2019

Freud, A, (1926). *Dad Ich und die Abwahrmechanism(The ego and the mechanisms of defense),* Vienna: Internatonaler Psycholoystecher.

Frankle, V.E. (1963). *Man's Search for Meaning: An Introduction to Logotherapy.* New York: Washington Square Press

Folkman, S.; Lazarus, R.S. (1988) "Coping as a mediator of emotions". *Journal of Personality and Social Psychology.* 54(3):466-75.

Field, N. P., Donnelly, E. F. & Horowitz, M. J. (2000). Expectancy of spousal death and adjustment to conjugal bereavement. *Omega: Journal of Death Dying,* 42(3), 195-208

Folkman, S. (2013). Stress, coping, and hope. In *Psychological aspects of cancer* (pp. 119-127). Springer, Boston, MA.

Hogan, N., Moors, J. M., & Tanson, M. C. (1996). *Toward an experiential theory of bereavement.* Omega. 33. 43-65

Heinrichs, M., Wagner, D., Schoch, W., Soravia, L. M., Hellhammer, D. H., &Ehlert, U. (2005). Predicting posttraumatic stress symptoms from pre -traumatic risk factors: A 2-year prospective follow-up study in firefighters. *American Journal of Psychiatry,162*(1), 2276–2286.

Hu T, Zhang D, Yang Z. (2016). The relationship between attributional style for negative outcomes and depression: A meta-analysis. *J Soc Clin Psychol [Internet]*. 2015;34(4):304–21.

Herth, K. (1992). Abbreviated instrument to measure hope: development and psychometric evaluation. *Journal of advanced nursing*, *17*(10), 1251-1259.

Johansen, V. A., Wahl, A. K., Eilertsen, D. E., &Weisaeth, L. (2007). Prevalence and predictors of posttraumatic stress disorder (PTSD) in physically injured victims of non-domestic violence. A longitudinal study. *Social Psychiatry and Psychiatric Epidemiology, 42*(1), 583–593.

Judge, T. A., Erez, A., Bono, J. E., &Thoresen, C. J. (2002). Are measures of self-esteem, neuroticism, locus of control, and generalized self-efficacy indicators of a common core construct? *Journal of Personality and Social Psychology, 83*, 693–710.

Kunj, B. M., Dwivedi, P., Mishra, B. B., & Tiwari, V. K.(2017). Click inspired synthesis of triazole-linked vanillin glycoconjugates. *Glycoconjugate Journal.* 34(1), 61-70.

ISSN:0971-1260
Vol-22- Issue-14-December-2019

Kaplan, A. (1964) *The conduct of inquiry: methodology for behavior science.* San Francisco, CA: Chandler, 42pp

Lazarus, R. S. (1966). *Psychological stress and the coping process*. New York, NY: McGraw-Hill

Lazarus R.S. and Folkman S., (1984) *Stress, Appraisal, and Coping.* Springer. New York, USA.

Lazarus, R S, (1993). Coping theory and research, past, present, and future. *Psycchomatic medicine,* 55, pp. 234-247

Linely, P. A., & Joseph, S. (2004). Positive change following trauma and adversity: A review. *Journal of Traumatic Stress,* 17, 11-21

Lawrence G. Calhoun, Richard G. Tedeschi, Arnie Cann, & Emily A. Hanks (2010). Positive Outcomes Following Bereavement: Paths to Posttraumatic Growth. *PsychologicaBelgica, 50*(1&2), 125-143.

Lopez, J., Camilli, C. & Noriega, C. (2015). Posttraumatic Growth in Widowed and Non-widowed Older Adults: Religiosity and Sense of Coherence. *Journal of Religion and Health*, *54*(5), 1612–1628.

Malow, A.H. (1954). *Motivation and Personality.* New York. NY Harper

Miller, S M & Mangan, C E, (1983). Interacting effects of information and coping style in adapting to genealogical stress. Should the doctor tell all? *Journal of Personality and Social Psychology* (45) pp. 234-236

Moos, R., Schaefer, J. A. (1993) Coping resources and processes: Current concepts and measures. In Goldberger, L., Breznitz, S. (Eds.), Handbook of stress: Theoretical and clinical aspects. (2nd ed.) New York: Free Press. Pp. 234–257.

Moos, R. (1993a), Coping Responses Inventory-Adult form: Professional manual. Odessa, FL: *Psychological Assessment Resources*.

Michael, S. T., Crowther, M. R., Schmid, B., &Allen, R. S. (2003). Widowhood and spirituality: coping responses to bereavement. *Journal of Women & Aging*, *15*(2-3), 145-165.

Morris, S. A., Rao, B., Garcia, B. A., Hake, S. B., Diaz, R. L., Shabanowitz, J., Hunt, D. F., Allis, C. D., Lieb., & Strahi, B. D. (2007). Identification of histone H3 Iysine 36

ISSN:0971-1260
Vol-22- Issue-14-December-2019

acetylation as a highly conserved histone modification. *J. Biol Chem*. 282(10): 7632-40

Momtaz, YA, Ibrahim, R, Hamid, TA, Yahaya, N. (2010). Mediating effects of social and personal religiosity on the psychological well-being of widowed elderly people. *Omega (Westport)*, *61*(2), 145-162.

