

**Revista Romaneasca pentru Educatie  
Multidimensionala**

Romanian Journal for Multidimensional Education

ISSN: 2066 – 7329 (print), ISSN: 2067 – 9270  
(electronic)

Covered in: Index Copernicus, Ideas RePeC,  
EconPapers, Socionet, Ulrich Pro Quest, Cabell, SSRN,  
Appreciative Inquiry Commons, Journalseek, Scipio,  
EBSCO, CEEOL, ERIH PLUS

---

**COPING STYLES AND SOCIAL SUPPORT IN  
EMERGENCY WORKERS: FAMILY AS A  
RESOURCE**

Cinzia NOVARA, Maria GARRO, Giuseppe DI RIENZO

Revista Romaneasca pentru Educatie Multidimensionala,  
2015, Volume 7, Issue 1, June, pp. 129-140

The online version of this article can be found at:

<http://revistaromaneasca.ro>

---

Published by:

Lumen Publishing House

On behalf of:

Lumen Research Center in Social and Humanistic Sciences

# Coping Styles and Social Support in Emergency Workers: Family as a Resource

Cinzia NOVARA<sup>1</sup>

Maria GARRO<sup>2</sup>

Giuseppe DI RIENZO<sup>3</sup>

## Abstract

*The nature of the job of people working in emergency situations is such that they may experience high levels of stress. The study analyses the relationship between social support and coping in 182 Emergency Service professionals of three professional categories operating in dangerous situations: military, frontier police and firemen. The research confirms the relationship between coping and social support, emphasising the importance of the family source. The results also confirm what has been reported in literature about the prevalence of situational coping for professionals working in emergency situations. In this area, such research may provide a base for developing stress management programs in emergencies and for protecting and reinforcing the wellness of emergency workers, who, in turn, are victims as well.*

## Keywords:

*Social support; Coping styles; Emergency workers; Stress management.*

---

<sup>1</sup> Cinzia Novara – Researcher in Dynamic Psychology, Department of Psychological, Educational and Training Sciences, University of Palermo, Palermo, Italy, [cinzia.novara@unipa.it](mailto:cinzia.novara@unipa.it).

<sup>2</sup> Maria Garro – Senior researcher in Social Psychology, Department of Psychological, Educational and Training Sciences, University of Palermo, Palermo, Italy, [maria.garro@unipa.it](mailto:maria.garro@unipa.it).

<sup>3</sup> Giuseppe Di Rienzo – Pedagogist, Cooperative L'Albero della Vita, Palermo, Italy, [giuseppe.dirienzo1982@gmail.com](mailto:giuseppe.dirienzo1982@gmail.com).

## 1. Introduction

The Italian law (L. 225/92) defines an emergency situation as one in which there is the need to activate extraordinary resources (art.5); the same law, in article 2, distinguishes these situations into simple accidents and complex ones and, finally, in other disasters or events that have to be confronted with extraordinary means because of their intensity and their extent. Simple accidents are road accidents or restricted ones. In complex accidents, there are many people involved. In this type of event there is a strong emotional impact. Therefore, it is important to pay attention not only to the physicality of the victim but also to the psychological and relational dimension of the latter. This is the aim of emergency psychology that intervenes in situations in which an external event endangers people or material goods. In disaster and emergency scenarios, empirical data shows that an effective intervention is able to activate pro-social behaviours, based on social relations and norms (Gantt & Gantt, 2012); but for emergency workers there are several dangers.

