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## **Culture's Consequences on Coping : Theories, Evidences, and Dimensionalities**

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# Culture's Consequences on Coping: Theories, Evidences, and Dimensionalities

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## Abstract

While the influence of culture on coping has been implicated conceptually in the stress-coping literature for sometime, empirical research on cross-cultural coping has gained momentum only recently. The past two decades witnessed a significant growth in the research and the knowledge base of culture and coping, as well as an increased call by scholars for more culturally and contextually informed stress-coping paradigms. In view of this critical development, the present article intends to systematically review and take stock of the theoretical and empirical knowledge that has emerged from the cumulative cultural coping research. Specifically, this corpus of literature was summarized and analyzed in terms of (a) theoretical propositions, (b) empirical studies on cross-cultural coping variations, (c) cultural dimensions of coping, and (d) implications for future research. The results evidenced culture's consequences on coping with respect to the identification of conceptual pathways through which culture affects stress-coping; cultural differences and specificities in coping patterns across national, ethnic, and racial groups; and the differential effects of acculturation, self-construals, and individualism-collectivism on coping. Conceptual and methodological recommendations are offered for future research.

## Keywords

cross-cultural coping, cultural coping differences, collective Coping, race, ethnicity

Stress and coping research constitutes one of the most intensively studied areas within health, social, and psychological research, because of its broad implications for understanding human well-being and adaptation (Aldwin, 2007). As early as Lazarus and Folkman's (1984) seminal thesis on stress and coping, the interwoven relationship of culture and stress responses was implicated, conceptually. Lazarus and Folkman postulated that a person's internalized cultural values, beliefs, and norms affect the appraisal process of stressors and the perceived appropriateness of coping responses. Accordingly, these cultural factors delimit the coping options available to an individual in the face of stress. As follows, stress and coping are universal experiences faced by individuals regardless of culture, ethnicity, and race, but members of different cultures might consider and respond to stressors differently with respect to coping goals, strategies, and outcomes (Chun, Moos, & Cronkite, 2006; Lam & Zane, 2004).

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Despite these assertions, relatively little is currently known about culture's relationship with stress and coping and about the cultural universal (*etic*) versus cultural specific (*emic*) dimensions of coping processes across cultures. Consequently, several criticisms have been levied against the extant stress and coping literature. First, the prevailing stress-coping theories and research have been characterized by a monocultural perspective that is entrenched in the Western, individualistic values of North America, where most of the research is developed and conducted (Hobfoll, 2001). This is seen in the compelling emphasis placed on personal control, agency, and direct action among the major stress-coping theories (Folkman & Moskowitz, 2004). Second, this highly individual and intrapersonal stance of the stress-coping literature has led some to criticize the overly "acontextual" nature of the extant stress and coping literature (Folkman & Moskowitz, 2004) and its neglect of culture as a fundamental context of coping (Chun et al., 2006). Consequently, culture has not been adequately examined within the present stress-coping literature, and empirical coping research based on non-White samples within or outside of North America remains relative scarce (Heppner et al., 2006).

Given these important issues, recent scholars have advocated for critical cultural and multicultural perspectives on stress and coping (Kuo, Roysircar, & Newby-Clark, 2006; Wong & Wong, 2006). This is exemplified by the edited volume by Wong and Wong (2006), *Handbook of Multicultural Perspective on Stress and Coping* and the increased calls by prominent scholars within the field to attend to social, cultural, and contextual factors of stress-coping (e.g., Aldwin, 2007; Hobfoll, 2001; Moos, 2002). The past two decades have witnessed a significant growth in empirically based cultural coping research conducted in North America as well as internationally. However, no published articles known to the author have systematically surveyed this corpus of empirical work to take stock of our current theoretical and empirical knowledge on culture's consequences on coping. Yet such an effort to summarize and to synthesize findings based on the existing cultural coping literature would be timely and highly desirable in moving the field toward more unified and culturally informed theories of stress and coping (Moos, 2002).

Therefore, the purpose of the present article is to comprehensively review and critically evaluate the current conceptual and empirical research on culture and coping, established within cross-cultural and multicultural coping studies published in English in the last two decades. To this end, this article aims to present and expound in some depth (a) theories on culture and coping; (b) empirical findings on cultural patterns of coping based on cross-national, cross-ethnic and cross-racial, and single ethnic-group research; (c) cultural explanatory dimensions for cultural specificity and variation on coping; and (d) implications for future cultural coping research. It should be noted that while stress and coping are often mentioned in tandem in the literature, the present article directs its focus specifically on coping and culture. Readers are referred to comprehensive reviews on stress and culture elsewhere (e.g., Aldwin, 2007; Hobfoll, 1998; Wong & Wong, 2006).

### *Cultural and Contextual Theoretical Models of Coping*

To ground the current article within broad conceptual frameworks, a comprehensive review of the existing cultural coping theories is called for. Even though culture has frequently been alluded to in the stress-coping literature, systematic theoretical articulations on cultural pathways of stress and coping are rare. This review identified only four such theoretical models. The following section offers a brief overview of these four models. Table 1 outlines the core components of each of these models. In the absence of visual representations of these models, for illustrative purposes, the following discussion and Table 1 use the terms *antecedent variables*, *intermediate variables*, *coping responses*, and *coping outcomes* to denote the roles of the various variables and the relationships among them as hypothesized in the original models. This summary focuses only

