

**THE ROLE OF LEISURE ENGAGEMENT IN THE
RELATIONSHIP BETWEEN COPING AND
PSYCHOLOGICAL WELL-BEING AMONG ADOLESCENTS**

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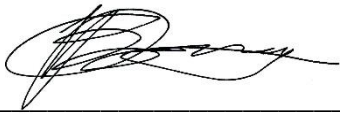
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Abstract

Adolescence is a dynamic life phase, universally accepted as a transitional period hallmarked by rapid physical development, as well as dramatic cognitive, emotional, and psychosocial changes. Moreover, South African adolescents are still faced with various obstacles due to an uncertain and diverse post-apartheid society. Given the vast amounts of stressors that South African adolescents encounter daily, it is necessary to explore whether these adolescents might benefit from engaging in leisure activities that may aid in coping as well as contribute towards higher levels of psychological well-being. Furthermore, there is a paucity of research regarding the use of leisure as a coping strategy within the South African adolescent population. Therefore, the purpose of this study was to further our understanding of the role of leisure in coping and adolescent psychological well-being. The current study thus aimed to determine if leisure engagement, particularly as a coping strategy, could moderate the relationship between coping and psychological well-being amongst adolescents in the Northern Cape Province of South Africa.

In order to achieve the goal of this study, a quantitative, non-experimental, cross-sectional research design was employed. Permission was granted by the Northern Cape Department of Education to conduct the data collection at schools within the Northern Cape Province. Participants were selected from three schools in the province by means of non-probability, convenience sampling and consisted of 228 learners (112 males and 116 females) from Grades 10 to 12. Participating adolescents were between the ages of 14 and 19 years, with a mean age of 16.26. A self-report battery consisting of a biographical questionnaire, the *Brief Coping Orientations to the Problem Experienced Questionnaire (Brief COPE)*, the *Leisure Coping Strategy Scale*, and *Ryff's Scale of Psychological Well-Being* was used to obtain valuable data.

This study endeavoured to supplement existing research in positive psychology by aiming to demonstrate the specific representation of the constructs of coping, leisure, and psychological well-being in the lives of the South African adolescent population.

For this purpose, these positive psychology constructs were measured amongst a sample of South African adolescents. The Pearson product-moment correlation, hierarchical multiple regressions, as well as moderated multiple regressions were run to measure these constructs and subsequently answer the research questions. The study confirmed statistically significant relationships between three coping strategy categories and adolescent psychological well-being, as well as between leisure as a coping strategy and adolescent psychological well-being. Gender, and leisure engagement, however, were not found to be statistically significant moderators in the relationship between coping and adolescent psychological well-being.

The current findings underscore the importance of leisure engagement, particularly leisure as a coping strategy, during the crucial life phase of adolescence. Further evidence has also been provided to suggest that positive leisure experiences and specific types of leisure activities not only help adolescents to cope with various stresses, but also contribute towards higher levels of psychological well-being. Finally, these findings highlight the importance of examining coping, leisure, and psychological well-being as multidimensional constructs within the South African context.

Key words: Adolescence, coping, leisure, psychological well-being, positive psychology, South Africa

Opsomming

Adolesensie is 'n dinamiese lewensfase wat universeel aanvaar word as 'n oorganstydperk gekenmerk deur vinnige fisiese ontwikkeling sowel as drastiese kognitiewe en emosionele veranderinge. Bowenal word Suid-Afrikaanse adolessente gekonfronteer met verskeie struikelblokke as gevolg van 'n onseker en diverse na-Apartheid samelewing. Gegewe die ontsaglike hoeveelheid stressors wat die Suid-Afrikaanse adolessente daagliks teekom, is dit noodsaaklik om te eksploreer of adolessente baat vind by deelname aan ontspanningsaktiwiteite wat bydra tot coping en verbeterde psigologiese welstand. Verder is daar 'n gebrek aan navorsing met betrekking tot ontspanning as 'n coping strategie met 'n populasie van Suid-Afrikaanse adolessente. Daarom is die doel van die studie om ons begrip uit te brei rakende die rol van ontspanning in coping en die verbetering van psigologiese welstand tydens adolesensie. Die huidige studie beoog om te bepaal of deelname aan ontspanningsaktiwiteite, veral as 'n spanningshantering strategie, 'n beduidende faktor is in die verhouding tussen coping en die psigologiese welstand van adolessente in die Noord-Kaap provinsie van Suid-Afrika.

Ten einde die doel van die studie te bereik was 'n nie-eksperimentele, kwantitatiewe navorsingsontwerp gebruik. Toestemming was toegestaan deur die Noord-Kaap se Departement van Onderwys om data in te samel by skole in die Noord-Kaap provinsie. 'n Steekproefgroep is deur middel van 'n nie-waarskynlikheid, gerieflikheidsteekproeftrekking uit drie skole in die provinsie gekies. Die steekproefgroep het bestaan uit 228 leerders (112 manlik en 116 vroulik) vanaf Grade 10 tot 12. Deelnemers se ouderdomme het gestrek vanaf 14 jaar tot 19 jaar met 'n gemiddelde ouderdom van 16.26. Die data is versamel deur 'n self-verslag vraelys wat bestaan uit 'n biografiese vraelys en die konstrakte coping, ontspanning en psigologiese welstand is afsonderlik gemeet deur die *Brief Coping Orientation to the Problem Experienced Questionnaire*, die *Leisure Coping Strategy Scale*, en *Ryff's Scale of Psychological Well-being*.

Die studie poog om bestaande navorsing in positiewe sielkunde aan te vul deur die verwantskap tussen die konstrakte coping, ontspanning en psigologiese welstand in die lewens van Suid-Afrikane adolossente te demonstreer. Vir die doel word die drie konstrakte uit positiewe sielkunde gemeet in 'n steekproefgroep van Suid-Afrikane adolossente. Die Pearson produkmoment korrelasie, hiërargiese meervoudige regressie, sowel as gemodereerde meervoudige regressie metodes was gebruik om die konstrakte te meet en sodoende die navorsingsvraag te beantwoord. Die uitslae van die studie bevestig 'n statistiese beduidende positiewe korrelasie tussen drie kategorieë van coping en die psigologiese welstand van adolossente, asook tussen ontspanning as 'n coping strategie en psigologiese welstand in adolossente. Geslag en die deelname aan ontspanningsaktiwiteite toon egter geen statistiese beduidende korrelasie met betrekking tot coping en die psigologiese welstand van adolossente nie.

Die huidige studie beklemtoon die belangrikheid van ontspanning, veral as 'n coping strategie, gedurende die belangrike lewensfase van adolossente. Verder word bewyse gelewer wat daarop dui dat positiewe ontspanningservarings en spesifieke ontspanningsaktiwiteite adolossente help met die hantering van verskeie stressors en ook bydra tot verbeterde psigologiese welstand. Gevolglik dui die studie se bevindings op die belangrikheid van verdere ondersoek van die multidimensionele konstrakte; coping, ontspanning en psigologiese welstand, binne die Suid-Afrikaanse konteks.

Sleutelwoorde: Adolossente, coping, ontspanning, psigologiese welstand, positiewe sielkunde, Suid-Afrika

Chapter 1

Introduction

This chapter serves as an introduction in which the general aim and rationale of the research are addressed in order to substantiate the significance of the current study. A brief discussion on the paradigm and theoretical framework that are subscribed to, are included to contextualise the study. This chapter further aims to briefly orientate the reader with regards to the research design utilised in this study. However, these practices are only discussed briefly, since detailed descriptions follow in the subsequent chapters. The chapter will also clarify certain key concepts and conclude with a delineation of the chapters to follow.

1.1. Introduction and Theoretical Background

Adolescence is a dynamic life phase, universally accepted as a transitional period hallmarked by rapid physical development, as well as dramatic cognitive, emotional, and psychosocial changes (Berk & Meyers, 2015; Craig & Dunn, 2013; Hall, 1904). During these developmental stages, individuals are confronted with a series of developmental hurdles and challenges which need to be addressed in order to successfully progress into adulthood. On the path to successful adulthood, adolescents need to master certain developmental tasks, including the development of an own identity, accepting physical changes, developing socially responsible behaviour, and the development of both cognitive skills and independence (Louw & Louw, 2010; Schwartz, Zamboanga, Luyckx, Meca, & Ritchie, 2013).

This developmental stage is thus characterised as a challenging part of human development. Adolescence is often referred to as a time of “storm and stress” where adolescents are characterised as confrontational, moody, rebellious and prone to high risk behaviour (Hall, 1904; Steinberg, 2010). Furthermore, South Africa presents a unique context for adolescents to mature in. South African adolescents are still faced with various obstacles due to an uncertain and diverse post-apartheid society (Theron

& Theron, 2010), even though the current group of South African adolescents were born after South Africa became a democracy in 1994. Research indicates that this group is too young to be directly impacted by the inequalities of the apartheid era, although they are still affected by inherited negative consequences of apartheid (Fleetwood, 2012; Mattes, 2012). Consequently, the trajectory of development among adolescents in transitional societies and from emerging countries such as South Africa is less well understood.

Nevertheless, South African adolescents' developmental progress is influenced by their exposure to an array of unique environmental stressors within their communities. These environmental stressors include economic deprivation, poverty, community violence, the HIV pandemic, food shortages and a failing education system (Brook, Rubenstone, Zhang, Morojele, & Brook, 2011; Smith & Somhlaba, 2015; Theron & Theron, 2010; van Rooyen, Naude, Nel, & Esterhuysen, 2014). In addition, single-parent and child-headed homes, drug and alcohol abuse and rising unemployment are challenges faced by all South Africans (Brook et al., 2011; Smith & Somhlaba, 2015; van Rooyen et al., 2014). Apart from these more major stressors and concerns, adolescents also face normative stressors, more commonly known as daily hassles. Daily hassles include the most prominent and frequently occurring stressors (Kanner, Coyne, Schaefer, & Lazarus, 1981) that South African adolescents face. These include physical changes associated with puberty, self-image and identity development challenges, peer and family conflicts, academic and scholastic problems, school transitions, as well as initiating and maintaining romantic relationships (Bray, Gooskens, Kahn, Moses, & Seekings, 2010; Cortina et al., 2016; Fleetwood, 2012; Hendricks, Savahl, & Florence, 2015; Peltzer, 2010; Smith & Somhlaba, 2015; Theron & Theron, 2010; van Rooyen et al., 2014).

However, individuals of the same age differ in their behaviour and development and differences in these characteristics are related to changes in the individuals' environment and biological make-up. Furthermore, the turmoil experienced during adolescence is often exaggerated and most adolescents do manage to adapt well (Louw & Louw, 2010; Steinberg, 2011). It is noteworthy that the many adolescents do

not experience any significant maladjustment and experience 'normal' development (Louw & Louw, 2010). Although the situation facing South African adolescents is still significantly fraught with risk, there is nevertheless reason to be optimistic. Accordingly, positive psychology, which focuses on the positive aspects present in an individual's life rather than on the deficits, is thus relevant here. Thus, the strengths of an individual are highlighted in the study and research of positive psychology (Seligman & Csikszentmihalyi, 2000; Seligman, Steen, Park, & Peterson, 2005). In terms of a positive psychology framework, it is vital that individuals rely on their psychological strengths when faced with difficulties in order to successfully overcome challenges. Past research indicates that most adolescents do have the internal resources needed to face daily challenges, without experiencing serious psychological problems (Forbes & Dahl, 2010; Hollenstein & Loughheed, 2013; Smith & Somhlaba, 2015).

The ability to cope with life's difficulties is an example of one such resource. Within the field of psychology, coping is a prominent area of research. Coping is defined as the process of managing taxing circumstances, expending effort to deal with personal and interpersonal problems, and seeking to master, minimise, reduce or tolerate stress or conflict (Carver, 1997; Carver, Scheier, & Weintraub, 1989; Lazarus & Folkman, 1984). The process of coping, as well as the type of coping mechanisms employed is thus particularly important in predicting how individuals handle their problems and deal with stress (Meier, Kohlmann, Eschenbeck, & Gross, 2010; Wang & Gan, 2011).

With adolescents, coping is particularly important since it has implications for psychological well-being (Frydenberg & Lewis, 2009; Moodley, Esterhuyse, & Beukes, 2012; Smith & Somhlaba, 2015). Coping with stress in daily life is vital during adolescence as most adolescents need to cope with minor and moderately stressful events every day (Rodríguez-Naranjo & Caño, 2016). Although adolescent stress and coping has received increasing attention in the international literature over the past couple of decades (Al-Bahrani, Aldhafri, Alkharusi, Kazen, & Alzubiadi, 2013; Calvete, Camara, Estevez, & Villardón, 2011; Gibbons, 2010; Hollenstein & Loughheed, 2013; Persike & Seiffge-Krenke, 2016; Riley, Kirsch, Shapiro, & Conley, 2016), knowledge

is lacking regarding the coping strategies and styles most frequently employed by South African adolescents (Ebscohost search, 12 November 2016).

Typically, coping strategies can be classified as adaptive or maladaptive. In addition, two widely used conceptual frameworks of coping strategies include problem-focused versus emotion-focused coping, and approach versus avoidance coping (Lazarus & Folkman, 1984; Folkman, Lazarus, Dunkel-Schetter, DeLongis, & Gruen, 1986; Zeidner & Saklofske, 1996). These frameworks constitute an array of specific coping strategies that are used individually, collectively, by different individuals, and at different stages of their lives. Previous research has frequently debated the effectiveness of different coping strategies within various samples (Ebscohost search, 12 November 2016). The effectiveness of a particular coping strategy thus depends on the individual and on the specific stressful context. Therefore, it is important to investigate the repertoire of coping strategies available to adolescents, since there is a dearth in research exploring the specific coping strategies that are effective amongst a sample of South African adolescents.

Furthermore, male and female adolescents are susceptible to different stressors and do not experience stress in the same manner. It is therefore plausible that they may also rely on different coping strategies to deal with their diverse challenges. Investigations into possible gender differences in coping behaviour have been carried out in many national and international studies (Ebscohost search, 12 November 2016). Likewise, research on adolescent coping behaviour has focused on gender differences and ultimately, gender has consistently been found to be one of the most prominent moderators of coping (Calvete et al., 2011; Huan, Yeo, Ang, & Chong, 2012; Perry & Pauletti, 2011; Persike & Seiffge-Krenke, 2016; Rodríguez-Naranjo & Caño; 2016). However, research concerning gender differences that may influence adolescent coping has revealed mixed results (Ebscohost search, 12 November 2016).

In addition, while a significant proportion of one's life is spent engaged in leisure time and various leisure pursuits, leisure engagement as a promotor of health and well-

being has been frequently overlooked in past research (Hood & Carruthers, 2016; Iwasaki, 2006; McClelland & Giles, 2016; Sharp, Tucker, Baril, Van Gundy, & Rebellon, 2015). Leisure refers to an individual's purposeful and intentional use of free time engaging in self-selected activities that are meaningful and intrinsically motivating (Iwasaki, 2006; Iwasaki & Mannell, 2000).

In general, adolescents engage in various forms of sporting, cultural, recreational, relaxation, and outdoor activities during their leisure time. Participation in these kinds of leisure activities account for approximately 25% to 50% of adolescents' total spare time and thus represents a large proportion of the total activities they engage in (Sharp et al., 2015; Shikako-Thomas, Kolehmainen, Ketelaar, Bult, & Law, 2014). Research has found that participation in any of the various types of leisure activities is positively associated with experiences of flow and well-being (Kleiber, Larson, & Csikszentmihalyi, 2014). The benefits of engaging in positive leisure pursuits include the development of self-esteem, confidence, intrinsic motivation, positive relationships, as well as anger and anxiety management (McClelland & Giles, 2016; Weybright, Caldwell, Ram, Smith, & Jacobs, 2014). Leisure activities also provide important contexts for adolescents to develop personal qualities such as self-worth, self-control, and social connectedness (Bradley & Inglis, 2012; Goltz & Brown, 2014; McClelland & Giles, 2016).

More specifically, leisure coping represents a humanistic and strengths-oriented approach to dealing with challenges in life via leisure pursuits that may help individuals gain a sense of meaning in life, and make their lives enjoyable (Iwasaki et al., 2014). Leisure participation has been hypothesised to serve as a coping strategy by buffering the impact of negative life events through distraction, generating optimism, and enabling individuals to preserve a sense of self (Denovan & Macaskill, 2016; Hutchinson, Loy, Kleiber, & Dattilo, 2003; Tsaur & Tang, 2012; Zawadzki, Smyth, & Costigan, 2015). The current study focuses on leisure coping strategies, which, according to Iwasaki (2006), refers to actual situation-grounded coping behaviours and cognitions available through leisure. Using their conceptualisation, Iwasaki (2001, 2003) and Iwasaki and Mannell (2000) found that leisure coping significantly predicts

positive adaptive outcomes in samples of Canadian university students as well as police and emergency service workers. These positive adaptive outcomes include coping effectiveness, stress reduction, health, and psychological well-being.

Accordingly, a fundamental assumption informing the current study is that leisure engagement could be beneficial in the successful adoption of various coping strategies as well as the acquisition of higher levels of psychological well-being. Positive psychology highlights the study of leisure and active living as positive contributors toward the overall flow and well-being of individuals (Kleiber et al., 2014; Seligman & Csikszentmihalyi, 2000; Seligman et al., 2005). Therefore, as informed by the constructs and principles of positive psychology, this study aims to further investigate whether or not leisure engagement, as assessed by the use of leisure as a coping strategy, moderates the relationship between coping and adolescent psychological well-being.

