Table of Contents

If you’re viewing this document online, you can click any of the topics below to link directly to that section.

Coping with Life Transitions. ERIC Digest.................................................. 1
   THREE WAYS TO VIEW LIFE TRANSITIONS...................................... 2
   SOCIAL INTERACTION MODEL............................................................ 2
   PREDICTABLE OVERLAPPING STAGES.............................................. 3
   COPING ATTITUDES AND SKILLS......................................................... 4
   CONCLUSION.................................................................................. 6
   REFERENCES................................................................................... 6

ERIC Identifier: ED350527
Publication Date: 1992-04-15
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Source: ERIC Clearinghouse on Counseling and Personnel Services Ann Arbor MI.

This digest covers representative models of life transitions with their counseling implications. It also presents selected coping skills and attitudes with which to manage such changes effectively. A transition is a short-term life change characterized by a
sharp discontinuity with the past. Thus, transitions have identifiable beginnings and usually definite endings. Examples are job changes, disabling accidents, marriage, birth, divorce, victimization, death, moving and travel. These transitions can be positive experiences, such as a vacation, or painful and tragic such as losing a relationship. Such changes usually are experienced as losses; hence, transitions thrust the person into mourning. A transition can be voluntary or involuntary, and it can be on-time (as in retirement), or off-time (as in the fatal illness of a child). Excluded from this definition of transition are developmental changes—growing from childhood to adolescence, for example—and broad social or political changes.

THREE WAYS TO VIEW LIFE TRANSITIONS

METAPHORS FROM CLASSICAL LITERATURE
Bridges (1980) uses metaphors, mainly from classical literature, to describe transitions over a lifetime. The journey, for example, is a common image. Homer, the classical Greek poet, describes in vivid images Ulysses’ decade of travel changes. A counseling implication of this type of image is to encourage clients to see their individual and serial transitions in terms of personally meaningful metaphors, and as significant learning events on their lifelines.

SOCIAL INTERACTION MODEL
A second way of characterizing a life transition is Schlossberg's (1984) social interaction model. She characterizes a transition in terms of its type, context, and impact. She states that a transition must be examined in regard to:

* The way a person appraises the transition event;

* The nature of the transition itself;

* The coping resources present at the time of the transition;

* The personal characteristics of the person and the environment (social supports, for example).

These interacting variables then are studied to ascertain the balance of current and possible assets and liabilities. They also are linked to developmental characteristics of
the person, such as identity, age and maturity. A counseling implication of this model is that the counselor must do a thorough assessment of these variables to determine where the person is now in relation to the transition, the balance of coping assets and liabilities, and what resources can be marshaled to help that person cope satisfactorily.

PREDICTABLE OVERLAPPING STAGES

A third model construes the transition as a process consisting of fairly predictable stages that overlap one another and that often recycle through earlier stages (Brammer, 1991). These stages are adaptations of the literature on death as described by Kubler-Ross (1969) and Parkes (1972). Hopson (1981) has adapted this model of the grieving process to transitions in general.

The stages begin with the entry experience of confusion and emotional discomfort, along with shock if the loss is unexpected and severe. Following this initial reaction is a brief period of sadness or despair, often alternating with relief and positive feelings. In a divorce, for example, the person experiences alternating feelings of sadness over the dissolution of the relationship, but also some relief that conflict and ambiguity are lessened.

Unless the loss is severe, a period of stabilized moods is experienced. Defense mechanisms such as rationalization, denial and fantasy, for example, are mobilized. Previously learned coping skills and resources such as one’s support network are tapped. But this stabilization is usually short-lived as awareness of fears for the future and anger at the transition emerges. Self-esteem usually plummets and feelings of sadness, dread, or depression take over.

The length of this feeling of depression depends on the person’s perception of the severity of the loss, availability of coping resources, and cultural attitudes about the appropriate length of grieving. The person is encouraged to perceive this time as a healing period and relief from pressures of work and responsibility. Self-nurturing and frequent interaction with the support networks are important, but each person must discover his or her own method of getting through this painful period.