**Table 1.** Conceptual Models of Culture, Stress, and Coping

Theories/Authors	Assumption on the Role of Culture	Antecedent Variables	Intermediate Variables	Coping Responses	Outcome Variables
Resource-Congruence Model – Wong (1993); Wong & Ujimoto (1998)	Culture impinges on all aspects of stress and coping process and serves as a resource in coping within a cultural context.	<ul style="list-style-type: none"> <li>- Personal resources</li> <li>- Potential stressors</li> </ul>	<ul style="list-style-type: none"> <li>- Primary appraisal</li> <li>- Secondary appraisal</li> </ul>	Coping: creative, reactive, and protective coping	Outcomes: reduced stress, restored balance, and enhanced well-being
Multiaxial Model – Hobfoll and colleagues (Dunahoo et al, 1998; Hobfoll, 1998)	Culture creates a context in which stress and coping are defined and delineated. Coping is to be viewed from both an individualistic and communal perspective.	N/A	N/A	<ul style="list-style-type: none"> <li>- Coping along three axes/continua: <ul style="list-style-type: none"> <li>- Passive-Active</li> <li>- Antisocial-Prosocial</li> <li>- Direct-Indirect</li> </ul> </li> </ul>	N/A
Transactional Model – Chun, Moos, & Cronkite (2006)	Culture represents individuals' ecological system that permeates the person-environment interaction of stress-coping.	<ul style="list-style-type: none"> <li>- Environmental system (Panel I): social climate, stressor and resources, etc.</li> <li>- Personal system (Panel II): cognitive abilities, social competence, confidence, etc.</li> </ul>	<ul style="list-style-type: none"> <li>- Transitory conditions (Panel III): life events, intervention program, etc.</li> </ul>	<ul style="list-style-type: none"> <li>- Cognitive appraisal</li> <li>- Coping skills e.g., approach and avoidance coping (Panel IV)</li> </ul>	Health and well-being (Panel V): psychosocial functioning; maturation
Sociocultural Model – Aldwin (2007)	Culture affects the entire stress and coping process, but the person can also change his or her culture or environment through coping (bi-directional)	<ul style="list-style-type: none"> <li>- Cultural beliefs, values</li> <li>- Individual beliefs, values</li> <li>- Situational demands</li> <li>- Cultural demands and resources</li> </ul>	<ul style="list-style-type: none"> <li>- Reactions of others in situation</li> <li>- Appraisal of stress</li> <li>- Individual coping resources</li> </ul>	<ul style="list-style-type: none"> <li>- Social support</li> <li>- Coping efforts</li> </ul>	Cultural, social, situational, psychological, and physiological effects

on the core contents and components of these theories. Readers are referred to the original reference sources for these models for more specific information.

**Resource-congruence model of coping.** The Resource-Congruence Model of Coping is derived from the cognitive-relational theory of stress and coping by Lazarus and Folkman (1984; see also Wong, 1993; Wong & Ujimoto, 1998). According to this model, adaptive coping is predicated on achieving a “congruence” when one’s coping resources (*antecedent*) and coping responses “match” the demands of the stressor (*antecedent*). Furthermore, congruence is further seen as a function of employing coping responses in line with one’s implicit cultural values and practices (Wong, Reker, & Peacock, 2006). In a schematic illustration, Wong (1993) depicted that cultural context circumscribes common stressors faced by individuals within a culture, which subsequently shape their primary (significance of stressor) and secondary appraisal (i.e., controllability over stressor and resources) (*intermediate*) and the selection of preferred coping strategies (*coping responses*). The result of this determines the eventual helpfulness of coping (i.e., adaptive or not) (*outcome*).

In this model, coping behaviors are categorized into creative, reactive, and protective types of coping. Of particular relevance to culture is the creative coping. Wong considered creative coping to be closely linked to individuals’ intellectual, spiritual, existential, relational, physical, financial, cultural, and environment resources, which are all embedded in cultural conditionings. In short, the Resource-Congruence stipulates that culture affects the stress-coping process by (a) defining what is stressful, (b) predisposing individuals to respond to stress in a customary way, (c) delimiting the nature and the range of resources utilized, (d) providing cultural knowledge for culturally appropriate coping responses in view of a given stressor, and (e) dictating the manifestation of coping outcomes (Wong & Ujimoto, 1998).

**Multiaxial Model of Coping.** Grounded in a social anthropological perspective of stress, the Multiaxial Model of Coping is derived from Hobfoll’s Conservation of Resources Theory of Stress (Hobfoll, 1998, 2001). The model stresses the “communal” aspects of stress coping as indicated by the needs of individuals to ensure survival collectively in a tribe or nation. As such, Hobfoll (1998) qualified that “within culturally patterned social structures, roles, and anticipated life-span transitions, cultures create a context in which stress and coping responses are defined and delineated” (p. 28). To this end, the model stresses the importance of viewing individuals in the coping process as an “individual-nested in family-nested in tribe” (Hobfoll, 2001). That is, the social and cultural contexts of coping involve individuals’ relationship to their families, religion institutions, employment organizations, charitable institutions, neighborhoods, and ethnic groups. To effectively represent the theory, Hobfoll and his colleagues (Dunahoo, Hobfoll, Monnier, Hulsizer, & Johnson, 1998) devised the Strategic Approach to Coping Scale to reflect coping along three axes, or continua, of passive-active, prosocial-antisocial, and direct-indirect dimensions (*coping responses*). Implied in these three axes are general dimensions that could account for multitudes of preferred coping configurations cross-culturally. In sum, the Multiaxial Model posits that culture can impress on the stress and coping process through the following factors: (a) objective factors based on individual’s accurate interpreting; (b) objective factors based on culturally shared biases within a culture; (c) objective factors based on familial norms and rules; (d) illusions based on individual, familial, and cultural biases; and (e) illusions based on personal biases.