Furthermore, there has been a growing interest in the study of psychological well-being amongst adolescents. This increased attention follows from the acknowledgement that the field of psychology has given much more consideration to human unhappiness and suffering than to the origins and significances of positive functioning (Almquist, Östberg, Rostila, Edling, & Rydgren, 2014; Bach & Guse, 2015; Cicognani, 2011; Khumalo, Temane, & Wissing, 2012). Thus, psychological well-being refers to the ability to function optimally (at a high level) during behavioural and emotional adjustment, and does not merely indicate an absence of illness. Individuals with higher levels of psychological well-being are viewed as more successful in meeting environmental stresses and pressures, while a lack of psychological well-being can mean an absence of success, and the existence of emotional problems (Ryff, 1989; Ryff & Singer, 2005, 2008). Similarly, adolescent psychological well-being is a state characterised by health, happiness and prosperity (Almquist et al., 2014; Bach & Guse, 2015; Daraei, 2013; Kumar, 2014; Trainor, Delfabbro, Anderson, & Winefield, 2010; Vogt Yuan, 2010).

Stress is highly prevalent in modern society and the use of coping strategies in response to stressors could positively impact psychological well-being. Thus, the ways in which adolescents cope with stress can have a significant effect on their current and future psychological well-being (Compas, Jaser, Dunn, & Rodriguez, 2012). Past research has focused on the relationship between adolescents' use of coping strategies and psychological well-being. In addition, previous research has found that active coping strategies can be linked to positive adaptation and fewer depressive symptoms, whereas more maladaptive coping strategies, such as avoidance, have been linked to poorer adaptation, higher levels of depressive symptoms and psychological distress, and subsequently lower levels of psychological well-being (Ayres & Leaper, 2012; Cicognani, 2011; Gustems-Carnicer & Calderón, 2013; Mutumba et al., 2016; Pressman et al., 2009; Rodríguez-Naranjo & Caño, 2016; Smith & Somhlaba, 2015; Trainor et al., 2010; Vogt Yuan, 2010).

In addition, male and female adolescents make use of different coping strategies (Ebscohost search, 12 November 2016), and it therefore seems plausible that they would experience differences in psychological well-being too. Due to differences in gender roles and the socialisation of adolescent males and females, gender differences in levels of psychological well-being are presumed to occur, particularly in traditional African communities (Arndt & Naudé, 2016; Bray et al., 2010; Khumalo et al., 2012; van Rooyen et al., 2014). International literature highlights marked gender differences in psychological well-being with the norm being that adolescent males portray higher levels of psychological well-being as compared to their female counterparts (Almquist et al., 2014; Bradley & Inglis, 2012; Li, Kao, & Wu, 2015; Vogt Yuan, 2010). Research on gender differences in adolescent psychological well-being within the South African context is, however, inconclusive (Khumalo et al., 2012).

Given the inconsistent findings of previous research on gender differences in adolescent coping and psychological well-being, it is necessary to investigate this phenomenon within the current sample of South African adolescents. Further research is also needed in order to investigate which coping strategies South African adolescents most frequently use when dealing with daily stressors, and which could

possibly contribute towards higher levels of psychological well-being. Therefore, it is necessary to investigate if gender plays a moderating role in the relationship between coping and adolescent psychological well-being.

Considering that adolescents constitute a large proportion of the South African population (Statistics South Africa, 2015) and are a particularly vulnerable population group (World Health Organisation, 2014), the adolescent years may be seen as a critical period of analysis and intervention. Therefore, as motivated by the assumptions of the aforementioned theoretical background, the current study aims to investigate whether leisure engagement, as assessed by leisure coping strategies, moderates the relationship between coping and adolescent psychological well-being.

1.2. Rationale and Aim of the Study

Given the vast amounts of stressors that South African adolescents encounter daily, it is necessary to explore whether these adolescents might benefit from engaging in leisure activities that may aid in coping as well as psychological well-being. Current information regarding the levels and nature of psychological well-being in South African adolescents is sparse. Given the legacy of apartheid, which has been psychologically and sociologically devastating to this country and its population, it is crucial to enhance our understanding of, and contribute towards knowledge about, the present mental health state of this population group (Bach & Guse, 2015; Khumalo et al., 2012; Theron & Theron, 2010).

Furthermore, there is a paucity of research regarding the use of leisure as a coping strategy within the South African adolescent population. A particular gap in knowledge is found in the Northern Cape Province since South African research is mostly conducted in the larger centres. The Northern Cape Province has the smallest population size in South Africa, comprising of only 2.2% of the total population (Statistics South Africa, 2015). However, adolescents between the ages of 15 and 19 represent 10% of the total population in the Northern Cape Province (Statistics South Africa, 2015). Therefore, further research involving adolescents in the Northern Cape

Province is needed in order to add to the body of positive psychology literature regarding adolescents in South Africa.

This study thus aims to further our understanding of the role of leisure in coping and psychological well-being amongst school-going adolescents in the Northern Cape Province of South Africa. The focus will be on the contributions of leisure engagements, particularly leisure coping, towards adolescent development, coping with stress, and psychological well-being. In addition, this study aims to benefit South African adolescents by expanding the research base on the psychological well-being of this population group. The gap in knowledge will be addressed by paving the way for future research on leisure-based interventions, that would equip the South African adolescent population with coping strategies with a view to enhancing psychological well-being. As such, the need for further research that could add to the body of literature on adolescent psychological well-being within the South African context is of great importance. The current study therefore aims to determine if leisure engagement, particularly as a coping strategy, could moderate the relationship between coping and psychological well-being amongst adolescents in the Northern Cape Province, South Africa.

Flowing from the overall aim of the study, the specific research objectives of the current study include:

1. To determine if there is a significant relationship between coping strategies and psychological well-being amongst adolescents.
2. To determine if there is a significant relationship between leisure as a coping strategy and psychological well-being amongst adolescents.
3. To determine if gender is a moderator in the relationship between coping strategies and psychological well-being.
4. To determine if leisure engagement, as assessed by the *Leisure Coping Strategy Scale*, is a moderator in the relationship between coping strategies and psychological well-being.

1.3. Theoretical Framework: Ryff's Model of Psychological Well-Being

The psychological well-being model developed by Ryff in 1989 serves as the theoretical model for the current study. Ryff (1989) argued that well-being should be conceptualised from a eudaimonic viewpoint, which focuses on meaning and self-realisation and defines well-being in terms of the degree to which a person is fully functioning. She studied positive functioning from subfields of psychology such as psychosocial stages, basic life tendencies, personality changes, the concept of self-actualisation, and the depiction of the fully functioning person (Ryff, 1989). This resulted in the formulation of her well-known and widely used model of psychological well-being and the development of the *Psychological Well-Being Scales*.

According to Ryff's model, psychological well-being comprises of six well-being domains, namely personal growth; purpose in life; autonomy; self-acceptance; positive relationships with others; and environmental mastery. Together these components allow for the positive evaluations of oneself and one's past; a sense of ongoing growth and development; a belief that one has a purpose in life and that their life is meaningful; having quality relationships with other people; effectively being able to manage one's surroundings; and having a sense of self-determination and independence (Ryff & Keyes, 1995).

Ryff's (1989) model of psychological well-being was selected as the theoretical framework for the current study due to its thorough theoretical basis as well as empirical evidence supporting the practical operationalisation of the model (Ryff & Keyes, 1995). Another contributory factor is the model's implementation in many countries and across different cultures (Daraei, 2013; Kumar, 2014; Li et al., 2015; Lin, Chou, Wu, & Lin, 2014). The choice for this model was further substantiated by its established success within the South African context (Bach & Guse, 2015; van Schalkwyk & Wissing, 2010).

1.4. A Brief Research Design Overview

The current study was conducted following a quantitative, non-experimental, cross-sectional research design (Stangor, 2015). As previously mentioned, this research focused on adolescents (male and female, aged between 14 and 19 years) in the Northern Cape Province of South Africa. Participants were selected from three schools in the Northern Cape Province by means of non-probability, convenience sampling (Stangor, 2015) and consisted of 228 learners from Grades 10 to 12.

A self-report battery was used during data collection. A biographical questionnaire was administered to gather information regarding biographical variables of the learners such as age, gender, race, home language, and residential area. In addition, the biographical questionnaire also sought information regarding the types of leisure activities the participants engaged in, if any, as well as the frequency of participation. Thereafter, Carver's (1997) *Brief Coping Orientations to the Problem Experienced Questionnaire (Brief COPE)* comprising of 14 coping strategy subscales, was used to measure the specific coping strategies that the adolescent participants utilise. The *Leisure Coping Strategy Scale*, as developed and validated by Iwasaki and Mannell (2000), was also used to assess leisure engagement by focusing on the extent to which specific leisure pursuits help individuals cope with stress. Finally, *Ryff's Scale of Psychological Well-Being* (Ryff, 1989), comprising of 42 items relating to the six key dimensions of psychological well-being, was utilised with the aim of quantifying adolescent psychological well-being.

SPSS version 24 (IBM Corp, 2016) was used to conduct the statistical analyses for the current study. Descriptive statistics and internal consistency reliability coefficients were calculated for all the scales and their subscales respectively. In addition, a factor analysis, using principle components analysis, was conducted for the *Brief COPE Scale* (Carver, 1997) with the aim of grouping the 14 coping strategy subscales into a smaller set of coping strategy categories within the current sample of adolescents. In order to answer the four research questions, the Pearson product-moment correlation, hierarchical multiple regressions, as well as moderated multiple regressions were run and interpreted accordingly.

1.5. Clarification of Key Concepts

Although a variety of definitions can be posed for the following concepts, they are defined below in the ways in which they were primarily used, understood and conceptualised within this study.

1.5.1. Adolescence

Adolescence describes a developmental stage that marks the bridging period from childhood to adulthood (Craig & Dunn, 2013; Sigelman & Rider, 2010). The onset of adolescence is usually between the ages of 11 and 13 years and can last until the ages of 17 to 21 years (Crockett & Crouter, 2014; Louw & Louw, 2010). According to the World Health Organisation (2014), an adolescent is a person between the ages of 10 and 19 years. It is generally accepted that adolescence starts with puberty and ends with reaching socially acceptable norms of what is expected of an adult (Craig & Dunn, 2013; Crockett & Crouter, 2014; Louw & Louw, 2010). As previously mentioned, the age of the sample of adolescents who participated in the study, ranges from 14 to 19 years.

1.5.2. Coping

Coping is the process of attempting to manage the demands created by stressful events that are appraised as taxing or exceeding a person's resources (Lazarus & Folkman 1984). Carver and colleagues (1989) also describe coping as an attempt to deal with and manage negative experiences that occur in our lives.

1.5.3. Coping Strategies

Coping strategies refer to the specific efforts or mechanisms, both behavioural and psychological, that people use to deal with and manage stressful events (Folkman & Lazarus, 1988; Lazarus & Folkman, 1984).

1.5.4. Leisure

Leisure is a set of activities that people engage in during their free time that is not school- or work-related or that do not involve life maintenance tasks such as cleaning and sleeping (Iwasaki & Mannell, 2000). Leisure also refers to activities that are undertaken voluntarily (Byunggook, Heo, Chun, & Lee 2011; Trainor et al., 2010).

1.5.5. Leisure Engagement

Leisure engagement is a relatively broad and all-inclusive concept, including participation in leisure activities, the experience of leisure, the use of leisure for coping, and the associated benefits of involvement in various leisure pursuits (Blackshaw, 2013; Denovan & Macaskill, 2016; Elkington & Gammon, 2013; Freire, 2013; Hutchinson et al., 2003; Iwasaki & Mannell, 2000; Kleiber et al., 2014; Zawadzki et al., 2015).

1.5.6. Leisure Coping Strategies

Unique characteristics and requirements of stressful circumstances may influence individual reactions and the individual will either consciously or unconsciously use certain coping strategies in response to the specific circumstances. These are fundamentally known as their leisure coping strategies (Iwasaki & Mannell, 2000). Leisure coping strategies therefore refer to actual situation-grounded coping behaviours and cognitions available through participation in leisure activities (Iwasaki, 2006).

1.5.7. Psychological Well-Being

Psychological well-being refers to both a theory and measurement scales designed and advocated primarily by Carol Ryff (1989). Ryff conceptualised psychological well-being as “an issue of engagement in living” (p. 2). Her conceptualisation of psychological well-being is rooted within a eudaimonic approach of well-being and constitutes six core dimensions, namely self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth.

These six components offer a theoretical and operational definition of psychological well-being while specifying what it is that promotes emotional and physical health (Ryff & Singer, 1998).

1.6. Delineation of the Study

This thesis consists of seven chapters with this introductory chapter serving as the first chapter. Chapter 2 will provide an overview of adolescence as a developmental stage. Following this, chapter 3 will present a discussion of the literature on coping, coping strategies, leisure, leisure engagement, leisure as a coping strategy, psychological well-being, as well as the relationship between coping and adolescent psychological well-being. Furthermore, Ryff's (1989) model of psychological well-being will be used as the theoretical framework against which the results of the current study will be analysed. The research methodology is discussed in chapter 4, and chapter 5 includes the statistical analysis and results of the study. The obtained results is discussed in chapter 6 and this will be followed by the conclusions, limitations, and recommendations for future research in the final chapter.

Chapter 2

Adolescence

Adolescence is the developmental stage between childhood and adulthood. The word *adolescence* comes from the Latin word *adolescere*, which means *to grow into adulthood* (Craig & Dunn, 2013). The adolescent period has been referred to as youth, emerging adulthood, the second decade of life, as well as the teenage years. It is widely accepted that adolescence is a transitional period hallmarked by rapid physical development as well as dramatic cognitive, emotional and psychosocial changes (Berk & Meyers, 2015; Hall, 1904).

This developmental phase ordinarily starts around the age of 11 to 13 and ends between 17 to 21 years of age. Within the developmental psychology literature (Berk & Meyers, 2015; Craig & Dunn, 2013; Louw & Louw, 2010), adolescence is divided into three time frames, namely early adolescence (11-12 to 14 years old), mid-adolescence (14 to 16 years old) and late adolescence (16 to 19 years old). During these stages, individuals are confronted with a series of developmental hurdles and challenges which need to be faced in order to successfully progress to adulthood. On the path to successful adulthood, adolescents have to master certain developmental tasks, including the development of an own identity, accepting physical changes, developing socially responsible behaviour and the development of both cognitive skills and independence (Louw & Louw, 2010; Schwartz et al., 2013).

It is during this developmental stage that young people reach physical maturity through the experience of physical and hormonal changes associated with puberty and become capable of reproduction (Crockett & Crouter, 2014). They gain improvements in higher-order thinking abilities (Geldard, Geldard, & Foo, 2016) and mature cognitively (Crockett & Crouter, 2014). Adolescents develop a better understanding of social relationships and responsibilities when they enter new social institutions such as high school and start to assume new social roles (Crockett & Crouter, 2014). At the same time as experimenting with their new-found social roles, they begin to

develop a better sense of their true self (Geldard et al., 2016). During this transitional period, adolescents spend more time with peers (Hoff, Andersen, & Holstein 2010), and this coincides with heightened reward sensitivity, sensation-seeking, preferences for risky behaviour, a need to conform to peer group norms and a growing divergence of peer and family values (Pfeifer et al., 2011). Consequently, adolescents are more prone to behave impulsively, meaning that they act on behavioural impulses without planning or without considering the consequences (Harden & Tucker-Drob, 2011).

Adolescence as a developmental stage is often characterised as a challenging part of human development. It is, however, important to remember that individuals of the same age vary in their behaviour and development. Variations in these characteristics are related to differences in the individuals' environment and biological make-up. However, many adolescents do successfully overcome these challenges. Further research and intervention implementation is therefore of the utmost importance during this crucial developmental period.

2.1. Adolescent Development

Adolescence is a developmental phase characterised by dynamic changes (Sigelman & Rider, 2010). These are changes that occur universally and in every society at some point during an individual's developmental lifespan. In light of the developmental tasks that need to be achieved, adolescent development will be discussed with regards to the domains of physical, cognitive, emotional, and psychosocial development.

2.1.1. Physical Development

Physiological changes occurring during adolescence are brought on by hormones specific to males and females. Hormones such as oestrogen in females and testosterone in males promote physical changes in adolescents' bodies. Both sexes experience an increase in height and develop secondary sex characteristics (Blakemore, Burnett, & Dahl, 2010; Forbes & Dahl, 2010). These secondary sex characteristics include physical changes such as the enlargement of testes and the

penis, growth of facial hair and a deepened voice in males, and the growth of breasts and the onset of menstruation in females (Craig & Dunn, 2013; Forbes & Dahl, 2010). Physical changes primarily occur during early adolescence and are known as the pubescent period (Berk & Meyers, 2015; Craig & Dunn, 2013, Louw & Louw, 2010). Each adolescent goes through a variety of individual changes in the experience of puberty and not all adolescents reach developmental maturity at the same time (Berk & Meyers, 2015; Geldard et al., 2016; Louw & Louw, 2010). The impact of these physical changes on the psychological state of adolescents can be profound and individuals often struggle to master the developmental task of accepting these physical changes (Crockett & Crouter, 2014; Sigelman & Rider, 2010).

Another component of physical development during adolescence is neurological development. Extensive structural and functional brain development continues throughout adolescence (Crone & Dahl, 2012; Sigelman & Rider, 2010; Steinberg, 2011). Adolescence is a unique period of development where continued refinements in brain structure and function align with behavioural refinements in complex processing such as cognition and emotional regulation (Crone & Dahl, 2012; Simmonds, Hallquist, Asato, & Luna, 2015). Previous research on adolescent brain development found immaturity in the frontal cortical neural systems as the reason behind adolescents' high risk-taking, substance use and other dangerous behaviours (Crone & Dahl, 2012; Steinberg, 2011). In addition, the brain's white matter continues to mature through adolescence which is parallel with increases in cognitive ability (Simmonds et al., 2015).