We want to talk about the profile of the emergency workers. When they deal with an emergency, they have the opportunity to increase their own competences or, on the contrary, their psychical balance can be subjected to some risks (vicarious traumatisation) (Everly & Mitchell, 1997). In fact, they represent the indirect victims, or third type victims, in relation to the involvement grade in the traumatic event and, therefore subsequent to the victims involved (I type victims) and their relatives (II type victims) (Taylor, 1999). During the missions, the emergency workers (for example, the firemen, the police officers or the ones who belong to specific military forces) can come into contact with serious injuries or the death of unknown people or colleagues. These experiences can cause some reactions that Young, Ford, Ruzek, Friedman, and Gusman (1998) divide into emotional effects (i.e., shock, impotence, terror), cognitive effects (i.e., headaches, hyperactivity) and psycho-social effects (isolation, abuse of substances, etc...). So, these symptoms are correlated to the PTSD (*Post Traumatic Stress Disorders*) that could take over by compromising the subject's wellness. This happens also because the subject is stressed by the lack of coping strategies that are the ways through which the subject tries to prevent, reduce or remove negative experiences (Mostert & Joubert, 2005). It is difficult to determine on priori grounds the coping strategies they use and which of

these are effective in facing stressors, but generally the III type victims tend to use problem-focused coping strategies that are oriented to modify or to solve the situation endangering or damaging the individual. Using a problem-focused coping style, individuals invest some of their time and energy in planning and carrying out ways of facing challenges in their work and family environments in order to fulfil role obligations more easily (Hobfoll, 1989). It is also possible to use emotion-focused strategies, regulating the emotional response due to the problem. Lazarus and Folkman (1985) state that, in particular, when a person believes that the situation cannot be changed, emotion-focused coping is the most likely to be used. It is also important to consider the possibility of using the avoidance strategy, to try to avoid the stressful situation instead of facing it. So, the subject protects himself through activities that divert attention from the problem (Krohne, 1993) or adopting coping strategies centred on the research of social support. Another way of coping with events is shown by avoidance responses that, in the long term, reduce the possibility of recourse to useful resources (Prati, Palestini, & Pietrantonio, 2009). The common dimension of coping strategies is the search for social support; it refers to the help and the exchange that a subject can receive from his relationships (Lavanco & Novara, 2002) and it can be instrumental (aimed at obtaining material help), emotional (aimed at basically satisfying socio-emotional needs), affiliative (that can be obtained thanks to the membership to formal or informal groups) and, finally, informative (receiving advice or information to resolve issues) (House, 1981).

## **2. The research**

### **2.1. Objectives and hypotheses**

The study explores the relationship between coping capacity and social support, in subjects working in emergency situations. As the literature confirms, problem-focused coping is more widely used in response to work-related events (Lazarus & Folkman, 1985). Furthermore, the social support is a variable that is associated with the answer of stress in case of disaster (Kaniasty, 2012), helping the I type victims to rehabilitate more rapidly in their psychological wellness. On the other hand, from literature it emerges that individuals with a reduced personal network use passive coping strategies (Patterson, 2008).

According to the considerations of the above, the following hypotheses have been formulated:

1. by comparing three emergency professionals in relation to the styles of coping, it is expected that they make greater use of situational coping rather than other styles;
2. it is assumed that coping styles are related to social support;
3. particularly, we want to know which of the sources of social support, from intimate relationships, is more associated with the situational coping.

## **2.2. Participants**

A convenience sample was selected consisting of 182 Italian people distinguished into three professional categories operating in dangerous situations:

- 82 Militaries enrolled in the Italian army with at least one mission abroad (average age: 34.62 yrs, s.d.: 8.41; average years of work in emergencies: 14.73, s.d.: 8.50);
- 68 Frontier police with experience in airports susceptible to terrorist attacks (average age: 37.23 yrs, s.d.: 7.04; average years of working in emergencies: 15.77, s.d.: 7.72);
- 32 Firemen with experience in helping in the field (average age: 35.63 yrs, s.d.: 9.24; average years of working in emergencies: 15,28, s.d.: 8,22).

Overall there are 80.11% males and 19.89 females<sup>4</sup>. The sample includes 54.64% from the south, 23.62% from the centre, and 21,74% from the north of the country.

The sampling technique for targets was used. To perform this research, agreements were made with the office of personnel management, ensuring complete anonymity of all participants involved.

## **2.3. Instruments**

A questionnaire self-report has been proposed to participants including the instruments below indicated.