**Transactional Model of Cultural Stress and Coping.** Unlike the previous two models, which converges on the focus of “resources” in construing stress and coping within a cultural context, Chun et al. (2006) proposed a dynamic, transactionally based framework to illustrate culture’s interaction with stress-coping. The transactional model asserts that culture enfolds the entire stress-coping process and bears effects on five sequentially arranged but interactive systems or panels (Chun et al., 2006). The model underscores collectivism and individualism as the core cultural

and psychological dimensions along which diverse cross-cultural coping experiences are organized. Chun et al. posited that the “transactions” among culture, context, and stress-coping produce distinctive consequences within and across five specific domains/panels. They are consisted of Panel I environmental system (e.g., social climate, stressor, and resource in family and work), Panel II personal system (cognitive abilities, personality traits, social competence), Panel III transitory conditions or stressors (life events and changes), Panel IV cognitive appraisal and coping skills (approach or avoidance coping), and Panel V health and well-being (see Table 1).

The theory hypothesizes that the environmental and personal factors in Panels I and II (*antecedents*), respectively, can interact to foreshadow transitory life events in Panel III (*intermediate*). An individual’s stress appraisal and coping in Panel IV (*coping responses*) interact and assess the extent to which the prior three systems can meet the demand of the stressor. The end result determines the health and well-being of the person as represented in Panel V (*outcome*). Within this theory, collectivism (interdependence) and individualism (independence) are viewed as the most salient cultural dimensions that bear on cultural variations in coping patterns and outcomes. One strength of the transactional theory is the conceptual intuitiveness of the model and the specificity of the variables defined under each panel. Hence, as a conceptual framework, the transactional model should lend itself for future empirical testing and evaluation.

*Sociocultural Model of Stress, Coping, and Adaptation.* Aldwin (2007) postulated a sociocultural conceptualization of stress-coping that emphasizes the “social context” of the stress and coping process. According to Aldwin, social context is deeply embedded in one’s “cultural context.” This framework views coping as a function of individuals’ stress appraisal, coping resources, social support, resources afforded by their culture, and others’ reactions in the social context. Under this perspective, individuals’ experiences with cultural expectations and resources impact their perception of the demands of a stressor and of their available resources to meet the demand (*antecedent*); this in turn affects their stress appraisal (*intermediate*). At the same time, the model also hypothesizes that broad cultural beliefs and values shape individuals’ beliefs and values (*antecedent*) as well as others’ reactions (*intermediate*) toward the stressful situation. The collective effects of these elements subsequently bear on individuals’ stress appraisal (*intermediate*). In the meantime, individuals’ social support and coping efforts (*coping responses*) serve to mediate the effects of coping, which impact not only the person involved but also their environment, resulting in cultural, social, situational, psychological, and physiological consequences (*outcomes*).

In a visual scheme, Aldwin delineated the pathways through which culture bears upon the entire stress and coping process. In essence, the model stipulates that culture determines (a) the nature of cultural context that shapes stressors typically encountered by members of a given culture, (b) the extent of strain and stressfulness evoked by a stressor, (c) the selection of coping strategies for a specific stressful situation, and (d) different institutional mechanisms (e.g., social support, psychotherapy, etc.) by which people cope with stress. Similar to the transactional model discussed previously, the relatively succinct and concise nature of the sociocultural model should serve as a plausible conceptual roadmap to guide future cultural coping research and thus warrant empirical verifications.

In view of the preceding theoretical propositions on the culture’s relation to stress and coping, this article now turns to review empirical evidence and findings on cultural variation and specificity in coping. A systematic survey and evaluation of the cumulative coping research conducted cross-nationally, cross-ethnically and racially, and with distinctive ethnic/cultural groups is presented. Given that preferences and patterns of coping have been found to vary based on individuals’ developmental characteristics and experiences (Aldwin, 2007; Compas, 1998), this review includes coping studies on cross-cultural and ethnic samples across varying age groups (i.e., children, adolescents, university/college students, adults, older adults, etc.).

## Cross-National Variations on Coping

Comparative cultural coping studies typically undertake an *etic* (culturally universal) position that assumes the basic structure of coping to be equivalent and amenable for assessment with similar coping measures among diverse cultural groups (Tweed & DeLongis, 2006). Adopting this approach, cultural differences in coping patterns have been examined with child and adolescent samples across cultures. In a study by McCarty et al. (1999), Thai children (age 6 to 14) were found to report twice as likely to use “covert” (emotion-focused) coping methods than did American children when they encountered powerful adults, such as in the scenarios of receiving a doctor’s injection and facing angered parents or teachers. However, Thai and American children were found to hold similar coping goals/intents for having secondary control (adjusting oneself to fit the demand) or relinquishing control in the same scenarios. The researchers noted that the prevalent use of covert coping in public among Thai children may represent Thai culture’s emphasis on interdependence, social harmony, and respect for authorities. More recently, Frydenberg, Lewis, Ardila, Cairns, and Kennedy (2001) found that when compared to youth in Colombia and Australia facing serious stress over social issues (e.g., pollution, discrimination, fear of global war, and community violence), youth in North Ireland used not only more nonproductive coping, including self-blame, tension reduction, and not coping, but also more socially oriented coping, including seeking friends and social support. Colombian youth, on the other hand, used problem solving, spiritual support, social action, seeking professional help, and worrying more than did their Ireland and Australian counterparts. In a different study, Frydenberg et al. (2003) found in comparison to Australia, Colombia, and Germany youth, Palestinian youth are more likely to cope with seeking to belong, investing in close friends, ignoring the problem, not coping at all, seeking professional help, social action, social support, solving the problem, spiritual support, and working hard, but less in physical recreations to cope. Meanwhile, coping through engaging in relaxing diversion and tension reduction (e.g., physical recreation) were more common among Australian youth.

