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WORK STRESSORS, DISTRESS, AND BURNOUT: THE ROLE OF COPING STRATEGIES²

Despite a large number of research, literature on coping strategies, their effects on burnout symptoms, and occupational stress in general is still somewhat inconclusive. Generally, it is considered that, for instance, using an active problem solving strategy usually alleviates burnout, while using an avoidant strategy will more likely boost its symptoms. Still, there are many authors who claim that measuring coping strategies in such a general way does not help in determining their effectiveness, and that there is no "one best way" of coping.

The main aim of the present study is to test the possible mediating role of coping strategies in the relationship between stressors, distress, and burnout. A total number of 264 respondents (152 female [57.6%]) participated in the study. They completed the Sources of Stress Scale, the Coping Strategies Indicators, a distress scale from the 4-dimensional Symptoms Questionnaire, and a work burnout scale from the Copenhagen Burnout Inventory.

Results of the path analysis showed that work stressors exercised a significant direct effect on both distress and burnout. Moreover, distress also had a direct effect on burnout. Finally, contrary to the hypotheses, none of the three coping strategies proved to be the mediators in these relationships. The results once again call researchers to redirect their attention to specific contexts in which coping strategies are used and to focus more on specific coping behaviors. Such efforts would help us clarify what thoughts and actions are more or less helpful in the prevention of distress and burnout.

Keywords: seeking social support, problem solving, avoidance, distress, burnout

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Stress and burnout

On a daily basis employees make an effort to respond successfully to the demands of their job, facing a variety of stressors at the same time. At work, a number of these stressors can impair an individual's well-being both in a physiological and psychological sense. Various changes, such as high blood pressure and weakened immune system, decreased energy or a feeling of exhaustion, have direct effects on the functioning of the human mind, forcing an individual to cope with it in some way. A group of symptoms (reduced concentration, irritability, a feeling of exhaustion, muscle tension, etc.) that people generally experience when they are 'under stress', as well as the effort that has to be put into dealing with stressors is called *distress* (Terluin, van Rhenan, Schaufeli, & de Haan, 2004). Other typical outcome of stress at work is *burnout*. The burnout is "a state of physical, emotional and mental exhaustion that emerges as a consequence of a long-term involvement in the job situations that are emotionally demanding" (Schaufeli & Greenglas, 2001, p. 501). It is seen as a process that occurs when employees perceive a discrepancy between their inputs and the expected outputs, or when they are unable to cope with the high job demands (Okabayashi et al., 2008). According to its most accepted concept, the burnout syndrome implies three inter-related, but independent dimensions: (1) Emotional exhaustion: a feeling of being 'drained', being unable to summon sufficient energy for a new day, as well as having a lack of enthusiasm; (2) Depersonalization/cynicism: a feeling of detachment from work and the people from the work environment, distancing and taking on a cynical attitude, and (3) Reduced personal accomplishment: a feeling of decline in one's competence and productivity, and lowered sense of self-efficacy (Maslach, Schaufeli, & Leiter, 2001). However, not all authors agree that burnout should be defined so broadly. For example, Pines and Aronson (1988) argue that the burnout is a "state of physical, emotional and mental exhaustion, caused by a long-term involvement in emotionally demanding situations" (p. 9). Dilemmas regarding whether depersonalization/cynicism and inefficacy should be viewed as a part of burnout, or whether they are mere correlates and consequences of it, have yet to be unveiled.

Stress and coping

Lazarus and Folkman (1984) have defined *coping* as thoughts and behaviors that a person uses to manage the external or internal demands of situations that are appraised as stressful (Zotović, 2004). Some authors agree that coping strategies are relatively stable personality traits, and people usually use the same strategies for a wide range of stressful events (Carver & Scheier, 1994; Endler & Parker, 1990).