For instance, a study conducted with 128 American individuals aimed to characterise the timing of white matter growth, and investigated how gender and behaviour are associated with different developmental trajectories (Simmonds et al., 2015). Results demonstrated that by late childhood, posterior cortical-subcortical connections were similar to those of adults. During adolescence, white matter microstructure reached adult levels, including frontocortical, frontosubcortical and cerebellar connections. Major corticolimbic association tracts and connections at terminal gray matter sites in cortical and basal ganglia regions mature later in adulthood. These patterns may

reflect adolescent maturation of frontal connectivity supporting cognitive abilities, particularly the protracted refinement of corticolimbic connectivity underlying cognition-emotion interactions (Simmonds et al., 2015). Gender and behaviour also play a large role in neurological advances. For instance, males showed continuous white matter growth from childhood through early adulthood, while females mainly showed growth during mid-adolescence. Furthermore, earlier white matter growth during adolescence was associated with faster and more efficient responding and better inhibitory control, while later growth in adulthood was associated with poorer performance, suggesting that the timing of white matter growth is important for cognitive development (Simmonds et al., 2015). Thus, understanding the timing of brain development and its relation to individual differences in biology and behaviour is critical for understanding the many neurological and psychiatric diseases that emerge throughout adolescence (Crone & Dahl, 2012; Sigelman & Rider, 2010; Simmonds et al., 2015; Steinberg, 2011).

2.1.2. Cognitive Development

Adolescence is a time of expanded thought. It is often considered to be a transitional period between the rapidly changing cognitive processes of childhood and the more mature cognitive processes of adulthood (Sigelman & Rider, 2010). Piaget's (1972) cognitive theory of adolescent development hypothesises that adolescents fall within the formal operational stage of cognitive development in which abstract reasoning and thinking become possible. The formal operational stage of cognitive development gradually occurs from age 11 or 12, during which adolescents begin to think abstractly, speculate on hypothetical situations and reason deductively about possibilities (Louw & Louw, 2010; Piaget 1972). Another cognitive change occurring during this life stage is adolescent egocentrism. This is a term used to describe the phenomenon of adolescents' inability to distinguish between their perception of what others think of them and what people actually think in reality (Craig & Dunn, 2013; Crockett & Crouter, 2014). It is believed that adolescent egocentrism is a temporary phenomenon and gradually diminishes as adolescents grow older (Crockett & Crouter, 2014). These are simply a few of the cognitive abilities that adolescents are required to master before further development can take place.

According to Sigelman and Rider (2010), cognitive development precedes moral development. Kohlberg's (1963) theory of moral reasoning found that, for most adolescents, conventional reasoning (stages three and four) becomes the dominant mode of thinking. Moral reasoning is the thought process involved when judging whether something is right or wrong (Craig & Dunn, 2013; Sigelman & Rider, 2010). Thus, moral reasoning is influenced by cognitive development as the adolescent gains perspective abilities (Sigelman & Rider, 2010). At this level of moral reasoning, adolescents internalise many moral values and strive to obey the rules set out by their parents and other authority figures. Most adolescents will adhere to these rules in order to gain the approval of others and to maintain social order (Kohlberg, 1963). Other adolescents, however, start to question their parents' authority due to their developing cognitive abilities such as critical thinking (Harden & Tucker-Drob, 2011).

2.1.3. Emotional Development

Adolescents face many emotional challenges and sometimes experience vast fluctuations in emotions (Berk & Meyers, 2015; Geldard et al., 2016; Harden & Tucker-Drob, 2011; Louw & Louw, 2010). The amount of mood swings and general moodiness taking place during adolescence might be due to the rise in hormonal levels, neurological changes, increasing pressure to conquer self-consciousness about their physical appearance, and confusion about their identities (Crone & Dahl, 2012; Harden & Tucker-Drob, 2011; Louw & Louw, 2010; Simmonds et al., 2015). The intensity and frequency of adolescent mood swings and emotional outbursts are often exaggerated. Emotional instability and impulsiveness during adolescence can be attributed to an imbalance in control systems and the processing of emotions in the brain (Steinberg, 2011). According to Romero, Master, Paunesku, Dweck, and Gross (2014), changing peer relationships and the biological changes of puberty, which powerfully alter emotional experiences, could be contributing factors towards fluctuating emotions. Steinberg (2011) also stated that these changing emotions have an impact on adolescent behaviour. In particular, they can prompt or prohibit actions depending on the emotion associated with the action.

2.1.4. Psychosocial Development

Erik Erikson (1956, 1963, 1982) developed a model referred to as his *psychosocial stages of development*. He identified eight life crises which emerge when an individual reaches certain age categories. According to Erikson's (1956) fifth stage of psychosocial development, the adolescent years encompasses a conflict between ego identity and ego diffusion. It is during these years that adolescents strive to achieve a sense of who they are as individuals and what their social roles are (Craig & Dunn, 2013).

During this developmental phase, Erikson (1956, 1963) hypothesised about the search for identity. He therefore characterised adolescence as the identity cohesion versus role confusion phase since adolescents struggle to find their place in society. Identity experimentation is often associated with increased risk-taking behaviour as youth struggle to adapt to changes in their personal and social worlds (Sigelman & Rider, 2010; Steinberg, 2010). Those adolescents who struggle with this concept may find themselves in what Erikson called a *moratorium*, where they withdraw from their social responsibilities (Louw & Louw, 2010).

The state of *moratorium* forms part of four identity statuses identified by Marcia (1966). Marcia (1966) elaborated on Erikson's views regarding identity and identified the four identity statuses of *identity diffusion*, *foreclosure*, *moratorium* and *identity achievement*. The first status refers to when an adolescent has not yet made a commitment to a developmental task or explored alternatives. The second status, namely *foreclosure*, indicates that an adolescent has made a decision about their identity without exploring alternatives. *Moratorium* is the status describing an adolescent who is actively exploring their identity, but has not yet committed to one. Lastly, *identity achievement* is described as the state when an adolescent has explored their identity actively and made a commitment to it (Marcia, 1966; Schwartz et al., 2013).

The identity crisis needs to be resolved in order to successfully complete the journey from adolescence to adulthood (Schwartz et al., 2013). This crisis can be overcome by adolescents developing a feeling of identity, which includes the ability to determine who they are, to which group they belong and what they want to achieve in life (Erikson, 1982). During this stage, adolescents are generally believed to be in conflict with their parents and other authority figures (Gagné & Melancon, 2013; Louw & Louw, 2010). These conflicts are normally indicative of their struggles with forming cohesive identities and social bonds.

Furthermore, transitions during adolescence are moulded by the social and cultural contexts in which they occur (Persike & Seiffge-Krenke, 2016). The relationships between an adolescent's family, peers and society undergo tremendous changes. In attempting to master a variety of social changes, adolescents begin to have less interaction with their parents and become more involved with peers (Persike & Seiffge-Krenke, 2016; Pfeifer et al., 2011; Thompson, Connelly, Thomas-Jones, & Eggert 2013). Having social relationships with peers is very important to adolescents as they strive to feel a sense of belonging (Louw & Louw, 2010). Other social stressors that may cause stress during adolescence include conflicting and changing relationships, social pressures to conform, differences in socio-economic status and feelings of social inadequacy (Persike & Seiffge-Krenke, 2016; Thompson et al., 2013).

2.2. Adolescent Storm and Stress

A popular conception of adolescence is it being a time of “storm and stress”, characterising adolescents as confrontational, moody, rebellious and prone to high risk behaviour. The term “storm and stress” was first used in 1904 by G. S. Hall, one of the earliest primary figures in adolescent studies. According to Hall, the decrease in self-control (*storm*) and the corresponding increase in sensitivity to arousing stimuli (*stress*), typically characterises adolescent behaviour. Youth are often considered as irritable, quick-tempered and as individuals who surrender easily to their anger and frustrations. Thus, adolescence is known as a time of heightened risk-taking and recklessness (Steinberg, 2010). Moreover, statistics by the World Health Organisation

(2014) highlighted the fact that increasingly more adolescents worldwide are not functioning optimally and are considered to be an 'at risk' population group.

Research shows that some adolescents still find themselves involved in risk taking and impulsive behaviour (Harden & Tucker-Drob, 2011; Steinberg, 2010). Steinberg (2010) conducted research on 935 American individuals between the ages of 10 and 30 from five data collection sites, namely, Denver, Irvine, Los Angeles, Philadelphia and Washington, D.C. It was found that heightened reward-seeking behaviour was most clear and consistent during mid-adolescence. In addition, the results of the research showed that those in late adolescence and early adulthood experience an increase in impulse control, indicating that risky and impulsive behaviour decreases with age (Steinberg, 2010). It was suggested that higher risk-taking behaviour during middle adolescence could be due to this age group experiencing an increase in reward-seeking desires and having lower impulse control (Steinberg, 2010). This could be ascribed to adolescents' developing brains not yet having mastered impulse control and moral reasoning (Kohlberg, 1963; Steinberg, 2010).

Adding to adolescents' vulnerability towards risky and deviant behaviour, involvement with the wrong peer group places additional pressure on adolescents to succumb to peer pressure. This generally involves a subjective experience of feeling pressured, urged or dared by others to engage in risky behaviours (Hendricks et al., 2015). Since adolescents spend a considerable amount of time at school, it is here where they form close peer bonds, spend many hours with their peers and strive to belong (Hoff et al., 2010). Friends have a greater influence in their lives and they start taking preference over parents and other family members (Hendricks et al., 2015; Hoff et al., 2010; Pfeifer, et al., 2011). It is also during this time, and sometimes as a result of peer pressure, that adolescents may become involved in dangerous substance use.

In a cross-sectional study of 1317 Danish adolescents, Hoff and colleagues (2010) found that adolescents were more likely to engage in cannabis use during school time when there were more than two of their classmates who were cannabis users as well.

Consequently, they found this phenomenon to be associated with higher individual cannabis use outside of school as well (Hoff et al., 2010). These results were congruent with a more recent South African study, conducted with 291 adolescents (Hendricks et al., 2015). Here, the researchers found that peer pressure was a strong predictor of substance use amongst adolescents in low-income communities in Cape Town, South Africa (Hendricks et al., 2015). According to international and national trends, substance use is a major social problem among adolescents (Hendricks et al., 2015; Hoff et al., 2010; Peltzer, 2010; Pfeifer, et al., 2011; Thompson et al., 2013; Wegner, 2011; Weybright et al., 2014).

Another major concern during the adolescent developmental period, is depression and suicidal behaviour. Both local and international research has shown that the challenges adolescents face are associated with increased psychological problems such as depression and anxiety, as well as poorer behavioural outcomes (Gagné & Melancon, 2013; Pfeifer et al., 2011; Smith & Somhlaba, 2015; Thompon et al., 2013; Wegner, 2011). Thompson et al. (2013) reviewed the occurrences of depression, suicide attempts and suicide completions amongst adolescents in the United States of America. A link between substance use and subsequent mental health problems such as aggression, depression and suicidal behaviours was proposed (Thompson et al., 2013). Global rankings indicate suicide as the third highest cause of death during adolescence, and depression as the top cause of illness and disability (World Health Organisation, 2014). Furthermore, approximately half of all mental health disorders start by the age of 14, but most cases go unrecognised and untreated, with serious consequences for psychological well-being throughout life (World Health Organisation, 2014).

However, the turmoil experienced during adolescence is often exaggerated and most adolescents do manage to adapt well (Louw & Louw, 2010; Steinberg, 2011). Some adolescents are better informed and more idealistic, honest and tolerant towards others. The majority of adolescents do not experience any significant maladjustment (Louw & Louw, 2010). Moreover, adolescence is a stage where young people have sufficient physical and cognitive maturity to be receptive to positive growth. There is

a growing interest in the positive facets of adolescent functioning, and several recent studies (Almquist et al., 2014; Bach & Guse, 2015; Cicognani, 2011; Geldard et al., 2016; Gustems-Carnicer & Calderón, 2013; Hood & Carruthers, 2016; Shikako-Thomas et al., 2014; Wegner, Caldwell, & Smith, 2014) have focused on investigating ways to improve adolescent well-being. However, adolescence is not only marked by challenges and difficulties, but it is a time in their lives when they are generally healthier than any other developmental age group (Forbes & Dahl, 2010). The general consensus is thus that, although adolescence is often seen as a time of “storm and stress”, not all adolescents will be challenged by this life stage, nor are the struggles inevitable (Hollenstein & Lougheed, 2013).

2.3. Adolescents in the South African Context

South Africa presents a unique context in which adolescents need to mature, since they are faced with both opportunities and obstacles as they navigate their way through the realities of an uncertain and diverse post-apartheid society. During the apartheid regime, the different racial groups were segregated, limiting the rights, resources and privileges of those disadvantaged by apartheid. With the advent of democracy in 1994, the new government inherited a country characterised by widespread poverty and severe economic, social and spatial inequalities, remnants of the apartheid era policies and laws sanctioning racial discrimination and segregation. Since then, significant progress has been made in the areas of law reform and service delivery pertaining to meeting the needs and protecting the rights of all citizens, including the youth (Christie, 2010; Smith & Somhlaba, 2015).

A large proportion of South African citizens are adolescents. With an estimated population of 54.96 million in 2015, adolescents between the ages of 15 and 19 represent 9.32% (estimate of 5.12 million adolescents between the ages of 15 and 19) of the total South African population (Statistics South Africa, 2015). The current group of South African adolescents were born after South Africa became a democracy in 1994. Research indicates that this group is too young to have been directly impacted by the inequalities of the apartheid era, although they are still affected by inherited negative consequences of apartheid (Fleetwood, 2012; Mattes, 2012). In addition, the

trajectory of development among adolescents from societies in transition and from emerging countries such as South Africa, is less well understood.

This lack of knowledge and understanding is evident in South Africa as some key challenges remain, despite the progress made. A large majority of South Africans are still confronted with unemployment, poverty, health issues, limited availability of basic resources, and high crime rates (Christie, 2010; Fleetwood, 2012; Mattes, 2012). The inequalities in access to resources, services and opportunities, which have been structurally entrenched in South African society over many decades, have proven difficult to reverse. Consequently, a clear gap has emerged between the anticipation of improved social conditions following apartheid and the grim reality facing many adolescents. Thus, South African youth are still faced with poverty, racism, HIV/AIDS, violence, crime, substance abuse, social inequality, poor education, and abuse and neglect, all of which pose serious threats to their health and development (Smith & Somhlaba, 2015).

An examination of some key indicators highlights the ongoing threats to South African adolescents' well-being. Surveys conducted in 2014 indicated that an estimate of two million young people aged between 19 and 24 years were neither employed nor enrolled at an educational institution (UNFPA South Africa, 2014). The World Health Organisation (2014) estimates also suggest that the number of HIV deaths are rising in the adolescent age group. This increase occurred predominantly in the African region, with approximately 6.19 million South African people living with HIV (Statistics South Africa, 2015). Of this total, 5.59 million are between the ages of 15 and 24 years (Statistics South Africa, 2015). Two-thirds of the global population of adolescents living with HIV reside in sub-Saharan Africa (Mutumba et al., 2016), indicating HIV as the second leading cause of death among adolescents in these regions (Mutumba et al., 2016; World Health Organisation, 2014).

2.3.1. Daily Hassles

Rather than focussing exclusively on these major life events and chronic stressors, some researchers find it worthwhile to also investigate the normative stressors that adolescents are confronted with (Brook et al., 2011; Calvete et al., 2011; Cicognani, 2011; Hollenstein & Loughheed, 2013; Iwasaki, 2001; Persike & Seiffge-Krenke, 2016; Smith & Somhlaba, 2015). These normative stressors are referred to as daily hassles which are the minor, yet potentially distressing, demands of everyday life (Kanner et al., 1981; Smith & Somhlaba, 2015). Daily hassles include the most prominent and frequently occurring stressors that South African adolescents face such as physical changes associated with puberty, self-image and identity development challenges, peer and family conflicts, academic and scholastic problems, school transitions, as well as initiating and maintaining romantic relationships (Bray et al., 2010; Cortina et al., 2016; Fleetwood, 2012; Hendricks et al., 2015; Peltzer, 2010; Smith & Somhlaba, 2015; Theron & Theron, 2010; van Rooyen et al., 2014). These common stressors are not unique to South African adolescents as they align with international trends and issues (Persike & Seiffge-Krenke, 2012; van Rooyen et al., 2014). However, South African adolescents might be more vulnerable to these stressors due to a combination of social risk factors unique to the South African context as mentioned above.

2.3.2. Contextual Stressors

South Africa is also a culturally diverse nation. However, westernisation, especially in urban areas of the country, is causing a major shift away from some of the more traditional aspects of African cultures towards more western practices (Arndt & Naudé, 2016; Bray et al., 2010). These cultural transitions can cause a lot of strain on individuals, especially adolescents, as they are already facing many challenges and changes that need to be overcome in order for them to negotiate adolescence with relative ease (Bray et al., 2010). Adolescents in South Africa are also exposed to numerous environmental stressors within their communities that further influence their developmental progress.

Environmental stressors include economic deprivation, poverty and community violence (Brook et al., 2011) as well as the HIV pandemic and other disease outbreaks, food shortages, the failing education system, and natural disasters (Theron & Theron, 2010). In addition, single-parent and child-headed homes, drug and alcohol abuse, and rising unemployment are challenges faced by all South Africans (Brook et al., 2011; Smith & Somhlaba, 2015; van Rooyen et al., 2014). Brook and colleagues (2011) conducted research on 2195 South African adolescents from three major South African cities, namely Durban, Cape Town and Johannesburg. They reported that adolescents who are exposed to stressful neighbourhoods are more likely to experience emotional, behavioural and physical problems. Evidence was also found that environmental stressors were linked to lower mental and physical well-being amongst this cohort of adolescents (Brook et al., 2011). Environmental stressors, thus, have detrimental effects on adolescents' health and psychological well-being. Stressors that are not dealt with and overcome properly, can result in higher levels of vulnerability.