- CISS, Coping Inventory for Stressful Situations (Pedrabissi & Santinello, 1994): consisted of three subscales, each of 16 items

---

<sup>4</sup> In Italy, the female presence is very low in the Armed Forces, the Fire Department, the Police Corps, respectively 0.5%, 5.5% and 6.2% (Zajczyk, Borlini, & Crosta, 2011).

with a five-point likert scale, to measure situational, emotional and avoidance coping styles;

- MSPSS, Multidimensional Scale of Perceived Social Support (Prezza & Principato, 2002): three subscales each of 4 items with a seven-point likert scale, to measure support from family, from friends and from a significant person;
- index-card pointing out socio-demographic variables.

## 2.4. Data Analysis

The average scores were calculated from the two above mentioned scales, comparing scores obtained by the three different groups of professionals (ANOVA). The correlations among social support and coping styles with socio-demographic variables were calculated using  $r$  Pearson's index (ranging from + 1 to -1).

## 3. Results

Hypothesis 1. All three professions use mainly situational-oriented coping strategies (Situational C.), in second place, they use avoidance-oriented ones (Avoidance C.) and, finally, emotion-oriented coping styles (Emotional C.) (Figure 1). Regarding the first and second factors, the three groups of emergency workers show average scores higher than the standard sample (Situational C.=57.03 and Avoidance C.=41.5), and differently from what is observed in emotional coping (Emotional C.=44.03).

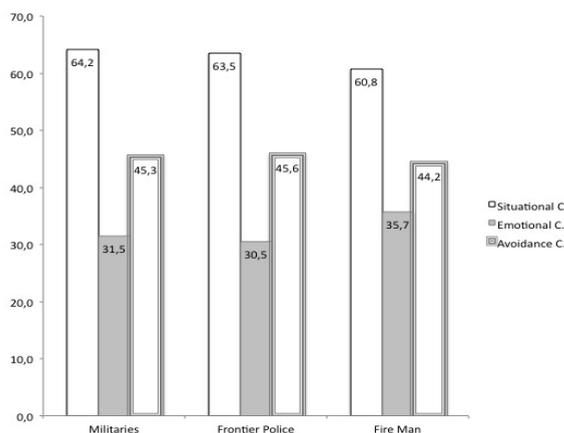


Fig. 1 – Mean scores of coping for the three professions

In the present study, an emotion-oriented coping style is used more by married people than single people, even if it is not statistically significant. In fact, the familiar relationship and the responsibility towards it can be not only a source of help but also a source of worry. These worries would guide the emergency workers towards passive strategies in facing the event instead of active strategies. In particular, comparing this among three professions, we notice a significant difference between military and other groups, in as much as the former have higher situational-oriented coping capacities than fire or frontier men (ANOVA Sig. 0,30).

Hypothesis 2. The relationship between coping styles and social support has been in part confirmed, since only the situational coping correlates with the total social support, calculated as the total score of the three support scales ( $r = .22$ ,  $p < .01$ ).

Hypothesis 3. In particular, from the analysis of the correlations among variables, it results (Table 1):

- a positive relation between situational coping and family and friends support (respectively  $r = .21$ ,  $p < .01$ , and  $r = .20$ ,  $p < .05$ );
- a negative relation between emotional coping and situational-oriented style ( $r = -.21$ ,  $p < .01$ );
- a positive relation of avoidant coping style with emotional coping ( $r = .33$ ,  $p < .01$ );
- among demographic variables, only school education is related with situational coping ( $r = .22$ ,  $p < .01$ ).

