THE VALIDITY AND RELIABILITY OF TURKISH VERSION OF THE COPING COMPETENCE QUESTIONNAIRE

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Abstract
The aim of this study is to examine validity and reliability of the Turkish version of the Coping Competence Questionnaire (Schroder & Ollis, 2013). The sample of this study consisted of 261 undergraduate students. The results of confirmatory factor analysis indicated that The Coping Competence Questionnaire Scale model was well fit ($\chi^2 = 123.98$, df= 44, RMSEA = .082, CFI = .95, IFI = .95, NFI = .92, SRMR = .062). The internal consistency reliability coefficient of the scale was .89. The corrected item-total correlations ranged from .35 to .70. Overall findings demonstrated that this scale had high validity and reliability scores.

Key Words: Coping Competence, validity, reliability, confirmatory factor analysis.

INTRODUCTION

Individuals encounter lots of stressful factors and challenges in daily life (Lazarus, 1998). While students are faced with school-related problems, adolescents may also experience problems with the business. People may have difficulties such as family issues or major life events (Moreland & Dumas, 2008). Therefore, overcoming these issues has an extremely important impact on people adjustment and positive development (Seiffge-Krenke et.al., 2010).

People respond to compelling situations which pose a stress and include threat, harm, and loss in diverse ways, many of which receive the label “coping.” In literature, coping is often defined as efforts to avoid or reduce threat, harm, and loss, or to decrease associated distress (Carver & Connor-Smith, 2010). The ability of coping with stressful factors is considered to be an significant component for successful development in adulthood,
since it may make a contribution to individuals' continuing to endeavour and attain valued personal goals, thus leading to a higher level of subjective well-being (Diener, Suh, Lucas, & Smith, 1999; Ouwehand, Riddell, & Bensing, 2008).

The concept of “coping competence”, is described based on Abramson, Seligman ve Teasdale’s (1978) Learned Helplessness Theory. According to the theory, individuals experience helplessness when they get unexpected outcomes in return their responses to situations and they develop the belief that an outcome is uncontrollable (Seligman, 1975). In this regard, people have cognitive deficits that indicate to an impaired beliefs about performing a suitable response even if the outcome is in fact controllable. Also, they have motivational deficits that have been described as becoming reluctant, not making an effort because of the fatalistic belief that nothing can be done to implement the desired outcome and finally these expectation of uncontrollability cause emotional deficits in the shape of depressed mood (Abramson et al., 1978). Thus, the coping competence reduces to possibility of helplessness responses in the face of negative life events. Furthermore, coping competence is conceptualized as a protective factor against depression that develops due to helplessness (Schroder & Ollis, 2013).

The coping competence concept is associated with coping skills and strategies that is discussed in theory of Lazarus and Folkman (1984). However, when this concept was being described, it was emphasized that different coping strategies, styles which individuals believe effectiveness can be used in each different experienced situation. It is remarked that several coping strategies are made use of depends mainly on the type of stress encountered and personal preference for specific coping styles (Carver, Scheier, & Weintraub, 1989; Schroder & Ollis, 2013). It is suggested that individuals whose coping competence is low and so prone to have learned helplessness, tend to use dysfunctional coping such as behavioral disengagement, avoidance, self-blame, denial, substance use rather than employing the problem-solving or emotional-stabilizing strategies (Carver et al., 1989; Cooper, Kartona, & Livingstone, 2008). Instead of preferring flexible and adaptive coping styles, people may apply lots of different stressful life events with the same dysfunctional coping pattern, hence probability of depressive reactions in response to stress increase (Schroder, 2012; Schroder & Ollis, 2013). In literature, there are many other concepts which are thought identified with coping competence. Some of these are dispositional optimism, self-efficacy, self-esteem and consciousness. Dispositional optimism state generalized belief in good outcomes and self-efficacy focus on positive thoughts one’s personal ability to carry out actions or cope with difficulties in realizing one’s goals. In comparison these factors, coping competence characterized by the absence of generalized negative self-efficacy, vulnerability towards helplessness and it is described as a stress buffer (Schroder, 2004). The another concept which is associated with coping competence is consciousness. The studies which examine the effects of the personality dimension consciousness on coping show that there is a positive correlation between using effective coping strategies with having higher consciousness (Bartley & Roesch, 2011). When the relation is investigated between self-esteem and coping competence, it is found that people with high self-esteem prone to use adaptive rather than maladaptive coping (Aspinwall & Taylor, 1992; Terry, 1994; Doron, Thomas-Ollivier, Vachon, & Fortes-Bourbousson, 2013). In addition, the investigations that analyze the relation between coping competence and depression indicate that there is a negative correlation between coping competence and depression level, and if individuals who have serious chronic illnesses have higher coping competence, it can be a protective factor against depressed mood (Schroder, 2004). Thus, the aim of this research is investigate the validity and reliability of the Turkish version of the Coping Competence Scale which is developed by Schroder and Ollis (2013).

METHOD

Participant
Participants were 261 undergraduate students (137 female, 124 male) who were enrolled in Sakarya University, in Turkey.

Measures
Coping Competence Questionnaire: Coping Competence Questionnaire (Schroder & Ollis, 2013) is a self-report questionnaire with 12 items rated on a 6-point scale. High scores indicate higher levels of Coping Competence. The Cronbach’s alpha internal consistency reliability coefficient of the scale was .89.
Procedure
Primarily the scale was translated into Turkish by five academicians who know English well. After that the Turkish form was back-translated into English and examined the consistency between the Turkish and English forms. Than Turkish form has been reviewed by four academicians from educational sciences department. Finally they discussed the Turkish form and along with some corrections this scale was prepared for validity and reliability analyses. In this study confirmatory factor analysis (CFA) was executed to confirm the original scale’s structure in Turkish culture and Cronbach’s alpha reliability coefficient was calculated to examine the reliability. Data were analyzed using LISREL 8.54 and SPSS 15 package programs.

RESULTS

Construct Validity
Confirmatory factor analysis demonstrated that the uni-dimensional Coping Competence model was well fit ($\chi^2 = 123.98, df= 44, \text{RMSEA}= .082, \text{CFI}= .95, \text{IFI}= .95, \text{NFI}= .92, \text{SRMR}= .062$). Factor loads of items belonging Turkish version of the Coping Competence Questionnaire is presented in Figure 1.
Item Analysis and Reliability
The Cronbach’s alpha internal consistency reliability coefficients of the Turkish form were .89 for overall scale. The corrected item-total correlations ranged from .35 to .70.

DISCUSSION
The purpose of this study was to translate the Turkish version of the Coping Competence Questionnaire into Turkish and to examine its psychometric properties. Overall findings demonstrated that this scale had acceptable validity and reliability scores. Further studies that will examine the convergent validity of the Turkish version of the scale are important for its measurement force. Also the temporal stability of the Turkish version of the scale may be calculated using test re-test method.

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REFERENCES