2.3.3. Academic Stress

Although the "storm and stress" view of adolescence has been revised over the past few decades, adolescence is still widely regarded as one of the most challenging stages of life. These challenges become most evident during the transition to secondary school, which involves conquering both academic and emotional challenges (Romero et al., 2014). This is especially true for South African adolescents as most secondary school pupils are under pressure to perform well academically in order to ensure admission into tertiary education (Cortina et al., 2016; Hendricks et al., 2015; Peltzer, 2010; Wegner et al., 2014, van Rooyen et al., 2014). Globally, adolescents between the ages of 16 and 19 years normally report more achievement and school-related stressors (Crockett & Crouter, 2014; Romero et al., 2014). These academic-related stressors include higher teacher expectations, increasingly difficult work and greater pressure to perform well (Crockett & Crouter, 2014). Romero et al. (2014) asserted that consequently, this is also a time where many learners show a decline in their academic marks, a decrease in intrinsic motivation, as well as an increase in negative attitudes toward school. Furthermore, Hoff and colleagues (2010)

also found that learners who dislike school and experience poor satisfaction with school may show a tendency towards deviant behaviours.

2.4. Conclusion

Despite the situation faced by South African adolescents being significantly fraught with risk, there is nevertheless reason to be optimistic. Positive psychology essentially focuses on the positive aspects present in an individual's life rather than on the deficits. Thus, the strengths of an individual are highlighted in the study and research of positive psychology (Seligman & Csikszentmihalyi, 2000; Seligman et al., 2005). Loving and supportive parents, positive role models, support from the community, a secure and stable school environment, and religious and cultural values have all been found to assist in ameliorating the impact of stress on South African adolescents' adjustment. This is in addition to personal attributes such as assertiveness, problem-solving abilities, positive cognitive appraisal of events, and an ability to learn from experience (Cortina et al., 2016; Mutumba et al., 2016; Theron & Theron 2010; van Rooyen et al., 2014).

Hence, it is vital that individuals rely on their psychological strengths when faced with difficulties in order to successfully overcome challenges. Most adolescents do have the internal resources needed to face daily challenges, without experiencing serious psychological problems (Forbes & Dahl, 2010; Hollenstein & Loughheed, 2013; Louw & Louw, 2010; Smith & Somhlaba, 2015). Therefore, this study aims to further our understanding of the role that leisure engagement, with specific reference to leisure coping strategies, plays in the relationship between coping and psychological well-being amongst school-going adolescents in the Northern Cape Province of South Africa.

2.5. Chapter Summary

Various views and theories regarding adolescence and adolescent development were discussed in this chapter. The aim was to provide an integrated view of the mentioned

cohort. Although the majority of theories are based on international literature, some important information regarding South Africa and the changes experienced in the country's recent history were included in this chapter. The next chapter will review the literature on coping, leisure, and psychological well-being. Specific reference will be made to these constructs within the adolescent years, and also within the South African context.

Chapter 3

Coping, Leisure, and Psychological Well-Being in the Adolescent Years

3.1. Coping

Coping is a prominent area of research within the field of psychology. Folkman and colleagues (1986) define coping as “the person’s constantly changing cognitive and behavioural efforts to manage specific external and/ or internal demands that are appraised as taxing or exceeding the person’s resources” (p. 993). Carver et al. (1989) support this definition by describing coping as an attempt to deal with and manage negative experiences that occur in our lives. Coping is thus defined as the process of managing taxing circumstances, expending effort to deal with personal and interpersonal problems, and seeking to master, minimise, reduce or tolerate stress or conflict (Carver, 1997; Carver et al., 1989; Folkman et al., 1986).

Stress can result when people have difficulty coping and experience a lack of resources (Riley et al., 2016; van Rooyen et al., 2014). Lazarus and Folkman (1984) proposed that stress consists of three processes. Firstly, primary appraisal is the process of perceiving a threat to oneself, while secondary appraisal refers to bringing to mind a potential response to the threat. Lastly, coping is the process of executing that response (Lazarus & Folkman, 1984). Therefore, stress is viewed as a cognitive-affective interpretation or appraisal of a threatening situation, while coping refers to individuals’ efforts to manage these situations that are perceived to be stressful (Lazarus & Folkman, 1984; van Rooyen et al., 2014).

Positive psychology represents a shift in the focus of psychology from negative elements of human functioning (e.g. mental disorders, incapacity and prejudice) toward health and well-being by promoting positive emotions, character traits and conditions that foster achievement strivings (Seligman et al., 2005). Coping research has moved toward positive psychology and thus the conceptualisation of coping has adapted to include self-regulated, future-oriented, and goal attainment strategies (Gable & Haidt, 2005; Seligman & Csikszentmihalyi, 2000). These strategies involve

an effort to cope with specific demands made on the individual that influences their adjustment and health (Cicognani, 2011; Smith & Somhlaba, 2015).

While it may be possible to reduce the severity of stress or the number of stressors affecting an individual, it is not always possible to completely remove either stressors or stress. Furthermore, individuals differ in personality and psychological functioning and this influences their appraisals of stress and coping (Smith & Somhlaba, 2015). Inevitably, individuals will also differ in their experiences of, and responses to, stress. Therefore, the process of coping as well as the type of coping mechanism employed is particularly important in predicting how individuals handle their problems and deal with stress (Meier et al., 2010; Wang & Gan, 2011).

3.1.1. Psychological Resources versus Coping Strategies

Various coping resources or strategies can be used to handle stress and deal with problems (Meier et al., 2010). For the purpose of clarification, the two concepts are briefly described and differentiated.

3.1.1.1. Psychological Resources

Psychological resources refer to the internal and external assets, strengths and contexts upon which one can draw in times of need; usually to create a satisfying, enjoyable and productive life (Hood & Carruthers, 2016; Seligman et al., 2005). These include qualities, attributes or contexts with positive value, either in their own right or as a means to obtain other valued assets. However, assets, strengths and contexts are only viewed as resources when they are appraised by individuals as available for use in meeting life conditions and maximising well-being (Hood & Carruthers, 2016; Smith & Somhlaba, 2015).

3.1.1.2. Coping Strategies

Coping strategies refer to efforts used to alleviate stress by either focusing on solving the problem or regulating emotional responses brought on by the stressor (Folkman & Lazarus, 1988; Lazarus & Folkman, 1984). They are the specific efforts, both behavioural and psychological, that people employ to master, tolerate or minimise stressful events (Carver et al., 1989; Cicognani, 2011). Unlike psychological resources, coping strategies are the actual behavioural activities or cognitive efforts made by individuals in attempting to deal with stressful situations.

3.1.2. Types of Coping Strategies

Typically, coping strategies can be classified as adaptive or maladaptive. Adaptive coping strategies are regarded as a more productive and socially acceptable means of managing stress, whereas maladaptive coping strategies involve more dysfunctional types of activities and transgressions (Zeidner & Saklofske, 1996). The two most widely used conceptual frameworks of coping strategies include problem-focused versus emotion-focused coping and approach versus avoidance coping. These are discussed below.

Lazarus and Folkman (1984) identified two approaches for managing stressful situations, namely problem-focused coping and emotion-focused coping. Problem-focused coping involves the use of strategies to directly change or improve the stressful situation (Carver et al., 1989; Lazarus & Folkman, 1984). Lazarus and Folkman (1984) further defined problem-focused coping as a coping style in which the individual attempts to change the situation that is causing the stress through the use of realistic strategies which can alter the situation that is causing stress. Problem-focused coping includes strategies such as active coping, planning, suppression of competing activities, restraint coping, and seeking instrumental social support (Carver et al., 1989; Compas et al., 2012; Gagné & Melancon, 2013; Valiente, Eisenberg, Fabes, Spinrad, & Sulik, 2015).

Alternatively, emotion-focused coping has been defined by Lazarus and Folkman (1984) as an individual's attempts to change negative emotions. It is aimed at normalising the emotional response to a stressor. The goal is to release the tension, forget the anxiety, eliminate the worry, or simply suppress the anger (Carver et al., 1989; Lazarus & Folkman, 1984). However, this type of coping is often viewed as ineffective as the individual focuses on the arousal caused by stress and not the actual problem. Consequently, this type of coping does not always provide long term solutions and may have negative side effects as it delays the person from dealing with the problem effectively (Gibbons, 2010; Folkman & Lazarus, 1988). Emotion-focused coping includes various coping strategies such as seeking emotional social support, positive reinterpretation, acceptance, denial, and turning to religion (Ayres & Leaper, 2012; Carver et al., 1989; Compas et al., 2012; Cicognani, 2011; Moodley et al., 2012; Mutumba et al., 2016).

When referring to the approach versus avoidance framework, approach coping generally includes strategies that require exerting effort to directly address the stressor. In contrast to approach coping, avoidant coping strategies entail efforts to minimise or deny threat or to distance oneself from the stressful situation (Blomgren, Svahn, Åström, & Rönnlund, 2016; Eschenbeck, Heim-Dreger, Tasdaban, Lohaus, & Kohlmann, 2012, Dhurup & Dubihlela, 2014; Rodríguez-Naranjo & Caño, 2016). Avoidance strategies typically include cognitive attempts to reduce the stressor and behavioural attempts to withdraw from or avoid the stressor, in order to relieve tensions through expressing emotions and seeking alternative sources of pleasure (Folkman & Lazarus, 1988; Moodley et al., 2012).

However, a substantial overlap between the two frameworks exists. Similar to problem-focused coping, approach coping also involves employing direct strategies to alter the stressful situation. Both approaches would include activities that involve more active problem-solving coping strategies. The same is seen in emotion-focused coping and avoidance coping, as both of these approaches include more indirect efforts to adjust to the stressor. For example, the latter strategies may both include disguising feelings or avoiding the stressor (Eschenbeck et al., 2012).

Researchers have noted that individuals use problem-focused coping when they feel as though they are capable of doing something about the situation, whilst emotion-focused coping dominates when individuals consider the stressor as something that is outside of their control and has to be endured (Blomgren et al., 2016; Carver et al., 1989; Riley et al., 2016; Compas et al., 2012; Seiffge-Krenke, Aunola, & Nurmi, 2009). In general, problem-focused strategies are often associated with a more positive outcome than emotion-focused strategies, although both styles could contribute to a positive outcome, depending on the stressor or problem that has to be coped with (Carver et al., 1989; Frydenberg & Lewis, 2009; Gagné & Melancon, 2013; Zeidner & Saklofske, 1996). Problem-focused strategies such as active problem solving, specifically, may be different to other coping strategies such as social support and physical recreation as it provides individuals with a greater sense of control. Moreover, active problem solving is proactive since it minimises the initial appraisal of stress whereas other coping strategies work to reduce the perceived stress once a stimulus has already been appraised (Frydenberg & Lewis, 2009; Gibbons, 2010; Lazarus & Folkman, 1984; van Rooyen et al., 2014).

Approach coping strategies have also been related to more positive psychological and behavioural adjustment, while avoidant coping strategies have been related to various maladaptive outcomes (Blomgren et al., 2016; Compas et al., 2012; Eschenbeck et al., 2012; Rodríguez-Naranjo & Caño, 2016). One such example was found in a Spanish study of 480 secondary school pupils which indicated that the avoidant coping style predicted hopelessness depression in the sample of adolescents (Rodríguez-Naranjo & Caño, 2016). Hopelessness depression is one of the subtypes of depression and includes hopelessness expectations and symptoms of depression (Abramson, Metalsky, & Alloy, 1989; Rodríguez-Naranjo & Caño, 2016).

Avoidance coping strategies are also closely related to other coping strategies identified by Carver and colleagues (1989), which are arguably less useful, namely maladaptive or dysfunctional coping strategies. These can include focussing on and venting of emotions, behavioural disengagement, and mental disengagement (Carver et al., 1989; Compas et al., 2012). Although deemed dysfunctional in nature, these

coping strategies can also be beneficial. For instance, in a sample of 187 South African adolescents, researchers found emotional discharge (venting of emotions) to be a safe way of expressing negative feelings in order to cope with stress (van Rooyen et al., 2014).

Avoidance as a coping strategy itself, also generally presumed to be a maladaptive coping strategy, was however found to be related to better adjustment (fewer depressive symptoms and higher social and adaptive functioning) amongst 86 learners from two schools in Cape Town, South Africa (Smith & Somhlaba, 2015). The researchers further concluded that this controversial finding could indicate that this coping mechanism may serve as a buffer against the common, normative stressors characteristic of daily life (Smith & Somhlaba, 2015). Similarly, in a cross-sectional survey of 206 South African student athletes, the avoidance coping style was used more frequently than approach coping strategies to manage stress (Dhurup & Dubihlela, 2014).

These various coping strategies are used individually, collectively, by different people, and at different stages of their lives. Some individuals will report certain strategies to be more effective than others, while others may find the same strategies to be less useful to them. The effectiveness of a particular coping strategy depends on the individual and the specific stressful context. Therefore, no coping strategy should consistently be preferred or persistently avoided. It is therefore necessary to explore which coping strategies are more frequently used by adolescents, specifically within the South African context. It is also beneficial to investigate and determine coping strategies that effectively assist South African adolescents in reducing and handling stress and daily hassles that are applicable within the South African context.

3.1.3. Adolescent Coping

With adolescents, coping is particularly important as it has implications for psychological well-being (Frydenberg & Lewis, 2009; Moodley et al., 2012; Smith & Somhlaba, 2015). Coping with stress in daily life is vital during adolescence as most

adolescents have to cope with minor and moderately stressful events every day (Rodríguez-Naranjo & Caño, 2016). These daily stressors include the normal developmental challenges encompassed by puberty (Blakemore et al., 2010; Crockett & Crouter, 2014), problems with friends and romantic partners as well as family conflicts (Hendricks et al., 2015; Persike & Seiffge-Krenke, 2016), and academic difficulties (Calvete et al., 2011; Dhurup & Dubihlela, 2014; Romero et al., 2014).

Apart from these more normative challenges, adolescents may also be facing a variety of stressors including those that are chronic (e.g. ongoing illness such as diabetes) or acute, such as major life events like a death in the family or divorce (Persike & Seiffge-Krenke, 2016). It is important to mention that chronic illnesses in childhood and adolescence are both causes of significant stress and are affected by stress in other life domains (Compas et al., 2012; Persike & Seiffge-Krenke, 2016). Interestingly, in a review of child and adolescent cancer patients, most young cancer patients rated daily role functioning as more stressful than the uncertainty of the disease itself (Compas et al., 2012). They report the impairment in daily roles (not being able to do the things they used to do) as particularly stressful (Compas et al., 2012). This indicates that daily stressors may require the mobilisation of greater efforts to cope than other sources of stress. Although stressful life events may provide positive consequences when leading to positive human functioning (Seligman et al., 2005), individuals who continue to struggle with managing daily hassles, role strains, chronic life problems, life transitions, and life crises can suffer from tremendous amounts of stress (Iwasaki & Mannell, 2000; Persike & Seiffge-Krenke, 2016).

Adolescents are confronted with a multifaceted array of challenges during this developmental period. Seiffge-Krenke and colleagues (2009) reported that 49-82% of everyday stressors named by adolescents, particularly pertain to the interpersonal domain and academic difficulties. In agreement with this statement, various other researchers also found that adolescents more frequently report relationship or school associated concerns and stressors to be dominant during this life phase. These stressors specifically refer to peer and family relationship problems, and academic

achievement (Al-Bahrani et al., 2013; Dhurup & Dubihlela, 2014; Frydenberg & Lewis, 2009; Hoff et al., 2010; Romero et al., 2014; Thompson et al., 2013).

For an adolescent to cope under difficult circumstances, coping skills are needed. The method of coping used by an adolescent depends on how he or she cognitively perceives the stressors (Persike & Seiffge-Krenke, 2012; van Rooyen et al., 2014). When adolescents have confidence in their ability to solve problems, they are more likely to view problems as challenges to be confronted, rather than as stressors to be avoided (Frydenberg & Lewis, 2009). International studies have shown that adolescents use problem-solving coping methods, seeking social support, avoiding stressful situations, and distracting themselves most frequently as a means of coping with everyday problems (Ayres & Leaper, 2012; Calvete et al., 2011; Cicognani, 2011; Gagné & Melancon, 2013; Meier et al., 2010; Mota & Matos, 2013; Persike & Seiffge-Krenke, 2016; Wang & Gan, 2011). However, they also seem to turn to non-productive or maladaptive coping strategies when their attempts at problem-solving coping are unsuccessful (Brook et al., 2011; Hoff et al., 2010; Frydenberg & Lewis, 2009; Thompson et al., 2013; Zeidner & Saklofske, 1996). In addition, those who employ more productive strategies also tend to use more non-productive strategies (Frydenberg & Lewis, 2009). It therefore remains imperative to teach the skills of effective problem-solving to adolescents in order for them to increase their use of productive, adaptive coping strategies (Frydenberg & Lewis, 2009).

Knowledge is, however, lacking regarding the coping strategies and styles that individuals in developing countries, such as South Africa, utilise. Although adolescent stress and coping has received increasing attention in the international literature over the past couple of decades (Al-Bahrani et al., 2013; Calvete et al., 2011; Gibbons, 2010; Hollenstein & Loughheed, 2013; Persike & Seiffge-Krenke, 2016; Riley et al., 2016), specific attention is needed on how adolescents, specifically South African adolescents, cope with more normative stressors such as the daily hassles and challenges that impact their everyday lives (Cicognani, 2011; Smith & Somhlaba, 2015).

