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The Effects of Perceived Control over Distress on Health

Adam A. Torres

Mary Pritchard

Boise State University

Abstract

This paper focuses on the relationship between perceived control over stress and the resulting health consequences. Researchers measured perceived control by using daily hassles and major life events as stressors. Health symptoms measured were, cardiovascular, respiratory, gastrointestinal, muscular, skin, immunity, and metabolic. Researchers found significant findings between daily hassles and major life events when comparing health consequences.

The Effects of Perceived Control over Distress on Health

Stress can come from many different sources, but several factors are involved in how we manage and interpret stressful situations, including appraisal of the situation (Cohen et al., 1998; Frazier, 2002; Frazier, Steward, & Mortensen, 2004; Herman-Stahl & Petersen, 1999; Kariv & Heiman, 2005; Keinan & Tal, 2005; Nes, Segerstorm, & Sephton, 2005; Smith & Sheridan, 1983). These factors are important because the way we manage our stress can have health consequences (Cohen et al., 1998; Keinan & Tal, 2005; Smith & Sheridan, 1983), not only physically, but also mentally (Herman-Stahl & Petersen, 1999; Sandin, Chorot, Santed, & Valiente, 2004).

Appraisal of a stressful situation can affect the perception of control over the stressor, thus becoming an important part of managing stress efficiently. For instance, in a study of nurses, those who perceived a sense of control over stressful situations experienced fewer negative effects (Boey, 1999). Researchers have also found that participants who reported a higher sense of control showed better adjustment after trauma (Frazier, Steward, & Mortensen, 2004). On the other hand, a study of residents living near hog farms causing water and air pollution found that perceived control had little effect on the stress of the residents, rather their distress came as a result of physical symptoms from the pollution (Bullers, 2005).

The research on perceived control and its effect on health is extensive, but at times inconclusive. The present study is concerned with gaining information about the effects of control over stressors (high control versus low control) and the corresponding health consequences. We hypothesize that stressors that we perceive to have little control over will have a greater negative affect on health when compare to those that we perceive as having more control over.

Two hundred seventy-four college undergraduates were administered a survey assessing perceived control over stress and physiological symptoms of two types of stressful events (hassles and major life events). Participants were asked to recall a daily hassle and answer questions about that stressor concerning their perceived control and physiological symptoms over that stressor. The second half of the survey asked them to recall a major life event and answer questions about that stressor as they previously had with the daily hassle.

Overall, participants found daily hassles ($M = 3.05$, $SD = 1.21$) to be less important than major life events ($M = 3.45$, $SD = 1.06$), $t(236) = -4.38$, $p < .000$. Also, participants reported having more control over daily hassles ($M = 2.24$, $SD = 1.46$) than major life events ($M = 1.53$, $SD = 1.54$), $t(240) = 5.12$, $p < .000$. Participants reported that daily hassles ($M = 2.67$, $SD = 1.39$) were more expected than major life events ($M = 1.92$, $SD = 1.56$), $t(238) = 5.36$, $p < .000$. Participants reported viewing daily hassles ($M = 2.02$, $SD = 1.43$) as less of a loss than major life events ($M = 2.41$, $SD = 1.55$), $t(240) = -3.15$, $p = .002$. Participants reported daily hassles ($M = 2.60$, $SD = 1.33$) as more of an event that could have desirable consequences than major life events ($M = 2.13$, $SD = 2.54$), $t(239) = 3.73$, $p < .000$. Participants did not report significant differences between daily hassles and major life events concerning how effectively they would cope with the event, $t(239) = 1.70$, or how much they would view daily hassles versus major life as a threat or event that would have negative consequences, $t(240) = -.25$.

Cardiovascular symptoms were reported less during daily hassles ($M = 8.69$, $SD = 3.73$) than major life events ($M = 9.38$, $SD = 4.55$) and were found to be significantly different, $t(236) = -2.76$, $p = .006$. Respiratory symptoms were reported more during daily hassles ($M = 13.07$, $SD = 3.26$) than major life events ($M = 12.50$, $SD = 3.89$), $t(235) = 2.61$, $p < .01$. A significant difference was also found in muscular symptoms, those reported during daily hassles ($M = 10.41$,

$SD = 3.59$) were lower than those reported during major life events ($M = 11.03$, $SD = 4.03$), $t(233) = -2.88$, $p < .01$. Skin symptoms were significantly lower during daily hassles ($M = 10.63$, $SD = 3.63$) when compared to major life events ($M = 11.48$, $SD = 4.03$), $t(234) = -3.93$, $p < .001$. Participants reported less metabolic symptoms during daily hassles ($M = 8.97$, $SD = 4.02$) than major life events ($M = 9.78$, $SD = 4.43$), $t(233) = -3.07$, $p < .01$. There were no statistically significant differences found between the two conditions concerning gastrointestinal symptoms, $t(235) = .348$, or immunity symptoms, $t(234) = 1.21$.

It appears that perceptions of control and severity of the stressor do in fact impact coping strategies and health outcomes. The differences found in this study can help researchers and clinicians understand how types of stressors, daily hassles and major life events, and perceived control over those stressors can affect how we manage stress, furthermore, how stress affects how health.

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