A number of studies have compared the coping preferences between native Japanese and individuals of other national groups. Radford, Mann, Ohta, and Nakane (1993) found that Australians reported an expression of more confidence (i.e., higher self-esteem) and less stress than did native Japanese when engaging in decision making. Furthermore, Japanese used more complacency, avoidance, and hypervigilance coping, and less choice coping in the same process. The authors attributed the coping style differences to Australia’s individualistic values and Japan’s collectivistic values. In yet another investigation, O’Connor and Shimizu (2002) found native Japanese university students to have a stronger preference for emotion-focused coping (i.e., escape-avoidance and positive reappraisal) than did native British students. However, the two groups were similar in the use of problem-focused coping. Additionally, primary control was predictive of stress, distress, and coping preferences only for the British but not for the Japanese. This suggested Japanese coping and psychological health to be less influenced by the need for personal control over the stressors.

A similar conclusion was obtained in a recent study by Sinha and Watson (2007) in which low self-esteem was found to associate strongly with psychological symptoms for Canadian university students but only minimally for Indian university students. Interestingly, the use of escape-avoidance coping strongly predicted several psychological symptoms for Canadians; it did not for Indians. It appeared that while self-esteem, a construct closely tied to primary control, was less relevant to Indians’ psychological health, the escape-avoidance coping, a construct more aligned with secondary control, was more pertinent and prevalent among Indians in stressful situations. The observed coping pattern among Indians was being linked to their strong collective cultural orientation.

### *Cross-Ethnic and Cross-Racial Variations on Coping*

Evidence of differential cultural coping patterns is further substantiated by ethnic and racial comparative coping research. As an example, Bjorck, Cuthbertson, Thurman, and Lee (2001) found that Korean and Filipino American church attendees reported more passive or emotion-focused coping and higher scores on all coping scales than their Caucasian American counterparts. However, Filipinos also endorsed more problem-solving coping than did Caucasians. The flexible use of both emotion- and problem-focused coping by Filipino Americans was said to be prompted by the heightened stresses associated with their minority status in the United States. Similarly, in Chang's (1996) study, in responding to a recent stress, Asian Americans reported higher levels of pessimism and more avoidance and social withdraw coping behaviors than did their Caucasian counterparts. However, both groups did not differ in other forms of coping, including problem-solving, cognitive restructuring, expressing emotions, social support, and self-criticism.

In the context of studying help-seeking behaviors, Sheu and Sedlacek (2004) found Asian American first-year college students to use more avoidance coping in responding to personal problems than did White and African American students. African Americans adopted less wishful thinking as coping than did the other two groups. In a study by Chiang, Hunter, and Yeh (2004), both African American and Latino American college students identified family and religion to be highly important sources of help and coping for them in dealing with personal, interpersonal, and academic stressors. However, turning to parents was more important for Latino Americans while engaging in religious activities was more important for African Americans. The authors explained that the coping preference of African Americans reflected the centrality of spiritualism and religion in Afrocentric values. In a study by Lee and Liu (2001), the authors found Asian, Hispanic, and European American college students to share a similar coping preference for direct actions over indirect actions in managing conflicts with their parents. However, for Hispanic Americans, the use of direct coping actually heightened family conflict, but not for the other two groups.

In a unique qualitative study, Constantine, Alleyne, Caldwell, McRae, and Suzuki (2005) interviewed Asian, Black, and Latino/Latina Americans living in New York to explore how they coped with the aftermath of the September 11 terrorist attacks. All participants enlisted acquiring additional information about the attacks; expressing a range of emotions (i.e., sadness, anger, anxiety); seeking support from or giving to family, friends, colleagues, and peers; and avoidance behaviors as their typical coping methods. However, Blacks and Latinos/Latinas endorsed more religious coping (e.g., attending church), while Asians endorsed more acceptance of the event as a result of fate or spiritual higher power as their coping with the posttraumatic stress. It was noteworthy that the idiosyncratic cultural characteristics on coping based on ethnicity were observable even in the face of momentous events.

A number of coping studies focused on "within-group" differences in coping among Asian subgroups in the United States. Yeh and Inose (2002) studied coping with cultural adjustment among Chinese, Korean, and Japanese immigrant youth in the United States. Korean youth used religious coping more than did the Chinese and Japanese; Japanese youth used social support more than did the other two groups. However, both Koreans and Japanese were similar in their use of creative activities as coping. In a study by Yeh and Wang (2000), it was found that while Chinese, Korean, Indian, and Filipino American university students reported similar coping resources and methods in resolving mental health problems, they differed dramatically in the relative importance assigned to the various coping options. In a qualitative study by Yoshihama (2002), Japanese-born Japanese American women who had experienced domestic violence reported the use of more passive coping strategies, such as minimizing the problem or focusing on the positives of the abuser than did their U.S.-born Japanese American counterparts. Yoshihama

reasoned that active, problem-oriented coping inherently contravenes traditional Japanese cultural values of forbearance and endurance, particularly for the Japanese-born women.