3.1.4. Impact of Demographic Factors on Coping

Our understanding of adolescent stress and coping has been limited by a heavy reliance on middle-class European-American samples as found in most existing research (Eschenbeck et al., 2012; Iwasaki, 2006; Persike & Seiffge-Krenke, 2012; Riley et al., 2016; Rodríguez-Naranjo & Caño, 2016; Seiffge-Krenke et al., 2009; Wang & Gan, 2011). Adolescent coping styles and strategies are influenced by a number of sociodemographic factors such as culture and environment, age (experience), gender, intellect, family resources, and support from parents and other significant people (Frydenberg & Lewis, 2009; Moodley et al., 2012). As much as adolescents' perceived stress of typical daily hassles impacts their choice of coping strategy, demographic factors also have an impact on how adolescents cope with stress. For the purpose of this study, the factors of cultural differences, age, and gender will be discussed briefly. Knowledge of these factors in relation to stress and coping mechanisms could provide useful information on how and why some individuals adapt to stressful situations, while others find it difficult to do so.

3.1.4.1. Culture as a Factor in Adolescent Coping

Researchers tend to implicitly assume cross-cultural universality of coping behaviour without considering differences between cultures due to traditional customs, religious orientation, or type of educational, political, and economic systems (Al-Bahrani et al., 2013; Persike & Seiffge-Krenke, 2016). Even though many cultural similarities may exist across national boundaries, the specific features of each cultural context may determine what is perceived as stressful in one culture as compared to another. Owing to prevailing cultural values and scripts, adolescents in different regions of the world may exhibit different ways of coping with elevated stress levels (Persike & Seiffge-Krenke, 2012). Cultures offer different ways of helping individuals who encounter psychologically distressing challenges to cope with these issues (Al-Bahrani et al., 2013).

To demonstrate cultural differences in perceived stress and coping, a cross-sectional study was conducted to test the impact of region and gender on adolescents' stress

perceptions and coping styles (Persike & Seiffge-Krenke, 2012). The aim was to analyse how young people from three regions of the globe (Western, Southern and Eastern regions) cope with age-specific stressors during the adolescent period. A total sample of 10 941 adolescents from 20 countries completed questionnaires on stress and coping behaviours in four domains (school, parents, peers, and romantic relationships). Results revealed that levels of perceived stressfulness of issues in different domains were universally similar among adolescents from all three regions. Differences did however emerge with respect to coping style. In particular, coping styles characterised by negotiating, seeking support, and emotional outlet were used more often by adolescents from the Western region than those from the Eastern or Southern regions (Persike & Seiffge-Krenke, 2012). These results thus indicate that individuals from opposite sides of the world use different methods of coping and that this finding is attributable to cultural differences. As each cultural group is confronted with unique stressors, it is understandable that they also have unique ways of dealing with stress (Al-Bahrani et al., 2013).

Although cultural influences have become important considerations in adolescent research, the vast majority of studies on stress and coping have been conducted on white, middle-class adolescents in North America and Europe, as previously mentioned. This raises concern as previous research findings may not be applicable to individuals from more diverse backgrounds, such as South African adolescents. In South Africa, adolescents are faced with many unique stressors and challenges which place demands on their emotional and cognitive resources (Arndt & Naudé, 2016; Brook et al., 2011; Cortina et al., 2016; Mattes, 2012; Smith & Somhlaba, 2015; van Rooyen et al., 2014).

The most prominent and frequently occurring stressors South African adolescents face align with international trends. However, South African adolescents might be more vulnerable to these stressors due to a combination of psychosocial risk factors which are specific to the South African context (Brook et al., 2011; Dhurup & Dubihlela, 2014; Smith & Somhlaba, 2015; van Rooyen et al., 2014), as previously discussed in chapter 2 (section 2.3). Considering the unique stressors that South African adolescents face,

the urgent need for studies which focus on effective coping strategies within the South African context cannot be underestimated.

3.1.4.2. Age as a Factor in Adolescent Coping

Coping behaviour also changes throughout the course of life due to altered cognitive, social and behavioural abilities as well as a shift in the severity and importance of different stressors (Al-Bahrani et al., 2013; Cortina et al., 2016; Dhurup & Dubihlela, 2014; Frydenberg & Lewis, 2009). Furthermore, it has been shown that the total number of available coping strategies increases with age, thus indicating a more differentiated coping pattern in dealing with specific stressors (Frydenberg & Lewis, 2009). Age effect also reflects developmental changes in cognitive abilities to the use of more complex cognitive strategies in dealing with stress (Al-Bahrani et al., 2013; Cortina et al., 2016).

As children move towards adolescence, they develop the skills necessary for cognitive abstraction, complex problem solving and hypothetical thinking (Cortina et al., 2016; Piaget, 1972). This enables them to make better use of more cognitively based coping, which can include some types of distraction, avoidance, and active coping (Valiente et al., 2015). Wang and Gan (2011) stated that adolescents have not fully developed their cognitive and language skills, inhibiting them from engaging in the same coping strategies as adults. Furthermore, cognitive, affective and social developmental aspects, lack of experience, aspects of environment (for example, dependence on adults), and gender socialisation may contribute to differences in coping processes between adolescents as compared to adults (Eschenbeck et al., 2012).

In a South African study conducted by Moodley and colleagues (2012), the role of age (amongst other factors) was investigated in relation to different types of adolescent coping strategies. Participants consisted of 1283 adolescents drawn from 10 public secondary schools in Cape Town, South Africa. The researchers found that adolescents entering puberty and progressing through the life stage, develop a range

of coping behaviours that vary from adaptive to maladaptive. Furthermore, significant differences in relation to seven coping subscales (relaxing, seeking diversions, engaging in demanding activity, avoiding problems, ventilating feelings, developing self-reliance, and investing in close friends) were found between all three adolescent age groups (early adolescence, mid-adolescence and late adolescence). Of particular significance, results revealed that older adolescents made the most use of the 'avoiding problems' coping strategy as compared to the other two age groups (Moodley et al., 2012).

Similar results were found in a more recent international study where the researchers sought out to examine the adolescents' coping strategies, in relation to their gender and age (Al-Bahrani et al., 2013). With a sample of 1843 adolescents from the Sultanate of Oman, the researchers found that older adolescents use coping strategies such as problem solving, accepting responsibility, self-control, and social support in dealing with problems more frequently than younger adolescents. Also, older adolescents were more likely to try alternative strategies in their repertoire of coping skills when the initial coping strategy proved ineffective (Al-Bahrani et al., 2013).

3.1.4.3. Gender as a Factor in Adolescent Coping

Researchers have suggested that female and male adolescents experience different types of stressors and, therefore, have different levels of stress (Ayres & Leaper, 2012; Calvete et al., 2011; Cicognani, 2011; Eschenbeck et al., 2012; Perry & Pauletti, 2011; Riley et al., 2016; Rosenfield & Mouzon, 2013). Research on adolescent stress perception has also shown that females experience more stress than males, which is particularly evident regarding relationship stressors (Calvete et al., 2011; Rodríguez-Naranjo & Caño; 2016; Rosenfield & Mouzon, 2013). In a study conducted with 480 adolescents in Spain, statistical results revealed higher levels of daily stress in females than males at this developmental stage (Rodríguez-Naranjo & Caño; 2016). However, it has been argued that females do not quantitatively experience more stress than males, but experience the same stressors up to four times more stressful and challenging than males do (Seiffge-Krenke et al., 2009).

If male and female adolescents are susceptible to different stressors and do not experience stress in the same manner, it is therefore plausible that they may also rely on different coping strategies in order to deal with their diverse challenges. Investigations into possible gender differences in coping behaviour have been carried out in many international and national studies (Ebscohost search, 12 November 2016). Similarly, research on adolescent coping behaviour has also focused on gender differences and ultimately, gender has consistently been found to be one of the most prominent moderators of coping (Calvete et al., 2011; Huan et al., 2012; Perry & Pauletti, 2011; Persike & Seiffge-Krenke, 2016; Rodríguez-Naranjo & Caño; 2016). However, research regarding gender differences that may influence adolescent coping has revealed mixed results.

Gender affects how adolescents manage all of the unique challenges that they are faced with (Perry & Pauletti, 2011). Generally, when it comes to daily hassles, males tend to appraise them as challenges and call upon problem-focused strategies, whereas females have a tendency to view such situations as harmful or threatening and resort to emotion-focused coping (Frydenberg & Lewis, 2009; Rodríguez-Naranjo & Caño; 2016). When dealing with interpersonal or social stressors, it is assumed that females experience more relationship stress, especially with peers and romantic partners (Persike & Seiffge-Krenke, 2016). In addition, researchers found that females were more likely to use an active coping approach when dealing with normative stressors (Seiffge-Krenke et al., 2009). In contrast, male adolescents were more likely to use venting and avoidant coping strategies, especially with relationship stressors (Eschenbeck et al., 2012).

Research conducted to investigate the coping strategies of 757 children and adolescents in Germany showed that female adolescents use problem solving and seeking social support as coping strategies more frequently than adolescent males (Meier et al., 2010). Similar results were found with a Turkish sample of 473 children and adolescents during the development and validation of a Turkish adaptation of the *German Stress and Coping Questionnaire* (Eschenbeck et al., 2012). The researchers aimed to test whether the Turkish version would replicate prior findings of the

questionnaire with regards to coping strategies and gender differences. These results were comparable with 2007 and 2010 studies conducted by the same researchers. Subsequently, the findings indicated that female adolescents scored higher in seeking social support and problem solving, while male adolescents scored higher in avoidant coping (Eschenbeck et al., 2012). The researchers found these comparable results interesting as it indicated similarities with the original German version of the scale despite cultural variations.

A cross-cultural study conducted by Persike and Seiffge-Krenke (2012) indicated that female adolescents in three regions of the world (Western, Southern and Eastern regions) also had higher rates in the use of negotiating and seeking support than male adolescents did. A more recent study by Mota and Matos (2013), conducted with a sample of 109 adolescents in Portugal, revealed that female adolescents made more use of avoidance, distraction, and emotion regulation in addition to the above-mentioned strategies. This gender difference was consistent with a South African study in which female adolescents reported using the developing social support coping strategy more often than their male counterparts (Moodley et al., 2012).

Various international studies have also found that female adolescents were more likely to employ non-productive coping strategies when faced with challenges (Al-Bahrani et al., 2013; Calvete et al., 2011; Frydenberg & Lewis, 2009; Huan et al., 2012; Riley et al., 2016; Seiffge-Krenke et al., 2009). Female adolescents are thus more likely to use non-productive coping strategies such as worry, self-blame, tension reduction and wishful thinking. Alternatively, male adolescents tend to ignore problems and keep things to themselves (Frydenberg & Lewis, 2009). These types of strategies are seen as non-productive since it does not aid in positively resolving problems (Huan et al., 2012).

A discrepancy in the common trend found in research arose when Asian researchers investigated the role of gender in moderating the type of coping strategies employed by intellectually gifted adolescents in Singapore. From the initial findings (which

included a sample of 1791 adolescents), Huan and colleagues (2012) reported that male and female adolescents did not differ in their use of problem-solving coping strategies. The researchers reported that gifted adolescents tend to focus on dealing with their stressors and problems directly. Thus, they are more likely to work hard at solving their problems and achieving well at school, regardless of gender (Huan et al., 2012). The research findings also revealed that the sample of female adolescents were less likely to seek social support in coping with peer concerns as compared to their male counterparts (Huan et al., 2012). This finding is in sharp contradiction to other research which found that seeking social support was more often used by female adolescents (Eschenbeck et al., 2012; Mota & Matos, 2013; Moodley et al., 2012; Mutumba et al., 2016; Persike & Seiffge-Krenke, 2012). According to Huan and colleagues (2012), a possible explanation for this contradiction to previous research could be due to the fact that gifted female adolescents used coping strategies that reflected self-reliance and less investment in close friends. In addition, they reported that these female adolescents were more singularly focused on dealing with problems and did not participate much in relaxing diversionary activities, as they experience intense pressure to excel academically (Huan et al., 2012)

Furthermore, in a South African study conducted with 206 South African students, it was also found that even by analysing gender differences in relation to stress and coping mechanisms, no significant differences were revealed in the results (Dhurup & Dubihleba, 2014). Even though the responses on the various types of stressors and coping strategies varied in the sample, the results highlighted findings in contradiction to that of earlier research. While statistically significant differences with regards to perceived stress and gender were found, no statistically significant differences were found between coping strategies and gender (Dhurup & Dubihlela, 2014). According to the researchers, this could most probably be due to the use of different variables and the university's differing formal structure with regards to previous research which found significant results.

3.1.5. Conclusion

Coping is multifaceted and a significant body of research pertaining to this psychological construct exists. There are also various factors, such as culture, age and gender, which affect how individuals cope with stress and which coping strategies they choose to employ. Gender as a factor in coping, specifically, has received ample attention in research and has consistently been found to be one of the most prominent moderators of coping. Given the various stressors and challenges that adolescents face in their daily lives, the ability to successfully cope with these challenges is important for growth and overall psychological well-being. The repertoire of coping strategies that are available to adolescents is important to investigate as there is a dearth in research exploring the specific coping strategies that are effective amongst a South African sample of adolescents. This study therefore aims to further investigate how South African adolescents cope with daily hassles, including the relationship that exists between various coping strategies and the psychological well-being of adolescents. Leisure has been identified as one such strategy, since it buffers the effects of stress and therefore serves as a beneficial coping strategy. Positive associations between leisure and psychological well-being have also been previously reported and thus warrants further investigation, which will be discussed in the next section.

3.2. Leisure

Leisure participation, as a promotor of health and well-being, is often overlooked in research, yet a significant proportion of one's life is spent engaged in leisure time and various leisure pursuits (Hood & Carruthers, 2016; Iwasaki, 2006; McClelland & Giles, 2016; Sharp et al., 2015). Leisure refers to an individual's purposeful and intentional use of free time engaging in self-selected activities that are meaningful and intrinsically motivating (Hendricks et al., 2015; Iwasaki, 2006; Iwasaki & Mannell, 2000). These leisure engagements are not school- or work-related (Iwasaki & Mannell, 2000) and are undertaken voluntarily (Byungook et al., 2011; Newman, Tay, & Diener, 2014; Trainor et al., 2010). Activities such as sport, hobbies, socialising, and spending time in nature, are referred to as leisure activities (Pressman et al., 2009; Sharp et al., 2015; Shikako-Thomas et al., 2014).

Participation in leisure activities is often characterised by the experience of fun, enjoyment, and playfulness (Bantjes, Swartz, Conchar, & Derman, 2015; Barnett, 2011; Iwasaki et al., 2014; Pressman et al., 2009). Individuals also report feelings of suspension from reality, freedom to choose, a sense of control, and the right to be oneself and to express oneself during engagement in leisure activities (Iwasaki et al., 2014; Shikako-Thomas et al., 2014). Social interactions and inclusion, an experience of mastery, as well as a sense of challenge and achievement are additional reported benefits of engagement in leisure activities, which ultimately promote overall psychological health and well-being (Bantjes et al., 2015; Iwasaki et al., 2014; Newman et al., 2014; Shikako-Thomas et al., 2014).

In their seminal work with 178 American adults, Hutchinson and colleagues (2003), found that engagement in leisure activities provides opportunities for individuals to restore the disruption of their normal life patterns when they experience negative life events. In particular, positive psychology highlights the study of leisure and active living as positive contributors toward the overall flow and well-being of individuals (Kleiber et al., 2014; Newman et al., 2014; Seligman & Csikszentmihalyi, 2000; Seligman et al., 2005). Leisure engagement is thus a relatively broad and all-inclusive concept with various definitions across different academic disciplines. As highlighted above, leisure engagement involves participation in leisure activities, the experience of leisure, the use of leisure for coping, and the associated benefits of involvement in various leisure pursuits (Blackshaw, 2013; Denovan & Macaskill, 2016; Elkington & Gammon, 2013; Freire, 2013; Hutchinson et al., 2003; Iwasaki & Mannell, 2000; Kleiber et al., 2014; Zawadzki et al., 2015). Therefore, as informed by the constructs and principles of positive psychology, this study aims to further investigate whether or not leisure engagement, as assessed by the use of leisure as a coping mechanism specifically, contributes positively towards higher levels of adolescent psychological well-being.

3.2.1. Adolescent Leisure Engagement

A large proportion of a non-working adolescent's day is considered as spare time. This is the free time that they have after school and before going to bed at night;

alternatively known as leisure time. An adolescent's leisure time takes up approximately half of their waking hours (Caldwell & Witt, 2011). In general, adolescents engage in various forms of sporting, cultural, recreational, relaxation, and outdoor activities during this time. Participation in these kinds of leisure activities account for approximately 25% to 50% of adolescents' total spare time and thus is representative of a large proportion of their total engaged activities (Sharp et al., 2015; Shikako-Thomas et al., 2014).

Research indicates that leisure involvement is just as important for healthy development as education and nutrition (Hood & Carruthers, 2016; Iwasaki et al., 2014; Kleiber et al., 2014; Shikako-Thomas et al., 2014; Sharp et al., 2015; Trainor et al., 2010; Poulin, McGovern-Murphy, Chan, & Cauano, 2012). It is therefore imperative that adolescents be given the opportunity to engage in leisure activities. Leisure pursuits offer numerous opportunities for adolescents to experience performing an activity for internal rewards, as opposed to doing an activity out of external compulsion (Sharp et al., 2015). Intrinsically motivated participation in leisure activities has the potential to help adolescents reap important developmental and health benefits (Caldwell & Witt, 2011; Hendricks et al., 2015; Kleiber et al., 2014). However, it is not uncommon for many free-time activities that adolescents engage in to be due to some form of external compulsion. Peer pressure, parental demands and external rewards such as trophies are all motivating factors (Caldwell & Witt, 2011).