There are several taxonomies of coping strategies. Lazarus and Folkman's approach is well-known. They differ *problem-focused*, which involves addressing a problem causing distress, and *emotion-focused* coping, which is aimed at mitigating

negative emotions associated with the stressor (Folkman & Moskowitz, 2004; Lazarus, 1991; Lazarus & Folkman, 1984). However, these authors also assumed that any act or thought can have more than one coping function depending on the situational context in which is applied. Endler and Parker (1990) represent a standpoint according to which there are three basic dimensions of coping. They distinguish *task-oriented*, *emotion-oriented*, and *avoidance-oriented* coping. Amirkhan (1990) took a similar approach: combining rational and empirical steps in the process of developing his own instrument (The Coping Strategy Indicator), the author has come to the following three coping strategies: *problem solving*, *seeking social support*, and *avoidance*. Problem solving includes active efforts of an individual to solve the problematic situation, modify the stressful situation, or minimize its effects. Seeking support is defined as efforts to gain help and understanding of other people, as well as by seeking additional information related to the problem situation. Avoidance is a strategy that includes behavior of avoiding problematic situations either at the cognitive or behavioral level, or both.

Coping strategies have been studied many times in the research of mental health and organizational behavior in general. The classical studies have found that different types of avoidant coping approaches are related to poor mental health, while the effects of others (e.g. problem-solving, and seeking social support) could not have been confirmed in a consistent manner (see Folkman & Moskowitz, 2004). More recent studies, however, have found that active problem-solving results in a lower level of stress at work such as decreased distress, burnout, and better general mental health (Lee & Lee, 2001; Ro et al., 2010; Shimazu & Kosugi, 2003; van Rhenen, Schaufeli, van Dijk, & Blonk, 2008). Active coping strategies (problem-solving, and seeking social support) moderate negatively the relationship between work stress and burnout (Lee & Lee 2001; Wallace, Lee & Lee, 2010). Moreover, many studies have suggested that social support may be a very useful resource in preventing the development of burnout (Bakker, Demerouti, & Verbeke, 2004; Glasberg, Eriksson, & Norberg, 2007; Lindblom, Linton, Fedeli, & Bryngelsson, 2006). On the other hand, avoidant strategies have been generally found to increase emotional exhaustion, and decrease work achievement (Evans, Bryant, Owens, & Koukos, 2004; Haar, 2006; Lee & Lee 2001; Okabayashi et al., 2008; van Rhenen et al., 2008; Wallace et al., 2010). This result is consistent with the one of earlier studies, indicating a negative relationship between denial and health (eg. Folkman & Lazarus, 1988; Folkman, Lazarus, Gruen, & DeLongis 1986).

Yet, there are still some controversies regarding the role that coping strategies play in the stress process, as some studies reported mixed or inconclusive results (Arye, Luk, Leung, & Lo, 1999; Haar, 2006; Pejušković, Lečić-Toševski, Priebe, & Tošković, 2011; Pinquart & Silbereisen, 2008; Rantanen, Mauno, Kinnunen, & Rantanen, 2011). Moreover, some authors argue that coping responses which are effective for one outcome, may have a negative impact on another (e.g. Rantanen et al., 2011). Another issue is that the responses to the items in the self-report measures of coping may not necessarily be valid indicators of what individuals actually do or think in stressful situations.

Conceptual Framework

Terluin et al. (2004) have offered an integrative model of distress and coping, which assumes that particular occupational stressors directly result in some psycho-biological changes in the individual (such as elevated blood pressure), which are called "strain". Strain leads to distress, which motivates a person to engage in certain coping behavior in order to minimize the negative effects of stressors, and alleviate the level of distress (see also Lazarus, 1980). While successful coping may end in less distress, unsuccessful coping may turn into increased distress. In some people, however, distress may cause psychiatric illness, depending on the presence of certain vulnerability factors that may be biological or psychological in nature (for a detailed explanation of the model, see Terluin et al., 2004).