Research on cultural coping is also found in a number of studies with ethnic minority caregivers. Coon et al. (2004) found that Latina family caregivers reported less perceived stress and more perceived benefits and used more religious coping in providing care to family members with dementia than did female Caucasian caregivers. Similarly, in a different investigation, African American family caregivers of Alzheimer's patients reported less perceived stress, manifested lower depression, and adopted less of both approach and avoidance coping in caregiving in comparison to their Caucasian counterparts (Haley et al., 1996). Specifically, for Caucasians, approach-type coping helped reduce depression and increase life satisfaction, but avoidance-type coping led to adverse psychological effects. However, such effects were not found among African American caregivers. Moreover, in a large-scale study by Knight, Silverstein, McCallum, and Fox (2000), African American family caregivers of dementia patients perceived caregiving to be less burdensome but tended to adopt more emotion-focused coping than did a group of non-Hispanic White, Hispanic, and Asian/Pacific Islander caregivers. The authors concluded that the culture-specific appraisal and coping behaviors of African American caregivers were indicative of "culturally transmitted" values and behaviors of this group.

Finally, cross-ethnic coping studies conducted outside of the United States have also attested to cultural variabilities in coping. In Canada, Chataway and Berry (1989) found that as compared to French and English Canadians, Chinese students from Hong Kong experienced greater acculturative stress and coped with such a stress with less positive thinking and tension reduction coping. The Chinese participants also reported poorer health and lower satisfaction with their coping abilities. In Australia, Neill and Proeve (2000) showed that Southeast Asian secondary students preferred coping with "reference to others" more so than did their European Australian counterparts. This preference for other-centered coping was also identified in Wong and Reker's (1985) earlier study of older adults in Canada. In dealing with aging-related stress, Chinese older adults accessed external help from others (i.e., families, friends, experts, and God) and "palliative strategies" (i.e., modifying their reaction towards the stressor) more than did Caucasian older adults.

### *Distinctive Ethnic and Cultural Patterns of Coping*

Cultural coping studies focusing on stress responses of single ethnic groups have further corroborated cultural specificity in coping. When investigating coping with racial discrimination among Southeast Asian refugees in Canada, Noh, Beiser, Kaspar, Hou, and Rummens (1999) found passive, forbearance coping to be helpful in reducing depression and active, confrontational (i.e., problem-focused) coping unhelpful in decreasing depression. This finding is consistent with other studies on Asian subgroups (e.g., Sinha & Watson, 2007; Yoshihama, 2002). Noh et al. (1999) identified passive and forbearance coping to be strategies functionally aligned with the collectivism of Southeast Asians, as evidenced by their positive buffering effects for this group. More recently, Joseph and Kuo (2009) investigated simultaneously the effects of *etic* (general) and the *emic* (Afrocultural) forms of coping among Black Canadians across interpersonal, institutional, and cultural discrimination situations. On the basis of a profile analysis, Black Canadians were shown to possess a diverse coping repertoire, including problem solving, cognitive/emotional debriefing, spiritual-based, collective, and ritual-based coping—an integrated mixture of both general and Afrocultural coping strategies. Furthermore, the configurations of coping patterns among Black Canadians were highly variable across discrimination situations. Specifically, spiritual-centered coping was most often employed in facing interpersonal discrimination scenarios, and problem-solving coping was most often used in confronting institutional and cultural discrimination situations.

Wester, Kuo, and Vogel (2006) found differential mediation effects of engagement, avoidance, and collective coping on responding to gender role conflict (e.g., restrict emotions) among Chinese Canadian adolescent boys. Chinese Canadian boys who had greater work-family conflicts but were more emotionally open reported more use of engagement coping, whereas those who had a lower sense of success, power, and competition but were more emotionally restricted reported more use of avoidance coping. Overall, the study pointed to the positive effect of engagement (problem-focused) coping and the negative effect of avoidance (emotion-focused) coping for this group of adolescents. Comparable findings were identified in Noh and Kaspar's (2003) study in which problem-focused coping was found helpful in reducing depression resulting from discrimination for Korean adult immigrants, but not emotion-focused coping.

The adaptive nature of problem- versus emotion-focused coping was also examined in a number of studies on coping with intergenerational family conflict among Asian American college students. Lee, Su, and Yoshida (2005) found Asian Americans to mobilize more social support as a form of emotion-focused coping when family conflict was perceived to be high, whereas problem-solving coping was exercised more and was found to be more helpful only when family conflict was low. These results find additional support in Su, Lee, and Vang's (2005) study of Hmong American students. Once again, social support was positive in reducing psychological distress, but problem-focused coping was negative in intensifying distress for Hmong Americans when family conflicts were perceived to be high. Cumulatively, the foregoing empirical findings suggest that the adaptability of differing coping methods and their respective outcomes appear to critically hinge upon one's perceived "controllability" of the stressor/conflict, at least among Asians. For instance, emotion-focused coping is more likely to be evoked when a stressor is viewed to be not mutable or readily controllable or is highly interpersonal in nature (e.g., conflict with authorities, parents, or ingroup members).

### *Cultural Dimensions of Coping*

The previous survey clearly evidences cultural variation and specificity in coping behaviors across national, ethnic, and cultural markers. These observations naturally beg the question: "*Why* and *how* do these culturally based preferential coping patterns exist and how are they explained?" Conceptually, as previously reviewed cultural coping theories stipulate, cultural selectivity of coping is strongly circumscribed by the normative values, beliefs, and orientations of a culture (Aldwin, 2007; Chun et al., 2006; Hobfoll, 1998). In order to "unpack culture" and its influences on the coping process (Smith & Bond, 2003), it is therefore critical to discern the specific cultural dimensions along which coping may vary across cultures and individuals. This article now turns to research that investigated coping's link to three main empirically derived cultural dimensions: acculturation, self-construals, and collectivism-individualism.