**Table 1.** Correlations between coping styles and social support dimensions ( $r$  Pearson's index).

|                           | Emotional Coping | Situational Coping | Avoidance Coping | Special Pearson's Support | Family Support |
|---------------------------|------------------|--------------------|------------------|---------------------------|----------------|
| E. Coping                 | —                |                    |                  |                           |                |
| S. Coping                 | -.21**           | —                  |                  |                           |                |
| Av. Coping                | .33**            | .01                | —                |                           |                |
| Special Pearson's Support | -.08             | .13                | .05              | —                         |                |
| Family Support            | -.14             | .21**              | .00              | .63**                     | —              |
| Friendly Support          | -.07             | .20*               | .09              | .55**                     | .52**          |

\* $P < .05$ . \*\* $P < .01$ .

On the whole, the professionals demonstrate high values of perceived social support, especially from the family (Family Support: 6,15, s.d.: 0,9) and there are not significant differences among groups. In conclusion, the importance of the cognitive evaluation is highlighted during the research of the available resources for management of a problematic situation. From this derives the functional reaction and therefore the formulation of the solutions (problem-focused coping) or dysfunctional with the concentration on the reduction of anxiety (emotion-focused coping). So, the positive link, noted in this analysis, between avoidance coping and emotional coping confirms the mainly passive nature of emotional coping. The negative link between situational coping and emotional coping confirms the active nature of situational coping.

#### **4. Discussion and Concluding Remarks**

The research confirms the relationship between coping and social support, emphasizing the importance of the family source. The latter is particularly implicated in the choice of coping styles adopted by the three categories examined, thus confirming the buffering hypotheses. According to this hypothesis, social support acts as a "protective cushion" of the health of individuals and as a moderator of the effects that stress can generate in the presence of adverse situations and stressors of life (Cohen & Wills, 1985). The results confirm the importance of the resources that the individuals obtain through the participation in the nets of informal support that are useful resources, at a micro social level, to protect the quality of life and health from factors of social danger. In this sense, the social support is the mediator between the crisis and the answer to it, can promote adaptive or active actions. Carstensen's studies (2006) show that, with the progress of time, the individual tends to maintain a reduced number of social links. These links are very important in the consequent perception of wellness. From this derives the importance of links with relatives and the network of friendships. These subjects are seen by the victims as sources of social support that can increase situational coping, the most suitable when attacking the stressor in a direct and effective way.

The relationships with family and friends are the main sources of support, because they are generally composed of people that mobilise themselves spontaneously to solve a problem. Relatives, friends and also

colleagues are subjects with whom you can share interests and values (informal system of social support), because they are part of the group to whom the subject feels a sense of belonging; thanks to this group it is possible to access the resources that constitute social support. These resources can be objectively received as support and subjectively as perceived support, but always considered as a possible distortion, in a positive sense, of what the subject really obtains.

Therefore, the results the results suggest actions aimed at strengthening parental ties as a method of counteracting the sense of loneliness and responsibility that may arise from taking critical decisions from which (decisions) depend on the effectiveness of these actions in the field. This approach must be combined with the use of defusing and debriefing techniques, employed in the sample and only in 45% of cases. So, there is little place for the self, for the opportunity to express one's own worries in front of the event, for the possible perception of ambiguity of one's own behaviour and, also, for the evaluation and handling of reactions, and yet warfare is not the only set of conditions, by far, capable of engendering post-traumatic stress (Campfield & Hills, 2001). Using cognitive event strategies, the participation in formative and informative events, is useful when facing uncertainty and ambiguity due to the increasing levels of stress of the situation; the participation in meetings dedicated to the management of stress (debriefing and defusing) are examples of strategies for the reactivation of the working and social life of emergency workers (Crocq, 2007). The results also confirm what has been reported in literature about the prevalence of situational coping for professionals working in emergency situations, especially men (Cicognani, Pietrantonio & Palestini, 2009). Situational-oriented coping includes strategies aimed at dealing directly with the stressful situation and the resulting thoughts and emotions (Skinner, Edge, Altman & Sherwood, 2003) such as effort expenditure, active coping, and thought control or cognitive reappraisal. In fact, Firemen and Border Police Forces are constantly exposed to situations of stress and they are in contact with people.