Alternatively, adolescents may also experience negative emotional experiences in their leisure engagement. They may encounter stress, embarrassment, boredom and loneliness during some of their leisure pursuits (Hendricks et al., 2015). Furthermore, adolescents can also feel pressure from their peers to engage in unconventional activities (Caldwell & Witt, 2011). In South Africa specifically, peer pressure susceptibility has been found to be related to youth problems such as substance use and alcohol consumption (Hendricks et al., 2015; Wegner, 2011). However, peers can also have a positive effect as adolescents are more inclined to participate in activities when they are able to do so with their friends. Therefore, peers may play an important role in encouraging fellow adolescents to engage in constructive leisure activities

(Bantjes et al., 2015).

An additional concern is that a lack of leisure activity involvement has been linked to increased levels of internalising and externalising behaviour, such as depression and conduct disorders, as well as lower levels of academic performance and skills, such as problem-solving (Palen et al., 2010). As adolescents become young adults, frequent engagement in leisure activities decreases. Thus, the adolescent years is seen as a critical period of intervention and analysis, since it is believed that adolescents who are frequently involved in leisure activities, particularly physical activities, are more likely to continue this habit into adulthood (Hood & Carruthers, 2016; Shikako-Thomas et al., 2014). Participation patterns may change with age and stage of development, but continuous participation throughout childhood and adolescence is important to ensure a healthy transition into adult life (Shikako-Thomas et al., 2014). Therefore, the importance of leisure engagement during and after adolescence needs to be emphasised.

3.2.2. Types of Leisure Activities

Adolescents participate in several different types of leisure activities. The most common, broadly classified, groups of leisure activities include physically active leisure, social leisure, relaxing leisure, outdoor recreation, cultural leisure, hobbies, and leisure travel (Hood & Carruthers, 2016; Iwasaki, 2002; Blackshaw, 2013; Taniguchi & Shupe, 2012; Trainor et al., 2010). The various types of activities that adolescents engage in specifically during their spare time may also include individual and team sports, arts, crafts and creative pursuits, intellectually oriented activities, shopping, socialising with friends and family members, and the use of social network sites (Bradley & Inglis, 2012; Kim, Heo, & Lee, 2016; Poulin et al., 2012; Sharp et al., 2015; Simcox, 2012; Trainor et al., 2010). Participation in these types of leisure activities gives individuals the opportunity to engage in meaningful activities, to interact with others in the community, and to develop new skills and interests (Hood & Carruthers, 2016).

Furthermore, leisure activities can be either active or passive. For example, participating in a sporting event would be viewed as active participation, while watching sports on television or listening to music would be considered passive participation (Hornick & Leitner, 2012; Blackshaw, 2013; Taniguchi & Shupe, 2012). Some critics (Bantjes et al., 2015; Nolan & Surujlal, 2011; Peltzer, 2010; Pressman et al., 2009; Taniguchi & Shupe, 2012) would argue that active participation in leisure activities has been replaced by passive participation. Despite a remarkable increase in participation in sporting leisure activities through the media (for example, passively watching sporting activities on television), active sporting participation has not lost any value (Elkington & Gammon, 2013; Hornick & Leitner, 2012; Taniguchi & Shupe, 2012). Sporting leisure activities comprise of a wide range of activities from cycling or hiking to golf or cricket. It includes a variety of land-based activities such as backpacking, horse-riding and rugby as well as water-based activities which may include water-skiing, swimming and rafting (Elkington & Gammon, 2013; Blackshaw, 2013; Taniguchi & Shupe, 2012).

Various social leisure activities occur amongst families within their homes, and this type of family leisure involvement is very important for adolescent development. Spending time with family is an important source of socialisation for adolescents (Elkington & Gammon, 2013). Interacting in family leisure time also promotes healthy relationships, allowing children and adolescents to experience trust and companionship amongst family members (Elkington & Gammon, 2013). Similarly, communal social leisure activities are important sources of social development and allow individuals to form bonds, friendships and networks with the people in their community (Kim et al., 2016). Engaging in social activities within one's community also provides and encourages cross-cultural interaction, thus allowing enhanced sensitivity and understanding of other cultures (Kim et al., 2016).

Outdoor leisure can include numerous activities, both physical and sedentary, such as hiking, horse riding, photography, camping, swimming, bird watching, golf, gardening, and skiing (Elkington & Gammon, 2013; Blackshaw, 2013; Simcox, 2012). Engagement in outdoor recreational leisure pursuits are important for personal

development and adolescent well-being (Elkington & Gammon, 2013). Participation in outdoor recreational activities is also often viewed as opportunities for psychological and spiritual renewal (Blackshaw, 2013).

Art and entertainment are some of the most popular forms of cultural leisure activities. Examples include expressive art, music, motion pictures, television and multimedia (Blackshaw, 2013). Cultural leisure can also include attending concerts, ballet and theatre, as well as visiting museums. These types of activities allow their participants to be in a ‘fantasy world’ where they can engage in exhilarating experiences which can be psychologically challenging and rewarding (Iwasaki, 2002). Engaging in any of these various types of leisure activities is positively associated with experiences of flow and well-being (Kleiber et al., 2014). Furthermore, the current study hypothesises that leisure engagement can be beneficial in the successful adoption of various coping strategies as well as the acquisition of higher levels of psychological well-being.

3.2.3. Structured versus Unstructured Leisure Engagement

Previous research conceptualises leisure activities into structured and unstructured categories (Bradley & Inglis, 2012; Poulin et al., 2012; Sharp et al., 2015). Structured leisure activities refer to those activities in which timing and duration of participation are prescribed, goals are set, a dress code is approved and adherence to rules is closely monitored by adults. In contrast, unstructured leisure activity participation is more spontaneous and not as closely monitored by adults (Bradley & Inglis, 2012; Poulin et al., 2012; Sharp et al., 2015).

3.2.3.1. Structured Leisure Engagement

Structured leisure activities can be defined as activities with a specific design, clear rules and goals, supervised by adults, with a regular schedule, and placing emphasis on skill-building (Badura, Geckova, Sigmundova, van Dijk, & Reijneveld, 2015). These activities are normally engaged in under adult supervision as they involve the guidance, leadership and feedback of a significant adult (Poulin et al., 2012). This

supervision, however, should not hinder adolescent growth and development. Caldwell and Witt (2011) stated that adolescent autonomy and mastery could be achieved when adults respect adolescents' capabilities and provide support for them to learn new skills and develop their competencies; alternatively known as scaffolding.

In a recent qualitative study, McClelland and Giles (2016) examined the social impact of Canadian street-involved youth's participation in a structured leisure programme for marginalised populations. They found that structured leisure activities helped the facilitation of social ties between the participants as well as between the participants and the programme volunteers (McClelland & Giles, 2016). Such findings indicate that the social impact of participation plays a crucial role in the development of adolescent well-being and that the scaffolding model is beneficial for the achievement of such outcomes (Caldwell & Witt, 2011; McClelland & Giles, 2016).

In addition, Badura and colleagues (2015) aimed to assess whether structured leisure participation is associated with both physical and mental health in adolescents, and whether this association differs by pattern of activity participation, age, and gender. Nationally cross-sectional data from 10 503 adolescents in the Czech Republic revealed that participation in structured leisure activities was associated with better self-rated health and higher levels of life satisfaction regardless of gender or age (Badura et al., 2015). Based on their above-mentioned statistically significant results, Badura and colleagues (2015) concluded that participation in structured leisure activities can be linked to healthy adolescent development.

South African researchers have further emphasised that adolescents who participate in structured leisure activities are less likely to engage in unconventional activities, are more likely to show higher academic achievements, and are also more likely to have positive psychological functioning (Caldwell & Witt, 2011). Similarly, in a more recent South African qualitative study, conducted with 17 participants, it was found that participation in school-based structured leisure is associated with high levels of school

adjustment and psychological well-being as well as low levels of internalising symptoms, externalising behaviours and health risk behaviours (Wegner et al., 2014).

3.2.3.2. Unstructured Leisure Engagement

Unstructured leisure activities can be defined as activities that are unsupervised or that do not focus on skill building (Caldwell & Witt, 2011; Weybright et al., 2014). With this type of conceptualisation, unstructured leisure activities are assumed to have negative outcomes. While, society favours structured leisure engagement, many adolescents have limited opportunities for involvement in positive, structured leisure activities (Sharp et al., 2015; Weybright et al., 2014). Accordingly, unstructured leisure activities provide them with the opportunity to engage in some form of leisure participation, which is regarded as better than nothing at all (Palen et al., 2010).

South Africa already has an increasing adolescent substance use problem, a lack of leisure opportunities and resources, as well as high adolescent discretionary time (Weybright et al., 2014). Adolescents growing up in impoverished communities in South Africa are frequently left without any access to structured leisure activities (Palen et al., 2010). Consequently, these adolescents spend more time with their peers, which often results in deviant or risky behaviour such as substance use (Hendricks et al., 2015; Müller, Eisner, & Ribeaud, 2013). Furthermore, in poorer communities, adolescents often have additional responsibilities, which may include taking care of younger siblings and/ or sick family members, doing domestic chores, and helping to maintain the family financially (Hendricks et al., 2015). If adolescents spend time attending to these responsibilities, they may not have time left to engage in healthy leisure activities, nor do they have role models to demonstrate healthy leisure lifestyles (Weybright et al., 2014).

However, adolescents in inadequately stimulated environments perceive free time as boring and are more likely to turn to unstructured leisure activities (Hendricks et al., 2015; Müller et al., 2013; Sharp et al., 2015). Leisure boredom, which occurs when individuals are bored in their free time, can encompass a state of relatively low arousal

and dissatisfaction (Hendricks et al., 2015; Wegner, 2011). Adolescents can then find themselves getting involved in unhealthy and unproductive activities such as vandalism and substance use (Caldwell & Witt, 2011; Hendricks et al., 2015). In addition, sedentary activities like watching television or playing video games are related to rising obesity and diminished physical activity amongst adolescents (Caldwell & Witt, 2011; Meier et al., 2010; Vogt Yuan, 2010). Not only does this type of leisure activity foster opportunities for delinquency, but may also weaken the bonds with parents, conventional institutions, and conventional goals in the long term (McClelland & Giles, 2016; Müller et al., 2013). This in turn may lead to substance use problems and high school dropouts, resulting in a negative impact on adolescent health and psychological well-being (Sharp et al., 2015; Wegner, 2011; Wegner et al., 2014).

However, not all unstructured leisure activities are necessarily detrimental to an adolescent's well-being and development. Unstructured activities, such as television-watching, provided few developmental benefits, whereas dedicated hobbies and unstructured sports afforded many positive initiative- and identity-building experiences (Müller et al., 2013; Sharp et al., 2015). Researchers (Bradley & Inglis, 2012; Caldwell & Witt, 2011; Müller et al., 2013; Sharp et al., 2015) have also argued that unstructured time is important for healthy development and self-expression. According to Caldwell and Witt (2011), unstructured leisure activities, particularly "hanging out with friends", are associated with negative outcomes, but can be important for healthy development when the activities are considered more broadly (for example, going for a hike with friends) or when these activities are viewed as self-managed or family-based activities.

3.2.4. Benefits of Leisure Engagement

Engagement in leisure has a wide range of beneficial health and well-being effects. The benefits of engaging in healthy or positive leisure pursuits for youth have been well documented in previous research (Ebscohost search, 12 November 2016). These benefits include the development of self-esteem, confidence, intrinsic motivation, positive relationships, as well as anger and anxiety management (McClelland & Giles, 2016; Wegner et al., 2014). Leisure activities have also been found to provide

important contexts for adolescents to develop personal qualities such as self-worth, self-control, and social connectedness (Bradley & Inglis, 2012; Goltz & Brown, 2014; McClelland & Giles, 2016). In broader terms, leisure can thus be an experience, activity, mechanism, or context that improves human strengths, individual and social resources and ultimately contributes to the well-being of individuals (Bradley & Inglis, 2012; Denovan & Macaskill, 2016; Freire, 2013; Newman et al., 2014; Tsaur & Tang, 2012; Wegner et al., 2014).

In addition, leisure participation has also been linked to a number of positive developmental experiences during adolescence, including opportunities for identity development, skill development, relationship building, movement toward independent adult status, and positive emotional experiences (McClelland & Giles, 2016; Palen et al., 2010). The various benefits of leisure engagement are widespread and some of these benefits will be outlined under the following headings; *Sense of Identity*, *Academic Performance*, *Coping with Stress*, and *Psychological Well-Being*. These specific aspects are highlighted as they are relevant to the understanding of adolescent development and the theoretical framework underpinning this study. Although the various benefits of leisure engagement are of value individually, it is important to point out that all of these positive outcomes as a whole ultimately contribute to the overall psychological well-being of adolescents as well.

3.2.4.1. *Sense of Identity*

A healthy and stable identity is important in recognising one's place in society. Erikson (1956, 1963) emphasised that the key developmental challenge during adolescence is identity experimentation and formation. Adolescents need to develop a sense of who they are and what their social roles are in order to find their place in society. This principle was demonstrated in a recent South African study in which the researchers aimed to gain an in-depth understanding of the lived identity of black African adolescents in a contemporary South African setting (Arndt & Naudé, 2016). The analysis of their focus group discussions and individual interviews suggested that black South African adolescents experience transitional identities characterised by contrasts and contradictions. They concluded that the interplay between African

rituals, Christian principles, Western values, and the globalisation of cultures provided fertile grounds for developing a nuanced and multi-dimensional identity as an adolescent living in contemporary South Africa (Arndt & Naudé, 2016).

Furthermore, several studies emphasise how engagement in leisure activities contributes specifically to identity formation (Bantjes et al., 2015; Caldwell & Witt, 2011; Hood & Carruthers, 2016; Hutchinson et al., 2003; Palen et al., 2010; Poulin et al., 2012; Wegner et al., 2014). One of the defining elements of leisure is that it is characterised by free choice and self-determination. Therefore, in leisure, adolescents make choices to engage in activities that they enjoy. The feeling of freedom and choice in leisure facilitates being open to and gaining developmental benefits such as identity formation (Bantjes et al., 2015; Caldwell & Witt, 2011).

Involvement in activities that are personally meaningful and a reflection of self has the potential to create a sense of personal congruence that, in turn, contributes to a sense of well-being (Hood & Carruthers, 2016). Since leisure includes both interpersonal and intergroup interactions, it also contributes to the definition of a social identity in adolescents (Hood & Carruthers, 2016; McClelland & Giles, 2016). Leisure pursuits are an important avenue for adolescent identity formation. Pursuits that are internally motivated, self-determined, personally meaningful and expressive, and offer a chance to build competencies can become a way for adolescents to understand who they are in relation to others and the world around them (Caldwell & Witt, 2011; Goltz & Brown, 2014). Thus, from a developmental perspective, there is value in positive leisure engagement if it contributes towards adolescent identity and autonomy development, as well as the development of competence and initiative (Bantjes et al., 2015; Freire, 2013; Poulin et al., 2012).

3.2.4.2. Academic Performance

Academic stress and pressure is prevalent during adolescence as school-going adolescents experience a considerable amount of strain to perform well academically (Crockett & Crouter, 2014; Romero et al., 2014). Previous research shows that

adolescents who participate in structured extracurricular activities are less likely to engage in risky behaviour and more likely to have a higher level of academic achievement and positive psychosocial functioning (Caldwell & Witt, 2011; Goltz & Brown, 2014; Poulin et al., 2012). Youth whose leisure activities are characterised by participation in more structured activities perform better academically, compared to those who participate in unstructured or passive leisure activities (Caldwell & Witt, 2011). These adolescents are thus more likely to have a higher level of academic achievement and are more likely to have positive psychosocial functioning (Caldwell & Witt, 2011; Goltz & Brown, 2014; Poulin et al., 2012).

3.2.4.3. Coping with Stress

Participation in leisure activities has been shown to bring about benefits such as buffering immediate stress or the impact of negative life events and sustaining coping efforts (Denovan & Macaskill, 2016; Hood & Carruthers, 2016; Iwasaki & Mannell, 2000). Leisure is an important mechanism for coping with stress, and thus can support the reduction of distress in daily life (Hood & Carruthers, 2016). The use of leisure for coping with stress has also significantly predicted lower psychiatric symptoms (Iwasaki et al., 2014). More specifically, cultural leisure appears to have positive consequences for adaptive outcomes such as coping effectiveness, stress reduction and mental health (Iwasaki, 2002; Iwasaki et al., 2014). Therefore, leisure could be used as a coping strategy to aid adolescents in handling stress and challenges, and thus *Leisure as a Coping Strategy* will be further discussed in this chapter (section 3.2.5). In addition, adolescents often report positive emotional experiences in leisure engagements, which can serve as a relief from the stress they feel in other areas of their lives and contribute to positive psychological adjustment and well-being (Caldwell & Witt, 2011).