### *Acculturation's Influence on Coping*

Preliminary coping studies of immigrant and international students have hinted at the relationship between cultural divergence in coping and acculturation levels. Mena, Padilla, and Maldonado (1987) studied coping patterns among immigrant college students in the United States across four generational statuses. Late immigrants were found to use more active coping strategies than did early and later generation immigrants. Second- and third-generation immigrants adopted more social network coping than did first- and mixed-generation immigrants. It was explained that higher acculturation among second- and third-generation individuals afforded these individuals more interpersonal and social resources in times of stress. In a Canadian study, Zheng and Berry (1991) found less acculturated Chinese sojourners to report more acculturation-related

stresses than did Chinese Canadian and European Canadian students. Chinese sojourners also endorsed more positive coping (e.g., more tension reduction and information-seeking) and less passive coping (e.g., wishful thinking and self-blame) than did European Canadians. Also in Canada, Noh and Kaspar (2003) found that for more acculturated Korean immigrants, problem-focused coping was helpful in buffering against feeling depressed resulting from racial discrimination, but such a coping was unhelpful for less acculturated Korean immigrants. It was hypothesized that with increased acculturation, the coping approaches of more acculturated Korean immigrants might have assimilated the normative coping characteristics of the mainstream, individualistic host country, Canada, of which problem-focused coping is more typical. Similarly, in assessing ethnic identity, a conceptually related construct to acculturation, Yoo and Lee (2005) found that Asian Americans with a strong ethnic identity adopted more social support and problem solving in dealing with discrimination. Approach-type coping, including cognitive restructuring and problem-solving coping, were helpful in buffering stress only for those high in ethnic identity and experienced less intense or infrequent discrimination.

A review of the literature, however, identified only one cultural coping study that actually measured acculturation along with coping. Kuo et al. (2006) examined acculturation and coping among three cohorts of Chinese adolescents in Canada: Chinese Canadians, late-entry Chinese immigrants, and Chinese sojourners. The study adopted a unilinear model of acculturation, measuring the participants' acculturation using the Minority-Majority Relations Scale (Sodowsky, Lai, & Plake, 1991); it assessed Chinese adolescents' relative degree of cultural orientation toward Canadian culture and value. Consistent with the prediction of the study, significant cohort differences in acculturation levels as well as coping behaviors were found. Less acculturated cohorts (e.g., Chinese sojourners) adopted more collective coping and avoidance coping methods in managing acculturative stresses than did those in more acculturated cohorts (e.g., Chinese Canadians). Less acculturated adolescents were found to adhere more strongly to traditional Asian values of collectivism and interpersonal harmony, which in turn prompted a greater use of collective and avoidance (e.g., not rocking the boat) coping. In general, these above findings show that cultural coping preference and coping efficacy might well vary along acculturation levels and social resources of immigrants and international students in their host culture.

It is helpful to attempt to conceptualize the influences of acculturation based on the stress-coping theoretical frameworks reviewed earlier. Using the transactional model by Chun et al. (2006), for instance, acculturation can act as both an "antecedent" variable (Panel I) as well as an "intermediate" variable in one's process of coping (Panel II) (see Table 1). That is, acculturation circumscribes the kind of stressors (e.g., acculturative stress) and coping resources (e.g., social support) associated with a person during his or her cultural transition (Berry, 1997). These are two factors conceptually aligned with the domain of Panel I specified by the transactional model. At the same time, the experience of acculturation itself is a significant life transitional event for an individual, which in and of itself constitutes an element of Panel II according to the same model. In fact, this conceptualization is consistent with Berry's (1997) model of acculturation, in which coping strategies and resources are hypothesized as moderating variables during the process of acculturation.

### *Self-Construals' Impact on Coping*

The theory of self-construals has been demonstrated to bear profound implications on individuals' cognitions, emotions, and motivations across cultures (Markus & Kitayama, 1991), and as such, it has also been linked to coping in a number of studies. In a study by Cross (1995), self-construals and coping were examined in samples of East Asian international students and American students. For East Asians, a higher independent self-construal predicted less adjustment stress but

more direct coping attempts and plans (problem-focused coping). In contrast, for the same group, a higher interdependent self-construal predicted more adjustment stress but failed to predict direct coping attempts in this group. However, for Americans, self-construals did not significantly predict either stress or coping. Adopting a culture-based coping measure to assess coping with interpersonal conflict, Kuo and Gingrich (2004) found differential relationships between self-construals and the use of collective, avoidance, and engagement coping among Asian and Caucasian Canadian university students. Regardless of ethnicity, the study showed that more independent participants tended to enlist engagement coping only (i.e., problem-focused coping) while more interdependent participants enlisted all three types of coping in an interpersonally stressful situation. Moreover, more interdependent participants viewed and rated interpersonal conflict to be more stressful than did less interdependent participants.

Lam and Zane (2004) tested the mediating role of self-construals on ethnicity and preference for *primary* versus *secondary* control coping approaches in dealing with interpersonal stress among Asian American and White American college students. Interdependent self-construal was found to partially mediate the ethnic effect on secondary control among Asian Americans. In another words, in managing interpersonal stress, interdependent Asian Americans preferred coping by adjusting oneself to accommodate the external stressor. Such a tendency was believed to reflect Asian normative values on social dependence and communalism. In contrast, independent self-construal was found to fully mediate ethnic effect on primary control among White Americans. That is, independent White Americans showed a clear preference for adjusting the environment or the stressor to align it with the person's will. This latter coping pattern was attributed to the strong cultural emphasis on personal autonomy and mastery of the environment of the West.