Our hypothesized model, similar to the one explained above, is shown in Figure 1. According to this model, stressors result in distress (such as disturbed sleep and irritability), which mobilize individuals to engage in seeking support and avoidant strategies in order to ameliorate these unpleasant mental states. Also, stressors directly activate problem solving strategy, thus encouraging individuals to try to find a solution for a problem if possible. Depending on how successful these strategies are, distress will develop into the burnout, which was measured as emotional exhaustion in the present study. This is somewhat different than in Terluin's original model, for he treated the exhaustion as a mediator and mental disorders (namely, depression, somatization, and anxiety) as dependent variables. This distinction is due to the differences in the operationalization of burnout – in the present study, burnout is understood more narrowly, merely as emotional weariness (Kristensen, Borritz, Villadsen, & Christensen, 2005), as opposed to classical and more widely accepted three-dimensional conceptualization (Maslach et al., 2001). However, the present study does not deal with theoretical dilemmas about the nature and dimensionality of the burnout phenomenon (for a detailed discussion, see Kristensen et al., 2005a; Maslach et al., 2001; Pines & Aronson, 1988; Schaufeli & Taris, 2005; Shirom, 2003).

Therefore, the main objective of this research is to test the model shown in Figure 1, according to which the work stressors and job insecurity result in burnout, taking into account distress and coping strategies. Explicitly, the aim of the paper is to determine how much the stressors affect the burnout at work, and whether distress and coping strategies play a significant role in this relationship.

The hypotheses are the following (see Figure 1):

1. Stressors have direct effect on stress indicators (both distress and burnout).
2. Problem solving strategy partially mediates the relationship between stressors and burnout.
3. Seeking social support and avoidant coping partially mediate the relationship between distress and burnout.
4. Distress partially mediates the relationship between stressors and burnout.

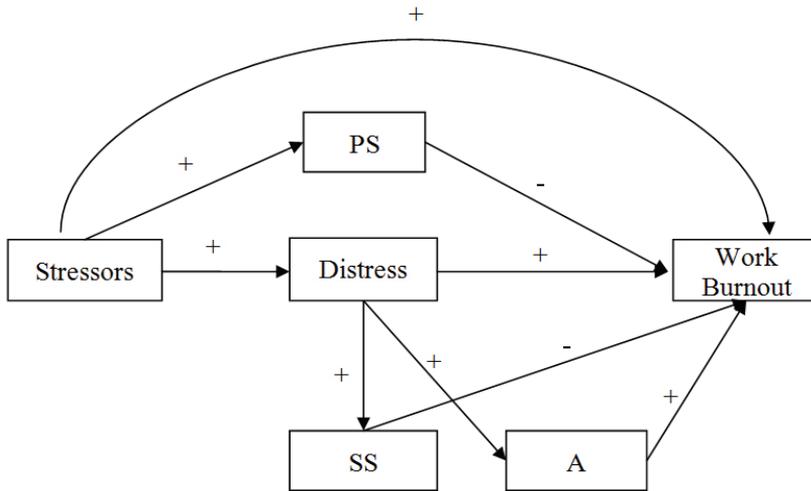


Figure 1. A conceptual model of stress, distress, coping strategies, and burnout (adapted from Terluin et al., 2004): PS - Problem solving, SS - Seeking social support, A - Avoidance

Method

Sample and Procedure

A convenience sample consisted of 264 Serbian employees (152 female [57.6%]), with an average age of 39 ($M = 38.9, SD = 11.9$), and a working experience of just above 15 years ($M = 15.2, SD = 11.4$). The greatest number of respondents completed elementary or secondary school (133; 50.4%). They were followed by university educated respondents (110; 41.7%), while the smallest number of respondents completed the postgraduate studies or doctorate (21; 8%). Far greater number of respondents were workers (218; 82.6%), in comparison to executives (44; 16.7%, thereof 19 female [43.2%] and 25 male [56.8%]).

Data collection was completed during May 2010 and carried out by psychology students who attended a course in Occupational stress at University of Novi Sad, being rewarded with 3 credits for the assignment.