Nerken, I. R. (1993). Greif and the reflective self: Toward a clearer model of loss and growth. *Death studies*. 17. 1-26

Prati, G., & Pietrantoni, L. (2009). Optimism, social support, and coping strategies as factors contributing to posttraumatic growth: A meta-analysis. *Journal of Loss and Trauma,* 14, 364-388

Rogers, C.R. (1961) *On Becoming a person: A psychotherapist view of psychotherapy.* Houghton Mifflin.

Pietrzak, R. H., Goldstein, M. B., Malley, J. C., Rivers, A. J., Johnson, D. C., Morgan, C., & Southwick, S. M. (2010). Posttraumatic growth in veterans of Operations Enduring Freedom and Iraqi Freedom. *Journal of Affective Disorders*, *126*(1-2), 230-235.

Rheingold, A. A., Smith, D. W., Ruggiero, K. J., Saunders, B. E., Kilpatrick, D. G.&Resnick, H. S. (2004). Loss, Trauma Exposure, and Mental Health in A Representative Sample Of 12–17-Year-Old Youth: Data from The National Survey of Adolescents. *Journal of Loss and Trauma, 9*(1), 1-19.

Richardson, K. M. (2016). The surviving sisters club: Examining social support and posttraumatic growth among FDNY 9/11 widows, *Journal of Loss and Trauma, 21*(1), 1-15.

Roderigues, C., Tartaro Bujak, I., Mihaljevic, B., Soveral, G., & Cipak Gasparovbic, A. (2017). Yeast aquaporin regulation by 4-hydroxynonenal is implicated in oxidative stress response. *IUMBB Life.* 69(5)

Schrank, B., Stanghellini, G., & Slade, M. (2008). Hope in psychiatry: a review of the literature. *ActaPsychiatricaScandinavica*, *118*(6), 421-433.

Schwarzer, R., & Jerusalem, M. (1995a). General Self-Efficacy Scale. In J. Weinman, S.Wright & M. Johnston (Eds.), *Measures in health psychology: A user's portfolio. Causal and control beliefs* (pp. 35-37). Windsor, England: NFER-Nelson.

ISSN:0971-1260
Vol-22- Issue-14-December-2019

Solomon, Z., Benbenishty. R., & Mikulincer M. (1991). The contribution of wartime, pre-war, and post-war factors to self-efficacy: A longitudinal study of combat stress reaction. *Journal of Traumatic Stress, 4*(3), 345–361.

Snyder, C R, (1999). *Coping: The Psychology of What Works*. New York: Oxford university press

Shaw, A., Joseph, S. & Linley, P. A. (2005). Religion, spirituality, and posttraumatic growth: a systematic review. *Mental Health, Religion & Culture, 8*(1), 1-11.

Street, R. L., Armfield, S. W., & Fringer, O. B. (2005). Reducing numerical diffusion in interfacial gravity wave simulations. *International Journal for Numerical Methods in Fluids*. 49(3) 301-329

Sui, Y., Wang, H., Yue, Y., &Luthans, F. (2012). The effect of transformationalleadership on follower performance and satisfaction: The mediating role of psychological capital and the moderating role of procedural justice. *Acta Psychologica Sinica, 44*(9), 1217-1230.,

Tedeschi, R. G., Calhoun L. G. (1995). *Trauma and transformation: Growing in the aftermath of suffering*. Thousand Oaks, CA: Sage.

Taku, K., Cann, A., Calhoun, L. G., & Tedeschi, R. G. (2008). The factor structure of the Posttraumatic Growth Inventory: A comparison of five models using confirmatory factor analysis. *Journal of Traumatic Stress*. 212. 158-164

Tedeschi, R. G., & McNally, R. J. (2011). Can we facilitate posttraumatic growth in combat veterans? *American Psychologist, 66*(1), 19-24.

Vernon, L. L., Dillon, J. M., & Steiner, A. R. W. (2009). Proactive coping, gratitude, and posttraumatic stress disorder in college women. *Anxiety, Stress & Coping, 22*(1), 117-127

Widows, M. R., Jacobsen, P. B., Booth-Jones. M., & Field, k. K. (2005). Predictors of Posttraumatic Growth Following Bone Marrow Transplantation for Cancer. *Health Psychology*, 24(3), 266-273.

Xiu-Li Wang, Rui Zhang, Xiang Wang, Hong-Yan Lin, and Guo-Cheng Liu. (2016). An Effective Strategy to Construct Novel Polyoxometalate-Based Hybrids by

ISSN:0971-1260
Vol-22- Issue-14-December-2019

Deliberately Controlling Organic Ligand Transformation in Situ. *Inorganic Chemistry*. 55 (13).

Yalom, I. D. (1980). *Existential therapy*. New York: Basic Books

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