The coping is interpreted as the consequence of an evaluating process concerning the combination of specific behavioural and cognitive efforts, directed towards controlling the different resources available so that an individual can cope with unusual events (situational coping) (Prati et al., 2009). On the contrary, the escapement can be

interpreted as an answer to the sense of ineffectiveness in front of events perceived as unmanageable. For this reason, these events are faced indirectly.

Therefore, avoidance coping can be viewed as a self-protective strategy to prevent seemingly disastrous consequences. Avoidance is a relatively benign, short-term strategy to manage emotional response but the resulting negative consequences, such as energy expenditure and not being fully active in handling events, make it a passive strategy (Kashdan, Barrios, Forsyth, & Steger, 2006). The positive relationship between the emotional and avoidance suggests the first as a strategy for a passive coping technique, rather than active and planning. This datum is likely to be attributed to the young age of the interviewees or to the years spent in the working domain. This can urge the subject to use maladaptive coping strategies to deal with stressful situations (Hampel & Petermann, 2005). The relationship between age and coping strategies is, in general, a field of research still to be explored (Sica et al., 2008).

In the end, school education, a variable correlated with situational coping, can be considered an important indicator for the training of professionals working in emergencies.

Therefore, it is important to carry out preventative, professional training that is directed towards the practical repercussions in preventative and supportive areas to permit the conservation or the reinstatement of the psychological balance of the subject and the damaged population. Training in Italy involves people from different operative roles and different basic cultures and this creates problems and misunderstandings. This training has to enable the emergency worker to do his best to appraise his own proficiencies and his own motivations in order to enrich himself in terms of sensitivity, emotive intelligence, ethical correctness and awareness of his own limits. In fact, inadequate behaviours can easily increase anxiety and irritation, conflicts and demands, confusion and guilt-feelings (Watson, Brymer, & Bonanno, 2011). The attempt to control and to direct the behaviours of others will cause conflicts and incomprehension. Designing prevention and preparation programmes focused on the emotional needs of children in risk communities; for example, in accordance with the rules of Critical Incident Stress Management (CISM), or conducting research on interventions and recovery with particular attention to various types of disasters (Margolin, Ramos, & Guran, 2010). Post disaster rescue and

intervention programmes should also be aimed at increasing the perception of survivors that are being supported. They have to trust the benefits of belonging to a valued social group and community (Kaniasty, 2012).

### References

- Campfield, K. M, & Hills, A. M. (2001). Effect of timing of critical incident stress debriefing (CISD) on posttraumatic symptoms. *Journal of Traumatic Stress, 14*, 327-340. doi:10.1023/A:1011117018705
- Carstensen, L. L. (2006). The influence of a sense of time on human development. *Science, 312*, 1913-1915. doi:10.1126/science.1127488.
- Cicognani, E., Pietrantonio, L., & Palestini, L. (2009). Emergency Workers' Quality of Life: The Protective Role of Sense of Community, Efficacy Beliefs and Coping Strategies. *Social Indicators Research, 94*, 449-463. doi:10.1007/s11205-009-9441-x
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering process. *Psychological Bulletin, 98*, 310-357.
- Crocq, L. (Ed.). (2007). *Traumatismes psychiques. Prise en charge psychologique des victimes*. Issy Molineaux cedex: Elsevier-Masson.
- Everly, G. S., & Mitchell, J. T. (1997). *Critical Incident Stress Management (CISM): A New Era and Standard of Care in Crisis Intervention*. Ellicott City, MD: Chevron.
- Folkman, S., & Lazarus, R. S. (1985). If it changes it must be a process: Study of emotional and coping during three stages of a college examination. *Journal of Personality and Social Psychology, 144*, 35-40. doi: 10.1037/0022-3514.48.1.150.
- Gantt, P., & Gantt, R. (2012). Disaster Psychology. Dispelling the Myths of Panic. *Professional Safety Journal*. Retrieved from www.asse.org.
- Hampel, P., & Petermann, F. (2005). Age and Gender Effects on Coping in Children and Adolescents. *Journal of Youth and Adolescence, 34*, 73-83.
- Hobfoll, S. E. (1989). Conservation of resources: A new attempt at conceptualizing stress. *American Psychologist, 44*, 513-524.
- House, J. (1981). *Work, stress and social support*. Philippines: Addison Wesley.