In Tweed, White and Lehman's (2004) study of Japanese, Asian Canadians, and European Canadians, similar preferred patterns of coping were found. Using a combination of items from the Ways of Coping Checklist and several Japanese-specific coping items, the authors examined participants' preference for coping rooted in "externally targeted control" (changing the environment/stressor) versus "internally targeted control" (changing oneself). As predicted, Japanese and Asian Canadians being more collectivistic used more internally targeted coping (e.g., accepting responsibilities, waiting things out, using self-control), whereas European Canadians being more individualistic used more externally targeted coping (e.g., confrontation). In the case of Japanese and Asians generally, changing oneself to cope with stress is more consistent with interdependence and the Buddhist and Taoist traditions. Hence, these cumulative findings above, albeit limited, point to cultural typology of self as a valuable cultural framework through which cultural variabilities in coping can be comprehensively conceptualized and measured.

### *Collectivistic and Individualistic Aspects of Coping*

As noted earlier, the cultural syndromes of collectivism and individualism are the two most frequently enlisted cultural constructs to explain cross-cultural divergences in coping behaviors by cultural coping researchers (Chun et al., 2006). In particularly, there has been an increased empirical effort to explore and examine the collective dimension of coping among Asians (e.g., Kuo et al., 2006; Yeh & Wang, 2000) and Africans and African Americans (e.g., Utsey, Adams, & Bolden, 2000; Utsey, Brown, & Bolden, 2004).

In a study conducted in Hong Kong, Shek and Cheung (1990) developed and factor analyzed a coping scale designed to reflect the basic elements of Chinese ways of coping. With a sample of Chinese working parents in Hong Kong, the result pointed to two distinct types of coping: "reliance on the self" and "seeking help from others." The former represented resorting to the help of spouse, friends, parents, in-laws, relatives, supervisors, professionals, and fortune-tellers as a coping strategy. Shek and Cheung posited that this component of coping evidenced the collectivistic

orientation of native Chinese. The prominence of collectivism in the coping process of Asians is further demonstrated by a study examining the impact of personal, collective, and social identities on coping among native Japanese in Japan (Yeh, Inose, Kobori, & Chang, 2001). The collective identity of Japanese, as defined by the importance of family, ethnic group, community, religion, and language in self, was found to positively predict coping strategies by accessing help from family. The authors contended that the Japanese' strong preference for friends, families, and siblings as sources of help with mental health reflected the distinctive collective values of the group. The significance of collective coping behaviors was also observed in a study of Asian Americans coping with trauma and grief. Yeh, Inman, Kim, and Okubo (2006) conducted qualitative interviews with Asian Americans who had lost family members to the terrorist attack on September 11 in the World Trade Center. Based on the participants' responses, six of the eight thematic coping approaches emerging from the interviews highlighted characteristics of collective coping. Asian Americans enlisted familial coping, intracultural coping, relational universality, forbearance, fatalism, and indigenous healing to deal with this traumatic event.

Evidence of collective orientation in coping is also found in the Afro-cultural framework of stress and coping. Utsey et al. (2000, 2004) identified communally and spiritually based coping to be particularly prevalent among individuals of African descent, reflecting an Afrocentric worldview. These observations find support in a recent coping study of Black Canadians. Joseph and Kuo (2009) reported that spiritual- and ritual-centered coping constituted the most crucial coping strategies adopted by Black Canadians in dealing with interpersonal discrimination (e.g., being looked down on as unintelligent by others). Additionally, in a study of coping with the September 11 attacks, Constantine et al. (2005) found that both acquiring from and giving support to ingroup members and religious coping were an integral part of coping among African Americans. These coping behaviors further underscored the centrality of collectivism and communalism in African Americans.

Given the pervasive and deep-seated nature of self-construals and collectivism-individualism (Markus & Kitayama, 1991) and the evidence above, conceptually these two constructs are expected to exert the most significant influences on the domains of "coping responses" (Panel IV) and of "outcome variables" (Panel V) according to Chun et al.'s (2006) transactional model (see Table 1). That is, not only do these cultural syndromes predispose an individual to appraise stressors and select coping strategies (Panel IV) in a culturally specific way, but also they predict the health consequences and shape the well-being status of the individual resulting from the coping process. However, these relationships between the existing research findings and the theoretical propositions are speculative and require further empirical verifications.

## Discussion

Overall, this review identified and revealed compelling evidence for cultural variations and specificities on coping, based on theoretical and empirical findings generated over the last two decades' cultural coping research. The following section highlights the key findings and implications based on this corpus of literature.

Based on the broad problem- versus emotion-focused coping nomenclature, repeated studies have pointed to the prevalence of "emotion-focused," "indirect," "passive," or "covert," "internally target," or "secondary control" coping among individuals of Asian backgrounds, as well as, to a lesser extent, among individuals of African and Latino backgrounds. Specifically, the avoidance, withdrawal, and forbearance coping methods are common among Asians, while spiritual, religious, and ritual-based coping are common among African Americans and African Canadians. Additionally, spiritual and religious coping and coping through family support are common among individuals of Latino/Latina backgrounds.

Furthermore, emotion-focused coping has been shown to be beneficial (e.g., reducing distress) for Asian Americans and Asian Canadians in dealing with various stressors, including family conflicts and racial discrimination (Lee & Liu, 2001; Lee et al., 2005; Noh et al., 1999; Noh & Kaspar, 2003; Sue et al., 2005). Problem-focused coping also has been found to be effective for Asian Americans and Asian Canadians in responding to male gender conflicts, racial discrimination, and cross-cultural adjustment (Cross, 1995; Noh & Kaspar, 2003; Wester et al., 2006; Yoo & Lee, 2005). For non-Asians, emotion-focused coping was shown to be negative in increasing stress for African American adult caregivers (Knight et al., 2000), but problem-focused coping was shown to be negative in exacerbating stress for Hispanic American college students in facing family conflict (Lee & Liu, 2001). As evident, the existing knowledge on the adaptive quality of different coping strategies is currently incomplete and inconclusive and necessitates further research.