Instruments

Source of Stress at Work Scale (IRS: Popov & Popov, 2013). IRS was constructed for the purpose of one earlier research (Popov & Popov, 2013) by translating and adapting the Copenhagen Psychosocial Questionnaire (COPSOQ: Kristensen, Hannerz, Høgh, & Borg, 2005). The scale consists of 38 items, and its main purpose is to assess

the stressful working conditions: a) adverse working conditions (the item example “Your job requires from you to work very fast.”) and b) job insecurity (“Are you worried about getting fired?”). All the items have the five-point Likert-type response format, except for the job insecurity subscale which has a dichotomous response format *yes/no*. For the purpose of this research only the adverse working conditions subscale was used. Higher scores indicate more work related stressors.

Coping Strategies Indicator (CSI: Amirkhan, 1990). CSI is a multidimensional instrument for the assessment of “general coping strategies that underline the myriad specific coping responses to stress” (ibid, p. 1066). It consists of three different dimensions (problem solving, seeking social support and avoidance) and 33 items (11 items for each subscale) with a three-point response format (*a lot, a little, and not at all*). In each item, the respondents had to decide on the level in which they tried to resolve the problem (e.g. “... rearrange things in your life so that your problem has a great chance to be resolved.”), sought social support (e.g. “shared ... your feelings with a friend.”), or avoided the situation (e.g. “tried to get your mind off of the problem.”). Higher scores on each subscale indicate more intensive use of the coping strategy represented by the subscale.

Four-Dimensional Symptom Questionnaire (4DSQ: Terluin et al., 2004). 4DSQ is a multidimensional questionnaire intended to assess distress and other psychopathological symptoms on the working population – somatization, depression, and anxiety. This research used the distress scale, which consisted of 16 items (the item example “How often have you had difficulties to fall asleep in the last four weeks?”), with three-point response format (*never, sometimes, and often*), adapted from original five-point format.

Work Burnout (WB: Borritz et al., 2005). WB scale was created within the PUMA project (Project on Burnout, Motivation, and Job Satisfaction) and it is part of the Copenhagen Burnout Inventory (Kristensen et al., 2005b). Work burnout scale measures the physical and psychological exhaustion related to work. It consisted of 7 items (e.g. “Do you find your job emotionally exhausting?”). The task of the respondents was to give their answers on the five-point Likert-type response format (from *almost not at all* to *to a great extent*). Hereinafter, this variable is called burnout, and higher scores indicate a higher degree of burnout.

Statistical Data Analyses

Path analysis was performed by using EQS 6.1 (Bentler, 2006). The degree to which the data fit the path models was assessed by using the following absolute fit indices: (1) the χ^2 goodness-of-fit statistic, (2) Goodness-of-fit index (GFI); (3) Root Mean Square Error of Approximation (RMSEA), and (4) Standardized Root Mean-Square Residual (SRMR). Since χ^2 was sensitive to sample size, three relative goodness-of-fit measures were calculated as well: (1) standardized fit index (NFI), (2) non-standardized fit index (NNFI), and (3) comparative fit index (CFI). Values smaller than .05 for RMSEA might indicate a good fit, values smaller than .08 are indicative of an acceptable fit, while values greater than .10 might reveal a serious

problem (Browne & Cudeck, 1993; Kline, 2010). For the three relative fit indices, values greater than .90 might indicate a good fit (Hoyle, 1995). However, Hu and Bentler (1999) recommended slightly higher threshold, such as .95 for the CFI. For the SRMR, Hu and Bentler (1999) set the threshold of $\leq .08$ for acceptable fit, but Kline (2010) suggested that this value was not a very demanding standard. Prior to all these analyses, multiple imputations which used the EM algorithm were conducted to replace missing values (Tabachnik & Fidell, 2001).

Results

Descriptive statistics

Descriptive statistics (including means, standard deviations, skewness, kurtosis and α coefficients) and correlations among all study variables are presented in Table 1. Values of skewness and kurtosis for all variables are in a range which indicates a normal distribution, except in the case of the problem-solving strategy, where they suggest that its distribution slightly deviates from normal. It should be noted as well that the internal consistency is slightly lower for the avoidant coping.