- Young, B. H., Ford, J. D., Ruzek, J. I., Friedman, M., & Gusman, F. D. (1998). *Disaster mental health services: A guide for clinicians and administrators*. California, Palo Alto: National Center for Post-Traumatic Stress Disorder.
- Kaniasty, K. (2012). Predicting social psychological well-being following trauma: The role of postdisaster social support. *Psychological Trauma: Theory, Research, Practice, and Policy*, 4, 22-33. doi:10.1037/a0021412
- Kashdan, T. B., Barrios, V., Forsyth, J. P., & Steger, M. F. (2006). Experiential avoidance as a generalized psychological vulnerability. *Behaviour Research and Therapy*, 44, 1301–1320. doi:10.1016/j.brat.2005.10.003
- Krohne, H. W. (1993). Vigilance and cognitive avoidance as concepts in coping research. In H. W. Krohne (Ed). *Attention and Avoidance. Strategies in Coping with Aversiveness* (pp. 19-50). Seattle: WA, Hogrefe & Huber.
- Lavanco, G., & Novara, C. (2002). *Elementi di Psicologia di comunità*. Milano: McGraw Hill.
- Lazarus, R. S., & Folkman, S. (1985). *Stress, appraisal, and coping*. New York: Springer Publishing Company.
- Margolin, G., Ramos, M. C., & Guran, E. L. (2010). Earthquakes and children: The role of psychologists with families and communities. *Professional Psychology: Research and Practice*, 41, 1. doi:10.1037/a0018103
- Mostert, K., & Joubert, A. F. (2005). Job stress, burnout and coping strategies in the South African police service. *Sajems NS*, 8, 39-53.
- Pedrabissi, L., & Santinello, M. (1994). Validity of “Coping inventory for stressful situations” of Endler e Parker. *Ricerche di Psicologia*, 4, 49-63.
- Prati, G., Palestini, L., & Pietrantonio, L. (2009). Coping strategies and professional quality of life among emergency workers. *Australasian Journal of Disaster and Trauma Studies*, 1. Retrieved from <http://www.massey.ac.nz/~trauma/issues/2009-1/prati.htm>
- Prezza, M., & Principato, G. (2002). *La rete sociale e il sostegno sociale*. In M. Prezza e M. Santinello (Eds.). *Conoscere la comunità*. Bologna: il Mulino.

- Patterson, G. T. (2003). Coping and social support on work and life stress among police officers. *Journal of Criminal Justice*, 31, 215-226.
- Sica, C., Magni, C., Ghisi, M., Altoè, G., Sighinolfi, C., Chiri, L. R., & Franceschini, S. (2008). Coping Orientation to Problems Experienced-Nuova Versione Italiana (COPE-NVI): uno strumento per la misura degli stili di coping. *Psicoterapia Cognitiva e Comportamentale*, 14, 1, 27-53.
- Skinner, E. A., Edge, K., Altman, J., & Sherwood, H. (2003). Searching for the structure of coping: A review and critique of category systems for classifying ways of coping. *Psychological Bulletin*, 129, 216–269.
- Taylor, A. (1999). Towards the classification of disasters and victims. *Traumatology*, 5, 12-25.
- Watson, P. J., Brymer, M. J., & Bonanno, G. A. (2011). Postdisaster psychological intervention since 9/11. *American Psychologist*, 66, 6.
- Zajczyk, F., Borlini, B., & Crosta, F. (2011). *La sfida delle giovani donne. I numeri di un percorso ad ostacoli*. Milano: FrancoAngeli.

### Biodata



**Cinzia NOVARA**, Senior researcher at Department of Psychological, Pedagogical and Educational, University of Palermo.