The current review also highlights the salience of “collective coping” approaches among culturally diverse individuals, including Asians, African Americans, and Latino Americans, based on more recent research. This distinctive domain of coping represents the collective and interdependent characteristics of many ethnic minorities (Markus & Kitayama, 1991), which is a critical aspect of coping overlooked by both the extant coping and the cultural coping literature until recently (Hobfoll, 1998). As has already been demonstrated in a number of recent, published studies (e.g., Heppner et al., 2006; Joseph & Kuo, 2009), to fully represent and account for the coping system of ethnic minority individuals, an integrated approach incorporating conventional and culture-based collective coping measures is imperative.

Finally, this review also points to coping’s link to (a) broad societal climate, such as collectivism-individualism and interdependent-interdependent cultural norms; (b) individuals’ acculturation and ethnic identity; (c) primary/internally versus secondary/externally controlled orientations; (d) accessibility and attitudes toward seeking social and family support; and (e) degrees of religious/spiritual beliefs and identifications. Together, these findings further underscore the significance of person-cultural environment interaction in the coping process and provide corroborating evidence in support of the contextual and transactional theories of coping (e.g., Aldwin, 2007; Chun et al., 2006).

However, the above syntheses need to be interpreted with caution in view of several limitations. First, it should be noted that the way in which types of coping were defined, categorized, and measured varied quite significantly from study to study and would likely have skewed the findings and the conclusions drawn and reduced the comparability across studies.

Second, the relationship between coping methods and coping outcomes is not straightforward but is moderated by a constellation of contextual and personal factors as suggested by the theoretical models reviewed earlier. Empirical data in fact have evidenced the effects of a person’s perceived “intensity” and “controllability” of the stressor (Su et al., 2005) and cultural orientations (i.e., acculturation, self-construals, etc.) (e.g., Lam & Zane, 2004) on coping. Lastly, it should be recognized that an individual’s actual coping system often comprises a complex and diverse range of coping behaviors. For instance, Chinese Canadian adolescents were found to engage in collectivistically based coping in conjunction with individualistically based coping in dealing with interpersonal conflict (Kuo & Gingrich, 2004), adjustment stress (Kuo et al., 2006), and gender role-related stress (Wester et al., 2006). That is, qualitatively and functionally opposite coping strategies should not automatically be construed as mutually exclusive within culturally diverse individuals.

### *Implications for Future Research*

Based on this current review, three recommendations are submitted with intent to strengthen future cultural and cross-cultural coping research. First of all, at the conceptual level, the increasing evidence of the collective and communal dimension of coping challenges the dominant intrapersonal

and individualistic perspective on stress and coping in the extant literature (Dunahoo et al., 1998; Folkman & Moskowitz, 2004), particularly when engaging in coping research with culturally diverse populations. As revealed in this article, even among the prevailing cultural coping studies, few had adopted culturally derived conceptual frameworks or culturally based coping measures. The majority of cultural coping studies remain unchallenged as many continue to operate exclusively under what Utsey et al. (2000) called the “Eurocentric” assumptions on coping, namely the problem- and emotion-focused coping paradigm. Conceptually, it is imperative for the field of stress and coping research to expand its current stress-coping theories and frameworks by accommodating new and more culturally and contextually informed perspectives (Moos, 2002; Wong & Wong, 2006).

Second, at the theoretical front, future cultural coping research is in need of more rationally based and theory-driven studies. In many of the cultural coping studies reviewed, it was observed that the results of studies were often interpreted with speculative cultural explanations post hoc, in hindsight, instead of valid cross-cultural theories established a priori. This issue renders many of the findings untested and somewhat sketchy. Thus, currently the cumulative empirical research on cultural coping is not at all integrated with the emerging theories in this area, such as the four theoretical models reviewed earlier in this article. The field would benefit from future theory development that offers directions and specifies parameters for empirical cultural coping research. Furthermore, to bolster the theoretical rigor of future studies, researchers should consider the application and/or the testing of cultural and contextual coping models similar to the ones reviewed (see Table 1). These models offer tangible, conceptual bases to guide future empirical research and provide schemas for researchers to test the possible pathways through which culture affects the stress and coping process. Additionally, a more intentional and systematic effort to incorporate theoretically and empirically grounded cultural constructs (e.g., acculturation, self-construals) into cultural coping studies can help fortify the theoretical grounding of research in this area. In fact, this line of research has been undertaken and reported in recently published works—for example, the studies by Heppner et al. (2006), Kuo et al. (2006), and Tweed et al. (2004). This approach permits researchers to not only pinpoint cultural dimensions associated with coping but also afford more defensible cultural explanations for the findings on the basis of established cross-cultural psychological theories (Smith & Bond, 2003).

Finally, the current corpus of cultural coping research is heavily represented by studies of Asians and Asian Americans. There is growing but limited research on coping among Africans and African Americans (e.g., Haley et al., 1996; Utsey et al., 2000, 2004) but minimal research and information on coping among Latino/Latina Americans (e.g., Coon et al., 2004; Frydenberg et al., 2003) and other cultural and ethnic groups (e.g., Arabic, Middle Eastern, Southern and Eastern European, etc.). Therefore, it would profit the field to augment the present knowledge base by actively encouraging and increasing coping research with understudied cultural groups.

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