Table 1

Descriptive statistics and intercorrelations for variables in the research

Variables	<i>M</i>	<i>SD</i>	<i>Sk</i>	<i>K</i>	1	2	3	4	5	6
1. Stressors (34)	87.03	16.89	.26	-.39	.84					
2. Problem Solving (11)	28.48	4.14	-1.3	1.77	-.15*	.80				
3. Seeking Social Support (11)	23.63	5.78	-.21	-.73	-.09	.23**	.89			
4. Avoidance (11)	19.28	3.83	.17	-.34	.31**	.04	.01	.68		
5. Distress (16)	11.41	7.43	.32	-.68	.44**	-.03	-.01	.49**	.90	
6. Work Burnout (7)	40.29	21.31	.26	-.51	.61**	-.13	-.02	.29**	.52**	.88

Note. A number of items in each instrument given in parentheses.

The intercorrelation matrix diagonal shows α coefficient of internal consistency.

* $p < .05$; ** $p < .01$

Model testing

The hypothetical model depicted in Figure 1 was tested with the path analysis in the software package EQS 6.1. Results indicated that the model showed acceptable fit to the data, $\chi^2(6) = 20.48$, $p < .05$, GFI = .98, CFI = .95; RMSEA = .10 (90% CI = .05; .14); NFI = .93, NNFI = .88, SRMR = .06. However, apart from the

significant χ^2 , the upper confidence interval for the RMSEA, which exceeds the cut-off score of .10 sheds a shadow of doubt on the adequacy of the model (Kline, 2010). Therefore, a direct path from problem solving to seeking support was added, based on the fact that these two variables showed the largest standardized residual (.23). This addition resulted in a better model fit, $\chi^2(5) = 6.84, p > .05, GFI = .99, CFI = .99; RMSEA = .04$ (90% CI = .00; .10); NFI = .98, NNFI = .98, SRMR = .03³. Figure 2 presents standardized paths between all variables in the modified model.

Contrary to the hypotheses, none of the three coping strategies had significant direct effect on burnout. In addition, and also contrary to the hypotheses, stressors had direct negative effects on the problem-solving strategy – meaning that the more stressors a person experiences the less problem solving strategies he/she used (hypotheses 2 and 3 *rejected*). Other relations were in accordance with the presumed model – it was shown that stressors had a direct effect on distress, $\beta = .46$, and burnout, $\beta = .42$, whereas distress also had a direct positive effect on burnout, $\beta = .36$ (hypotheses 1 and 4 *supported*). Inspection of modification indices (Lagrange Multiplier and Wald tests) revealed that the model could be additionally improved if insignificant paths between coping strategies and burnout were removed from the equation, $\chi^2(8) = 7.99, p > .05, GFI = .99, CFI = 1.00; RMSEA = .00$ (90% CI = .00; .07); NFI = .97, NNFI = 1.00, SRMR = .03. Removal of these paths did not substantially affect other paths in the model.