One goal is to let go of the past person, thing, job or value and take hold of a new object or relationship. These attitudes and resources, combined with the passage of time, enable the person to regain self-confidence and self-esteem. The person begins to look to the future with optimism and hope. If this process of healing and taking hold is successful, this stage emerges in a renewal phase characterized by setting new goals, making plans, and initiating actions. Thus, growth is enhanced through continual renewal efforts.

One counseling implication of this model is the importance of determining where people are in this process model after the transition has begun. In the first stage, much support is needed to help people get through their initial shock and the disruption of their lives.
People need to understand the confusing feelings of despair and hope following initial reactions to the transition event. When the subsequent short stabilization period is experienced, methods of sustaining hope and self-esteem, as well as inoculation from depression, are needed. Since change frequently is injurious to physical health also, people need to be cautioned to maintain optimal health. Counselors need to be alert for indications that the person is letting go of the past and is taking hold of the new, so that reinforcement of these efforts at healing and renewal can be given. Thus, the renewal process and the trend toward growth and recovery can be accelerated and maintained.

This process often does not proceed in nicely calibrated phases, and people often recycle through the process. The sequences of these phases are not always predictable. For example, some people might spend years grieving the losses from their life transitions. A key criticism of this process model is that it is often oversimplified and the orderly progression of the stages for all people in transition is taken for granted.

COPING ATTITUDES AND SKILLS

Coping is viewed in the psychological literature as a form of self-initiated problem solving. Thus, it is clearly distinguished from adjustment and psychological defense, which are fairly automatic responses to change and threat. Similarly, transformational forms of personal change often come about through intense life experiences over which people have little control. Skillful "copers" are effective in appraising the possible threats and dangers in the change event, and can choose among alternative courses of appropriate action (Lazarus & Folkman, 1984).

Attitudes contribute to a satisfactory coping response. A key attitude is to view change as a normal part of living, as opposed to a view that the transition is some kind of terrible curse, unlucky event, or unnecessarily difficult problem to solve. The effectiveness of viewing the transition as a challenging event, even welcoming it as an opportunity for creative growth, has much support in research (Kobassa, 1979). A man, for example, who sees his company about to reorganize and consolidate decides that he will use this transition event to move toward the career he always wanted--a business of his own. Thus, he viewed this move as a challenging opportunity.

People who perceive themselves as being in control of their lives, and to a large extent over the events in their lives, are among what Kobassa (1979) calls "hardy copers." A related attitude in the hardy copers' repertoire is commitment--knowing their values and goals, as well as having the intention of pursuing them diligently. In other words, they know who they are and what they want. The transition is perceived as just another hurdle to jump along life's raceway. They are willing to take responsibility for their actions and do not blame others for the transitions that inevitably come into their lives. When becoming ill, for example, they are willing to look for flaws in their own lifestyles as well as to look for external physical causes.

The length of time required for satisfactory resolution of a transition depends on a
number of mediating factors. Some key ones are:

- The meaning that the transition has for the person;
- The extent to which the person is aware of and expresses feelings about the transition;
- Previous experiences with transitions and learning from them;
- The availability of support systems;
- Counseling;
- Personal coping skills.

Coping skills can be classified in various ways, but a simple list that incorporates several subcategories follows:

- Building and utilizing support networks;
- Cognitive restructuring, or reframing;
- Solving problems in the rational, intuitive, discovery, and systems modes;
- Managing stress responses and stress-inducing events.
All of these skill clusters are teachable (Brammer & Abrego, 1981). The key goal for counselors who are helping people cope with threatening personal change is to teach them the skills they can use to conceptualize the nature of their transitions (e.g., as a fairly predictable and understandable process) and the skills to cope with various stages in the process. The principal goal would be self-management of their transitions since they are such a common part of human existence. A second goal would be to help people inoculate themselves against the unwanted consequences of their transitions, such as depression, hopelessness, chronic grief, and self pity, or awareness of being in crisis and out of control.

CONCLUSION

The goals cited above can be reached not only through learning specific coping skills and attitudes, but also by acquiring knowledge about the nature of the transition process through engaging in a self-inquiry when the transition ends. This inquiry includes questions such as, What did I learn about myself, others and the nature of transitions as a result of working through this transition? The anticipated outcome is that people would be able to manage their own transitions effectively without outside help.

REFERENCES


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