3.2.4.4. Psychological Well-Being

The World Health Organisation (2014) insists that physical activity could improve health and prevent many of the diseases and conditions that are major causes of death and disability. Researchers agree with this statement as participation in exercise and

physical leisure activities have been found to play an important role in improving the quality of life and is also associated with numerous physical and mental health outcomes (Nolan & Surujlal, 2011; Surujlal, Van Zyl, & Nolan, 2013; Zawadzki et al., 2015). According to international studies conducted by Badia, Longo, Begoña Orgaz, and Gómez-Vela (2013), and Shikako-Thomas and colleagues (2014), there is a positive association between engagement in physical activities and both physical and psychosocial well-being. Badia and colleagues (2013) found that leisure participation amongst a sample of 206 Spanish children and adolescents with cerebral palsy explained the levels of quality of life, specifically in the domains of physical and psychological well-being. Similarly, the results by Shikako-Thomas et al. (2014) revealed that school-aged individuals with cerebral palsy who participate more actively in physical activities, subsequently feel better about their social life, school functioning, and their emotions. Thus, participation in regular physical activity can foster independence, coping abilities, competitiveness, and teamwork among children and adolescents with disabilities (Badia et al., 2013; Shikako-Thomas et al., 2014).

Recent research on adolescents with disabilities in South Africa has displayed congruent arguments. For instance, Bantjes and colleagues (2015) set out to understand what South African adolescents with disabilities perceived as important components of physical leisure activities in order to increase their participation in these activities. Interviews conducted with 15 South African adolescents with cerebral palsy revealed that leisure programmes should allow participants choice, provide physical challenges, and present opportunities to socialise and experience mastery (Bantjes et al., 2015). These types of experiences ultimately contribute positively towards higher levels of psychological well-being (Badia et al., 2013; Bantjes et al., 2015; Nolan & Surujlal, 2011; Ryff & Keyes, 1995; Shikako-Thomas et al., 2014; Tsaur & Tang, 2012; Zawadzki et al., 2015).

Although physical leisure activities are important, they are not the only form of leisure engagement that contributes towards higher levels of psychological well-being. Through engagement in any meaningful leisure activity, individuals' health and well-being are maintained and improved (Bradley & Inglis, 2012; Newman et al., 2014;

Nolan & Surujlal, 2011; Surujlal et al., 2013; Trainor et al., 2010; Wegner et al. 2014). Leisure choices and practices that are physically, socially, cognitively, or emotionally engaging can directly enhance psychological well-being (Hood & Carruthers, 2016; Hutchinson et al., 2003). In addition, participation in leisure activities affects self-perception, promotes emotional and social quality of life, and may contribute to happiness and enjoyment (Badia et al., 2013). Adolescents, specifically, describe participation in leisure activities as having fun, feeling successful, and enjoying social interactions with others (Badura et al., 2015; Barnett, 2011; Bradley & Inglis, 2012; Elkington & Gammon, 2013; Freire, 2013; McClelland & Giles, 2016). Previous research also indicates that participation in various leisure pursuits, such as informal leisure engagements, recreational activities, active physical activities, as well as social and skill-based activities, leads to life satisfaction as well as a sense of competence (Badia et al., 2013; McClelland & Giles, 2016). The acquisition of these psychological constructs is essential for psychological and emotional well-being and skill development (Badia et al., 2013; McClelland & Giles, 2016).

The literature on leisure research attributes the positive relationship between leisure and psychological well-being to several aspects. One such aspect is that leisure decreases the effects of negative events and aids higher levels of psychological well-being by acting as a protective factor by providing social support, feelings of competency, and relaxation (Iwasaki, 2002, 2006). This association was indicated in a study conducted by Trainor and colleagues (2010) with 947 learners from 19 schools in South Australia. Their findings showed that a small but significant association was found between Australian adolescents' participation in leisure activities and higher levels of psychological well-being (Trainor et al., 2010).

Another aspect regarding the positive relationship between leisure and psychological well-being is the contribution towards the resource of autonomy. When individuals engage in activities based on it being personally meaningful and valuable or due to the activity being interesting, enjoyable, or spontaneously satisfying, they are experiencing autonomous motivation; conversely, when individuals engage in activities due to externally or internally imposed pressure or coercion, they are

experiencing controlled motivation (Badia et al., 2013; Caldwell & Witt, 2011; Freire, 2013; Hutchinson et al., 2003; Palen et al., 2010; Wegner et al., 2014). Autonomous motivation is enhanced through activities and environments that promote personal competence, autonomy, and relatedness, all of which are associated with well-being. Indeed, previous research affirms that autonomous motivation is associated with psychological well-being, as well as physical health (Badia et al., 2013; Freire, 2013; Ryff, 1989; Ryff & Singer 1998).

3.2.5. Leisure as a Coping Strategy

The role of leisure in coping with stress represents a humanistic and strengths-oriented approach to dealing with challenges in life via leisure pursuits which may help people gain a sense of meaning in life, and make their lives enjoyable (Iwasaki et al., 2014). Among the various types of coping resources and strategies, leisure researchers have proposed that leisure can be an important means of helping individuals to cope with stress and maintain or improve their health (Denovan & Macaskill, 2016; Hutchinson et al., 2003; Iwasaki & Manell, 2000; Kleiber et al., 2014; Newman et al., 2014; Tsaur & Tang, 2012; Zawadzki et al., 2015). Leisure has been hypothesised to serve as a coping strategy by buffering the impact of negative life events through distraction, generating optimism, and enabling individuals to preserve a sense of self (Denovan & Macaskill, 2016; Hutchinson et al., 2003; Iwasaki et al., 2014). When children reach mid-adolescence, their coping skills may become more autonomous and focused on relaxing and recreational leisure engagements (Hutchinson et al., 2003; Iwasaki & Manell, 2000; Kleiber et al., 2014). Although researchers have begun to study the general coping strategies that adolescents use, only minimal research has focused on their use of leisure as a coping strategy.

In their seminal work in the field, Iwasaki and Mannell (2000) developed a hierarchical dimensions of leisure coping scheme to classify various underlying psychosocial functions and meanings associated with leisure that are assumed to facilitate coping with stress. One of their dimensions focuses on the use of leisure as a coping strategy. Definitively, leisure coping strategies refer to actual situation-grounded coping behaviours and cognitions available through leisure (Iwasaki, 2006; Iwasaki &

Mannell, 2000). Iwasaki and Mannell (2000) further explained that unique characteristics and requirements of stressful circumstances may influence individual reactions and the individual will either consciously or unconsciously use certain leisure coping strategies in response to the specific circumstances. In some cases, individuals may intentionally choose their leisure involvements to generate behaviours or cognitions that help them cope with stress. Alternatively, the components of a particular leisure activity may help individuals manage stress even though they chose to participate for other reasons, such as the enjoyment of an activity or for the purpose of physical exercise (Iwasaki & Mannell, 2000).

Using their conceptualisation, Iwasaki (2001, 2003) and Iwasaki and Mannell (2000) showed that leisure coping significantly predicts positive adaptive outcomes. These include coping effectiveness, stress reduction, health, and psychological well-being. As stress levels increase, leisure coping strategies appear to act as a buffer against the negative impact of stress, helping people maintain good physical health. Although leisure coping strategies may not have direct and positive effects on physical health, the use thereof seems beneficial to safeguard against or moderate the detrimental impact of stress on physical and mental health (Denovan & Macaskill, 2016; Iwasaki, 2003). In addition, Iwasaki (2006) concluded that stress-counteracting effects of leisure coping are evident regardless of an individual's gender or age. Findings from his year-long prospective survey of a representative sample (n=938) from an urban Canadian city, underscore the importance of paying greater attention to the role of leisure as a means of coping with stress (Iwasaki, 2006).

Despite the growth of leisure coping research, there are still limitations in the field of leisure studies, specifically in the social sciences (Badia et al., 2013; Bradley & Inglis, 2012; Hood & Carruthers, 2016; Iwasaki, 2003; Kim et al., 2016; Kleiber et al., 2014; Newman et al., 2014; Trainor et al., 2010). Iwasaki and colleagues (2014) previously highlighted our limited understanding of the ways in which leisure can contribute towards coping with stress, and maintaining health. Noteworthy, is the scarcity in the knowledge available on how leisure coping could contribute towards higher levels of adolescent psychological well-being (Pressman et al., 2009; Shikako-Thomas et al.,

2014; Trainor et al., 2010). Accordingly, there is a need to investigate this phenomenon further.

3.2.6. Domains of Leisure Coping Strategies

Leisure coping may be conceptualised in terms of three domains of leisure coping strategies, namely *leisure companionship*, *leisure palliative coping*, and *leisure mood enhancement*.

3.2.6.1. Leisure Companionship

Leisure experiences are often social in nature and create a shared experience that supports the development of friendships and social connections (Kim et al., 2016). Social activities are among the most commonly pursued forms of leisure among adolescents. They are also the most sought-after form of leisure as adolescents desire the feeling that they belong (Bantjes et al., 2015; Caldwell & Witt, 2011). The social context of leisure is important to adolescent development as it provides opportunities to learn empathy, loyalty, and intimacy in group activities, as well as to negotiate with peers, resolve conflict and work together for communal goals (Caldwell & Witt, 2011; Kim et al., 2016; McClelland & Giles, 2016).

Generally, leisure companionship refers to an individual's discretionary experiences as a form of social support (Iwasaki & Mannell, 2000; Iwasaki, 2002). Leisure companionship encompasses shared leisure activities primarily engaged in for the sake of enjoyment (Iwasaki, 2002). These types of leisure engagements are likely to provide support networks and resources which may be useful to manage stress effectively. Individuals may gain emotional support from these resources and the engagement in leisure may make them feel relaxed. Enjoyable experiences of relaxing leisure tend to enhance their moods, which may consequently have a positive impact on immediate adaptive outcomes, such as stress, and mental health (Iwasaki, 2002). When experiencing stress, people may actually seek out companionship through leisure in order to better deal with the stress (Iwasaki, 2003). This has been indicated in previous research as the impact of leisure involving social interaction has

been found to have positive effects on self-esteem, identity development, well-being, prosocial commitments, and life satisfaction (Bantjes et al., 2015; Bradley & Inglis, 2012; Kim et al., 2016; McClelland & Giles, 2016; Trainor et al., 2010).

3.2.6.2. Leisure Palliative Coping

Leisure provides an opportunity for people under stress to have a time-out and deflect stress-inducing thoughts and, consequently, to gain renewed energy and perspective (Iwasaki & Mannell, 2000; Iwasaki, 2006). Furthermore, Hutchinson et al. (2003) suggested that leisure provides opportunities for people to restore the disruption of their normal life patterns when they experience negative life events. Therefore, leisure time may be considered as an oasis to recharge individuals physically, psychologically and/ or emotionally, which could facilitate a sense of balance and renewal to cope with or counteract stress (Iwasaki, 2006).

Leisure palliative coping therefore refers to a break or time-out through leisure which allows people to feel refreshed and re-group to better handle stressors (Iwasaki, 2002; Tsaur & Tang, 2012). Examples include vacations or even brief moments of leisure such as regular exercise routines or casual conversations with friends during coffee breaks (Iwasaki, 2002; Newman et al., 2014; Tsaur & Tang, 2012). Ultimately, leisure palliative coping is an escape-oriented coping strategy. These types of leisure activities keep individuals' minds and bodies busy while temporarily escaping from stressful events through their leisure engagements (Iwasaki & Mannell, 2000; Newman et al., 2014; Tsaur & Tang, 2012).

3.2.6.3. Leisure Mood Enhancement

Leisure experiences are an important source of positive emotion. These positive emotions can be generated through meaningful engagements, the satisfactions arising from success in personally chosen pursuits and the excitement associated with taking chances, undertaking challenges or seeking novel experiences (Hood & Carruthers, 2016; Newman et al., 2014). Engaging in leisure activities could either

enhance positive emotions or reduce negative emotions when an individual is faced with stress (Iwasaki, 2002; Tsaur & Tang, 2012). Thus, leisure mood enhancement refers to the enhancement of positive mood or the reduction of negative mood through leisure in order to regulate the emotions or moods of individuals under stress (Iwasaki & Mannell, 2000).

3.2.7. Gender Differences in Leisure Engagement

Research indicates that males and females have substantially different experience of stressors. They differ in the kind of stressors that they are exposed to, the coping strategies which they use (Calvete et al., 2011), their social relationships as well as their personal resources and vulnerabilities (Rosenfield & Mouzon, 2013). For this reason, the current study also aims to investigate gender differences with regards to the relationship between coping strategies and adolescent psychological well-being. As the underlying assumption for this study is that leisure engagement, as assessed by leisure as a coping strategy, could play a role in the aforementioned relationship, gender differences in leisure engagement also need to be considered.

The gender stereotyping of activities, evident in many realms of leisure practice, has been shown to be associated with gendered opportunities, constraints, and patterns of time use. Males generally segment their time with a clear differentiation between work and non-work, and seem to have a greater availability for leisure activities and relaxation. Contrastingly, the more holistic nature of females' lives still reflect caregiving roles, family responsibilities, and the lack of access to leisure that is free of socially prescribed obligations (Barnett, 2011; Blackshaw, 2013; Taniguchi & Shupe, 2012).

When it comes to adolescent leisure engagements, research indicates that adolescent males spend more time alone playing video or computer games and participating in sporting and outdoor physical activities. In contrast, female adolescents are more devoted to spending time talking to friends, shopping, reading, and engaging in creative activities such as music, dance and art (Bradley & Inglis, 2012; Taniguchi &

Shupe, 2012; Trainor et al., 2010). A study conducted by Barnett (2011) highlighted observed gender differences which were consistent with those found in previous research. Data was gathered from 1021 undergraduate students from three large mid-western universities in the USA. The sample was fairly evenly split between male (47.8%) and female (52.2%) students and results showed that males have a stronger preference for sports while females showed a preference for social activities (Barnett, 2011). Similarly, in a recent study conducted in the Czech Republic, data from 10 503 adolescents demonstrated gender differences with regards to benefits associated with leisure engagement (Badura et al., 2015). Participation in team or individual sports was associated with better general health in adolescent males, while participation in art activities was associated with lower occurrences of health complaints in adolescent females (Badura et al., 2015). Recent research by Sharp and colleagues (2015), conducted with 276 American adolescents, highlighted another difference as female adolescents are usually more involved in numerous types of leisure activities whereas their male counterparts chose only one type of leisure category, most commonly, sporting activities.

There are, however, also similarities between males and females in terms of leisure pursuits during adolescence. Both male and female adolescents tend to spend much of their leisure time either in group activities or in sedentary engagements such as listening to music or browsing the internet (Bradley & Inglis, 2012). In addition, a study conducted with 38 adolescents from three state schools within Victoria, Australia, found no statistically significant associations between gender and leisure participation (Goltz & Brown, 2014). These contradictory findings support the need to investigate whether or not gender plays a moderating role in the relationship between coping strategies and psychological well-being in adolescents as well as the role that leisure engagement plays within this relationship.

3.2.8. Conclusion

South Africa already has an increasing adolescent substance use problem, a lack of leisure opportunities and resources, as well as high adolescent discretionary time. Adolescents growing up in impoverished communities in South Africa are frequently

left without any access to structured leisure activities. The findings in the literature, however, provide further evidence that positive leisure experiences and specific types of leisure activity not only help people cope with various stressors, but also facilitate psychological well-being. While previous research has been conducted on this topic, the conception of leisure as a coping strategy or resource has been given little attention in the social sciences in general, and psychology in particular. Limited information is available on how different leisure activities and leisure experiences influence adolescent coping and well-being. It has also been reported that our understanding of the ways in which leisure can contribute to coping with stress and maintaining health is very limited. Thus, the importance of leisure engagement during and after adolescence needs to be emphasised. This study therefore aims to further investigate whether or not leisure engagement, with specific focus on the use of leisure as a coping strategy, has a positive relationship with adolescent psychological well-being.

3.3. Psychological Well-Being

In general, well-being can be defined as optimal human functioning as it is operationalised within a holistic view of people. Psychological well-being developed from the eudaimonic view of well-being (Ryff, 1989, 2014; Ryff & Singer, 1998). Empirical research on well-being based on the eudaimonic approach of the good life argued that living well is not simply a matter of experiencing more pleasure than pain. Instead, it involves a striving for fulfilment and a realisation of one's true potential (Bach & Guse, 2015; Gable & Haidt, 2005; Ryff, 1989; Ryff & Singer, 1998; Seligman et al., 2005). Therefore, the eudaimonic approach to psychological well-being has become a thriving arena of scientific inquiry and clinical practice (Ryff, 2014).

The construct of psychological well-being is situated within the field of positive psychology. The goal of positive psychology is to study, identify, and amplify the strengths and capabilities that individuals, families, and society need to embrace in order to flourish (Seligman & Csikszentmihalyi, 2000). The qualities that individuals need in order to flourish and experience profound happiness, wisdom, psychological, physical, and social well-being, are the same assets that safeguard against stress and

physical and mental illness (Seligman & Csikszentmihalyi, 2000). Therefore, the need for a better understanding of what psychological well-being is, and the promotion of psychological well-being, increases.

Several definitions and models of psychological well-being exist due to it being a broad concept which ultimately refers to a satisfactory condition or existence characterised by health and happiness (Ryff, 1989). Furthermore, it refers to functioning at a high level of behavioural and emotional adjustment, and not merely an absence of illness. Individuals with higher levels of psychological well-being are viewed as more successful in meeting environmental stresses and pressures, while a lack of psychological well-being could indicate an absence of success, and the existence of emotional problems (Ryff, 1989; Ryff & Singer, 2005, 2008).