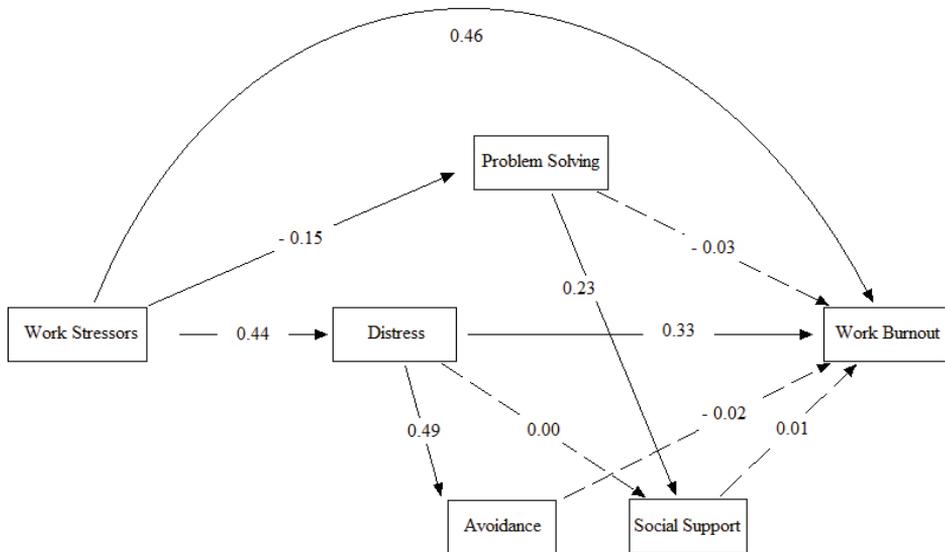


Figure 2. ML estimates for proposed model of burnout ($N = 264$). Standardized solution reported. Dashed lines represent insignificant paths ($p > .05$).

³ We also tested a model with reversed link, leading from social support to problem solving, but this model showed slightly worse fit to the data, $\chi^2(5) = 8.14, p > .05, GFI = .99, CFI = .99; RMSEA = .05$ (90% CI = .00; .11); NFI = .97, NNFI = .97, SRMR = .04

Besides this model, we tested a hypothetical model which treated coping strategies as independent variables (and not as mediator variables like in Figure 1) – it was assumed that they had an independent contribution to the prediction of distress and burnout. However, the proposed model did not fit adequately to the data, $\chi^2(9) = 35.69$, $p < .05$, GFI = .95, CFI = .88; RMSEA = .15 (90% CI = .11; .20); NFI = .87, NNFI = .71, SRMR = .11.

In sum, path analyses supported hypothesized (partial) mediating role of distress in the relationship between adverse working conditions and work burnout. However, they did not support the mediating role of three general coping strategies in the relationship between the stressors and burnout. Moreover, the alternative model, which treated coping strategies as independent predictors of burnout, also did not work well.

Discussion

The main goal of this study was to test a mediating role of distress and three general coping strategies in the relationship between the adverse working conditions (namely, stressors) and emotional burnout.

Data analysis has supported the first and the second hypotheses. The role of work stressors in the prediction of distress and burnout is well documented in the literature, thus representing an expected finding (e.g. Borritz et al., 2005; Schaufeli & Bakker, 2004; Schaufeli, Bakker, & Van Rhenen, 2009). Also as expected, distress functions as a partial mediator in the relationship between stressors and burnout, thus leaning support to general mental health model proposed by Terluin et al. (2004).

Unexpectedly, our hypotheses regarding possible mediating roles of coping strategies have not been supported. Respondents reported that the problem-solving strategy was most frequently used, while the avoidant strategy was used the least. However, contribution of these strategies to the prediction of burnout is somewhat different than expected. The results suggest that the only strategy that correlates with distress is avoidance - in a positive direction. This finding is almost identical with the results obtained by the authors of 4DSQ Distress Scale (Terluin et al., 2004). Many other studies have also shown a positive correlation between the avoidance and various stress indicators (Chen & Cunradi, 2008; Shimazu & Kosugi, 2003; Snow, Swan, Raghavan, Connell, & Klein, 2003). However, contrary to our predictions and a great deal of previous findings (eg., Leiter, 1991), avoidant coping has not proven to be a significant predictor of burnout. A possible explanation for this finding is that distress and burnout share a lot of common variance, and that, statistically speaking, distress “removes” a variance that avoidance shares with burnout. Most of the above mentioned studies usually did not test distress and burnout in the same model.

However, an even more surprising result is that the problem-solving strategy and seeking social support did not have a direct effect on burnout (however,

problem solving positively predicted seeking social support). Even though, for example, Chen and Cunradi (2008) obtained similar results, such findings are minor and inconsistent with the current knowledge in this field. Thus, for example, Shimazu and Kosugi (2003) have concluded in their paper that "... we may say that direct problem solving by active coping leads to lower psychological distress in responding to daily or routine stressors in work settings." (p. 48). Other authors also have concluded that the problem of solving strategies contribute to better mental health primarily by eliminating the sources of stress, i.e. the problems at work (Snow et al., 2003; Van Rhenen et al., 2008).

There are a few plausible explanations of the obtained results of why the active coping strategies do not predict burnout. Partially, the differences in the obtained results can be attributed to different measuring techniques of coping strategies. The question is what is actually measured by these different scales, and whether the instruments of coping strategies measure the same thing. Thus, for example, there are several different names for the cognitive coping behavior, which can be found in the literature (problem solving, problem-focused, planning, active cognitive, etc.), which hinders the comparability of the obtained results. In relation to the foregoing, some authors have emphasized the problems in measuring coping strategies with the questionnaire in several ways on several grounds (Folkman & Moskowitz, 2004): potentially burdensome length, inadequate sampling of coping inherent in checklist approaches and response keys that are difficult to interpret, variations in a recall period, changes in meaning of a coping strategy depending on when it occurs (problem solving vs. rumination), etc. Another problem in the measurement of coping strategies is the fact that the questioners require retrospective reports of respondents on coping behaviors, applying to the long period of time. Therefore, some authors propose shortening of the recall period in the instruments that measure coping behavior (for example, daily measurement of coping; Ptacek, Smith, Espe, & Raffety, 1994). Another explanation for such results could be the understanding of the effects of coping behaviors. More specifically, a mere fact that one applies the problem-solving strategy does not necessarily mean that the problem is actually solved, i.e. that effects of stressors are alleviated. This practically means that although the employees engage in problem solving at work, it may not have any effects on the elimination of the stressors, since employees possibly have not developed problem solving skills at a satisfactory level. Besides, the context of coping largely determines its effectiveness (Lazarus & Folkman, 1984). The same could be said for the seeking social support. In this study we did not measure the quality of the social network of respondents, i.e. to which extent the required social support is actually available to the employee when he/she needs it. It has been repeatedly proven that the social support, when present, is one of the most important resources in fighting against the burnout syndrome (Bakker, Demerouti, & Verbeke, 2004; Glasberg, Eriksson, & Norberg, 2007; Lindblom, Linton, Fedeli, & Bryngelsson, 2006).

To conclude, stressors have a direct positive effect on distress which consequently leads to higher burnout. However, the distress is only a partial

mediator, since the stressors also exercise a direct effect on burnout. Employees who work under higher level of distress have reported more frequent use of avoidant coping strategy. However, that strategy has not proved to be a significant predictor of burnout, possibly because the greatest part of the burnout variance is explained by stressors and distress. Respondents who perceive more stressors at work less involve the problem-solving strategy. However, as in the case of the avoidance, such behavior is not related to the burnout symptoms. Finally, contrary to our expectations, seeking social support has achieved a significant relationship only with problem solving strategy. With that in mind, results from this study raise a serious question about usefulness of questionnaires that measure general coping strategies in the occupational stress research, without taking into account the specific context in which these strategies were being used.

The study has several limitations. Firstly, all variables are measured with self-report instruments, leading to the problem of the common method bias (Podsakoff, MacKenzie, Lee, & Podsakoff, 2003). Secondly, job stressors measured in this study included very broad categories of adverse working conditions and events. Future studies should pay more attention to the specific dimensions of such events, for example job demands, role overload, or ambiguity. Such approach would provide more thorough understanding of the nature of stressful conditions at work, thus helping in the determination of more specific links between such conditions and coping strategies employees use in order to mitigate their negative effects. The cross-sectional research design does not offer the possibility to make definite conclusions on the causal relations among measured constructs.

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IZVORI STRESA NA RADU, DISTRES I IZGARANJE: ULOGA STRATEGIJA PREVLADAVANJA

Uprkos velikom broju istraživanja, zaključci o ulozi strategija prevladavanja u razvoju izgaranja još uvek nisu definitivni. Generalno se smatra da korišćenje strategije aktivnog rešavanja problema obično ublažava izgaranje, dok korišćenje izbegavajuće strategije pojačava njegove simptome. Ipak, mnogi autori smatraju da merenje takvih, generalnih strategija prevladavanja nije naročito korisno u proceni njihove efektivnosti, kao i da ne postoji najbolji način prevladavanja, već da upotreba određenih strategija u velikoj meri zavisi od konteksta.

Terluin i saradnici (Terluin et al., 2004) su predložili generalni model distresa, prevladavanja i izgaranja, koji pretpostavlja da stresori uzrokuju distres koji mobilise osobu da aktivira određene strategije prevladavanja sa ciljem minimiziranja efekata tih stresora, odnosno smanjivanja nivoa distresa. Osim toga, stresori direktno vode aktiviranju strategije rešavanja problema, čiji je cilj da, ukoliko je to moguće, iznađu rešenje problema (odnosno da eliminišu stresore). U zavisnosti od toga koliko su te strategije uspešne, distres će se, u većoj ili manjoj meri, razviti u izgaranje.

Glavni cilj ovog istraživanja je da se testira potencijalna medijaciona uloga strategija prevladavanja u relaciji između stresora, distresa i izgaranja. Ukupno 264 ispitanika (152 žene i 112 muškaraca) učestvovalo je u istraživanju. Ispitanici su popunili Skalu izvora stresa na radu, Inventar strategija prevladavanja, Skalu distresa iz četvorodimenzionalnog upitnika simptoma anksioznosti i depresivnosti, kao i Skalu izgaranja na radu preuzetu iz Kopenhagen inventara izgaranja. Osnovne hipoteze istraživanja: (1) stresori će imati direktan efekat na distres i izgaranje, (2) strategija rešavanja problema će biti parcijalni medijator u relaciji stresora i izgaranja, (3) traženje socijalne podrške i izbegavajuća strategija će imati parcijalnu medijacionu ulogu u relaciji distresa i izgaranja, i (4) distres će imati parcijalnu medijacionu ulogu u relaciji stresora i izgaranja. Finalni model putanje pokazao je zadovoljavajuće indekse podesnosti, $\chi^2(5) = 6.84, p > .05, GFI = .99, CFI = .99; RMSEA = .04$ (90% CI = .00; .10); NFI = .98, NNFI = .98, SRMR = .03. Rezultati analize puta su pokazali da stresori zaista imaju direktan efekat, kako na distres, tako i na izgaranje. Takođe, distres je imao direktan efekat na izgaranje (hipoteze 1 i 4 podržane). Konačno, suprotno hipotezama 2 i 3, nijedna

od tri strategije prevladavanja nije ostvarila statistički značajan efekat na izgaranje. Dobijeni rezultati još jednom su pokazali da merenje strategija prevladavanja na ovakav način nije naročito korisno u razumevanju njihove uloge u stres procesu. Poučeni rezultatima ovih i mnogih prethodnih istraživanja, pozivamo istraživače da u budućim istraživanjima više pažnje posvete specifičnom kontekstu u kome zaposleni koriste svoje strategije prevladavanja, kao i da se fokusiraju na konkretne misli i ponašanja koje zaposleni koriste u prevladavanju stresa. Sprovedena studija ima i izvesne nedostatke: sve mere su dobijene samoprocenom ispitanika, a osim toga, ispitivani su generalni izvori stresa, a ne specifični za svako zanimanje i radnu poziciju. U budućim istraživanjima trebalo bi više pažnje posvetiti specifičnim dimenzijama izvora stresa (poput emocionalnog rada, konflikta uloge i sl.), a mere uzimati iz više izvora (npr. zaposleni i njihovi pretpostavljeni).

Ključne reči: traženje socijalne podrške, strategija rešavanje problema, izbegavajuća strategija, distres, izgaranje