Psychological well-being is often investigated as an outcome or dependent variable in scientific studies, but occasionally it is studied as an antecedent or predictor variable. Increasingly, it is also considered as a moderating influence (protective factor). These diverse applications underscore the broad utility of psychological well-being as a construct in contemporary scientific research (Ryff, 2014). Increased attention to the study of psychological well-being follows from the acknowledgement that the field of psychology has given much more consideration to human unhappiness and suffering than to the origins and significances of positive functioning (Almquist et al., 2014; Bach & Guse, 2015; Cicognani, 2011; Khumalo et al., 2012). However, many people are not affected by any mental disorder, nor will they be clinically depressed or struggle with substance disorders during their lifetime. It also seems plausible that almost everyone would want to be happy and experience fulfilment, in other words, achieve positive psychological functioning (van Schalkwyk & Wissing, 2010). According to Ryff (1989), positive psychological functioning is associated with high levels of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. These dimensions of psychological well-being form part of the theoretical framework which this study subscribes to.

3.3.1. Ryff's Model of Psychological Well-Being

The psychological well-being model that was developed by Ryff in 1989 functions as the theoretical model for this study. The reasoning behind using this model was based on the model being rooted in theory and being well supported by empirical evidence (Ryff, 1989). Furthermore, Ryff's model of psychological well-being has been implemented in many countries and across different cultures (Daraei, 2013; Kumar, 2014; Li et al., 2015; Lin et al, 2014).

The need to develop an original well-being model arose when Ryff (1989) criticised previous approaches to measuring and defining well-being. Although considerable empirical research in the 1980s was concerned with well-being, such endeavours focused largely on reports of happiness, life satisfaction, and positive affect. Minimal attention was given to the deeper question of what constitutes essential features of well-being (Ryff, 2014). Ryff argued that these previous approaches lacked a theoretical basis and relied too heavily on individual definitions and evaluations of happiness. In order to address omissions in formulations of positive human functioning that prevailed in the 1980s, Ryff (1989) developed an alternative approach to well-being which she referred to as psychological well-being.

Ryff's multidimensional model does not connect psychological health with the mere absence of psychopathology, neither is it directly linked to happiness. This model was developed from the viewpoint of well-being being the "by-product of a life that is well-lived" (Ryff & Singer, 1998, p.5). Being aware of the various forms that well-being can take, Ryff revisited earlier theories which attempted to describe levels and domains of psychological well-being. An extensive literature review articulated the contours of optimal human functioning. In this regard, Maslow's concept of *self-actualisation*, Rogers' view of the *fully functioning person*, Bühler's *basic life tendencies*, Erikson's *psychosocial stages*, Jung's formulation of *individuation*, Allport's views of *maturity*, Jahoda's concept of *mental health*, and Neugarten's *processes of personality* were consulted (Ryff & Keyes, 1995; Ryff & Singer, 2008). Ryff also drew on her training as a life span developmental psychologist, allowing room for the developmental tasks

and challenges that confront individuals at different life stages within the conceptualisation of the well-being model (Ryff & Singer, 2008).

Ryff (1995) argued that all these perspectives hold similar and complementary criteria of positive psychological functioning. The challenge with the above-mentioned theories and perspectives was integrating them into a coherent unit, which was achieved through a progressive process that aimed at identifying recurrent themes. Drawing on points of convergence in these theoretical formulations, Ryff (1989) suggested an integrative multidimensional model of psychological well-being that condensed six psychological dimensions of challenged thriving. Each of the six components of psychological well-being therefore conveys different challenges encountered by individuals as they strive for positive functioning (Ryff, 1989).

The six dimensions of psychological well-being thus formed the basis of *Ryff's Scale of Psychological Well-Being*. Based on her original model, Ryff's psychological well-being scales have withstood extensive psychometric scrutiny (Ryff, 2014). Furthermore, researchers guarantee the usefulness of Ryff's model and scales of psychological well-being in various cultures and countries, and indicate that Ryff's psychological well-being scales have been translated and used in more than 30 different languages, with much success, other than English (Daraei, 2013; Kumar, 2014; Li et al., 2015; Lin et al., 2014). This highlights its growing presence in science and practice around the world (Ryff, 2014). Its broad application was merely one of the reasons Ryff's model was chosen for this study. Another reason included its established success within the South African context (Bach & Guse, 2015; van Schalkwyk & Wissing, 2010).

3.3.1.1. *The Six Dimensions of Psychological Well-Being*

The six dimensions of psychological well-being were operationalised by Ryff (1989, 1995, 2014) and are discussed below. Ultimately, the new measure probed the following dimensions: *self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth* (Ryff, 1989). These six

components offer a theoretical and operational definition of psychological well-being, while specifying what it is that promotes emotional and physical health (Ryff & Singer, 1998).

Firstly, *self-acceptance* is a kind of self-evaluation that is long-term, involving awareness and acceptance of both personal strengths and weaknesses (Ryff & Singer, 2008). Having high levels of self-acceptance implies a positive attitude towards the self and the ability to acknowledge and accept aspects of the self, including good and bad qualities. It further indicates satisfaction with past and present life (Ryff & Singer, 2008), which can thus be described as the positive evaluations of oneself and one's past life even while aware of one's own limitations (Ryff & Keyes, 1995).

The second dimension, *positive relations with others*, broadly refers to the possession of quality relations with others. Within psychology, efforts to delineate central features of psychological well-being repeatedly evoke the interpersonal realm. Ryff (1989) defined positive relations as warm, trusting relationships with others. This domain of well-being includes a general sense of the welfare of others and the ability for empathy, affection and intimacy. She further described the construct as the understanding of the give-and-take principle of human relationships. The interpersonal realm additionally involves the willingness to make compromises in order to sustain important ties with others (Ryff & Singer, 2008).

Autonomy can be defined as a sense of self-determination; simplified as independence and the ability to regulate behaviour. Therefore, the individual can conduct self-evaluation, minimising the need for the approval of others. This aspect of well-being is undoubtedly the most western of all the dimensions (Ryff & Singer, 2008). In addition, Ryff and Singer (2008) indicated that a person with high levels of autonomy regulates behaviour from within and evaluates the self by personal standards. For instance, a low level of autonomy is indicative of an over-concern about

the expectations and evaluations of others and the tendency to rely on judgements of others to make important decisions.

Within Ryff's model (1989), *environmental mastery* refers to the possession of a sense of competence in managing the everyday environment and reality of one's life. This includes choosing and creating environments suitable for personal psychological conditions. It further refers to the control of complex external activities and the effective use of surrounding opportunities (Ryff & Singer, 2008). Active participation in and mastery of the environment are important ingredients of an integrated framework on positive psychological function. Although this area of psychological well-being appears to have parallels with other psychological constructs, such as sense of control and self-efficacy, the emphasis on finding or creating a surrounding context that suits one's personal needs and capacities is unique to environmental mastery (Ryff & Singer, 2008).

According to Seligman and colleagues (2005), people always seem to search for a sense of purpose and meaning in life. Given the emphasis on finding meaning and direction, *purpose in life* is regarded as the most existential element of well-being (Ryff & Singer, 2005). Ryff (1989) asserts that this dimension refers to the possession of goals and a sense of directedness which creates meaning to the present and past life and results in more aims and objectives for living. The belief that one's life is purposeful and meaningful is a vital endeavour in order to ensure optimal well-being (Ryff & Singer, 2008).

Finally, psychological wellness requires developing your full potential and thus growing and expanding as a person. Therefore, *personal growth* refers to a sense of continued growth and development as a person (Ryff, 1989). It includes openness to experience and an overall sense of realising personal potential. Ryff and Singer (2008) added that personal growth is operationalised in changed behaviour which results in greater self-knowledge and effectiveness and is viewed as an improvement in the self. Furthermore, personal growth involves being conscious of one's thoughts, feelings,

prejudices, and judgements and using this personal knowledge to act with mindfulness and in greater accordance with one's values and potential (Ryff & Singer, 2008).

Accordingly, people with a high level of psychological well-being are likely to hold a positive view of themselves while recognising their own shortcomings (self-acceptance). They will also be inclined to maintain healthy and effective interpersonal relationships (positive relations with others). Being self-determined and independent, they tend to regulate their behaviour from within themselves (autonomy), while successfully creating and controlling their environment (environmental mastery). Owing to the fact that they experience life as having purpose and meaning, they act with a sense of directedness and intentionality (purpose in life); all the while continuing to grow and develop as a person (personal growth) (Ryff, 1989).

3.3.2. Adolescent Psychological Well-Being

Similar to psychological well-being itself, adolescent psychological well-being is a relatively broad concept referring to a good or satisfactory condition of existence. Adolescent psychological well-being is a state characterised by health, happiness and prosperity. It refers to the functioning of an adolescent at a high level of behavioural and emotional adjustment and adaptiveness, and not merely an absence of illness (Almquist et al., 2014; Bach & Guse, 2015; Daraei, 2013; Kumar, 2014; Trainor et al., 2010; Vogt Yuan, 2010).

Current research trends regarding the psychological well-being of adolescents reveal stress and adversity as characteristic features of the daily lives of adolescents (Daraei, 2013; Gustems-Carnicer & Calderón, 2013; Kumar, 2014; Smith & Somhlaba, 2015; van Schalkwyk & Wissing, 2010). Youth, including South African youth, is an especially vulnerable population group. Ryff and Singer (2005) suggested that the absence of psychological well-being creates conditions of vulnerability. Furthermore, Frydenberg and Lewis (2009) postulate that the ability to deal with daily hassles as well as more serious stressors is a requirement for successfully navigating life. Thus,

the ways in which adolescents respond to stress can have a significant effect on their current and future psychological well-being (Smith & Somhlaba, 2015).

The World Health Organisation (2014) estimates that approximately 20% of adolescents struggle with depression or anxiety. However, positive family and social relationships can promote adolescent mental health. For instance, a longitudinal survey was conducted to investigate adolescent psychological well-being status and associated factors in a sample of 2896 adolescents from Northern Taiwan (Lin et al., 2014). The results of the study revealed that family arguments and severed friendships in earlier adolescence had lasting effects on psychological well-being in later adolescence (Lin et al., 2014). It is therefore evident that positive family and social relationships are important and beneficial during adolescence and may contribute towards higher levels of psychological well-being.

In addition, psychological well-being has been shown to be positively correlated with prosocial behaviour. Prosocial behaviour may be defined as the voluntary actions that are intended to help or benefit another individual or group (Kumar, 2014). Originally, Ryff and Keyes (1995) proposed that prosocial behaviour can enhance an individual's psychological well-being. This phenomenon was investigated in a study conducted in India with 200 adolescents aged between 14 and 16 years (Kumar, 2014). Here the researcher aimed to investigate the relationship and significance of mean difference between prosocial behaviour and psychological well-being. Kumar's (2014) research revealed that psychological well-being had a significant positive correlation with prosocial behaviour. These results further indicated that prosocial behaviour is particularly important during adolescence as it could positively contribute towards higher levels of adolescent psychological well-being (Kumar, 2014).

As South Africa continues to have high levels of socio-economic inequalities, many South African adolescents live in extreme conditions of poverty and degradation (Arndt & Naudé, 2016; Brook et al., 2011; Khumalo et al., 2012). Adolescents, in particular,

are exposed to numerous environmental stressors within their communities (Brook et al., 2011), experience difficulties in coping with stress, developmental changes and social adjustments (Ayres & Leaper, 2013), all of which is detrimental to their health and well-being (Gagné & Melancon, 2013). Furthermore, the well-being of adolescents in South Africa is threatened by mounting crime and violence, the HIV pandemic and other disease outbreaks, food shortages, the failing education system, and natural disasters (Arndt & Naudé, 2016; Bach & Guse, 2015; Theron & Theron, 2010). Adolescent psychological well-being is also negatively influenced by environmental conditions like unemployment, crime, and poverty. These types of stressors are direct antecedents to psychological distress and psychosocial resources mediate the impact of the stressors on adolescents' psychological well-being (Cicognani, 2011; Gustems-Carnicer & Calderón, 2013; Khumalo et al., 2012; Kumar, 2014). The use of a repertoire of effective coping strategies is one such resource. Higher levels of psychological well-being can consequently bring about changes in many aspects of the functioning of South African youth. Indeed, Bach and Guse (2015) contend that such changes could lead to further transformations, which are urgently needed in the particular society of South Africa.

Furthermore, Bach and Guse (2015) highlighted this need in their study using an experimental research design. They aimed to evaluate the effect of contemplation and meditation training on the psychological well-being of 51 South African adolescents. Their results indicated that, in comparison to the control group, those adolescents who received the contemplation and meditation training showed statistically significant increases in environmental mastery and personal growth (Bach & Guse, 2015). Environmental mastery and personal growth are two of the key dimensions of psychological well-being (Ryff, 1989).

Current information regarding the levels and nature of psychological well-being amongst South African adolescents is sparse. The percentage of South African adolescents with high levels of psychological well-being is unknown. However, results from a study aimed at exploring the psychological well-being of a group of South

African adolescents indicated that 58% of the sample of 665 participants had lower levels of psychological well-being (van Schalkwyk & Wissing, 2010). Qualitative data also showed that some of the participants experienced symptoms of severe depression and other forms of pathology (van Schalkwyk & Wissing, 2010). This type of information would be of critical importance for the design of interventions to promote well-being in adolescents.

Despite young people experiencing significant disadvantages being more likely to also experience subsequent difficulties in psychological functioning, many adolescents do not inevitably succumb to their circumstances, or become overwhelmed by the adversity with which they are faced (Bach & Guse, 2015; van Schalkwyk & Wissing, 2010). Ryff and Singer (2008) acknowledge that much work has been done regarding resilience amongst those who lack socio-economic advantages and that psychological well-being is not simply exclusive for the privileged segment of society. It is important to understand that psychological well-being is deeply influenced by the context of people's lives (Ryff & Singer, 2008). It is thus necessary to keep the challenging South African context in mind, specifically with regards to adolescents, in the current study.

3.3.3. The Relationship between Coping and Psychological Well-Being

The ways in which adolescents cope with stress can have a significant effect on their current and future psychological well-being (Compas et al., 2012). Several international and South African studies have suggested that the coping strategies adopted by adolescents may be more closely related to psychological adjustment than the experience of stress itself (Almquist et al, 2014; Bach & Guse, 2015; Cicognani, 2011; Cortina et al., 2016; Gustems-Carnicer & Calderón, 2013; Khumalo et al., 2012; Smith & Somhlaba, 2015). Research with adolescents has found that daily hassles are associated with higher levels of psychological problems, such as depression and anxiety, as well as poorer behavioural outcomes. In addition, adolescents' ability to cope with minor life stressors has been found to be a better predictor of current and future psychological adjustment than their ability to cope with major life events

(Cicognani, 2011; Rodríguez-Naranjo & Caño, 2016; Smith & Somhlaba, 2015; Wang & Gan, 2011).

The relationship between adolescents' use of coping strategies and psychological well-being has been the focus of research attention for some time. In previous research, active coping strategies have been linked to positive adaptation and fewer depressive symptoms, while more maladaptive coping strategies, such as avoidance, have been linked to poorer adaptation, higher levels of depressive symptoms and psychological distress, and subsequently lower levels of psychological well-being (Ayres & Leaper, 2012; Cicognani, 2011; Gustems-Carnicer & Calderón, 2013; Mutumba et al., 2016; Pressman et al., 2009; Rodríguez-Naranjo & Caño, 2016; Smith & Somhlaba, 2015; Trainor et al., 2010; Vogt Yuan, 2010). Furthermore, it has been suggested that the better an individual is able to cope with stressors, the higher his or her psychological well-being will be, as he or she is better equipped to handle and adjust to stressful situations (Smith & Somhlaba, 2015).

Links between coping and psychological well-being have been reliably observed in previous research. For example, Cicognani (2011) aimed to assess the relationships with coping resources and the impact of coping on psychological well-being, with a sample of 342 Italian adolescents. The study investigated domain-specific coping strategies used by Italian adolescents when dealing with everyday age-relevant stressors. Findings indicated that active and internally focused coping strategies were the most frequently used coping strategies. Moreover, the use of these coping strategies significantly contributed towards adolescents' psychological well-being. Cicognani (2011) concluded that higher levels of psychological well-being are associated with the less frequent use of withdrawal coping strategies.

In another international study, researchers examined the relationship between coping strategies and psychological well-being in a sample of 98 Spanish undergraduate students aged between 19 and 42 years (mean = 23.31). The results showed a significant relationship between coping style and psychological well-being (Gustems-

Carnicer & Calderón, 2013). Approach coping strategies such as problem solving had a beneficial effect on symptoms of depression, phobic anxiety and overall levels of psychological distress. In contrast, cognitive avoidance coping was associated with greater presence of psychological symptoms, indicating distress. Specifically, cognitive avoidance strategies such as avoiding thinking about the stressor, seeking distraction, and acceptance-resignation were associated with the symptoms of internalising psychological disorders such as somatisation, depression, phobic anxiety, paranoid ideation, and psychological distress (Gustems-Carnicer & Calderón, 2013). In addition, behavioural avoidance strategies such as searching for alternative rewards and emotional discharge were negatively associated with psychological well-being. The researchers concluded that the coping strategies used by undergraduate students play a key role in their psychological well-being (Gustems-Carnicer & Calderón, 2013).

The relationship between coping and adolescent psychological well-being has been well documented in international literature. However, a significant gap exists in our knowledge and understanding of the daily stressful experiences of typical, urban South African adolescents, how they cope with common stressors, and how this relates to their psychological well-being. In a recent local study of 86 youth, daily hassles positively predicted depressive symptoms; however, the participants' coping repertoires played a more important role in predicting psychosocial adjustment (Smith & Somhlaba, 2015). Essentially, these findings suggest that South African adolescents have the ability to learn under which conditions particular coping strategies are most effective in resolving the stressful situation and the negative emotions associated with it (Smith & Somhlaba, 2015). This type of knowledge and understanding would be critical to promote adolescents' psychological well-being.

The aforementioned research findings demonstrate that the coping strategies employed by adolescents when dealing with everyday life stressors may buffer or exacerbate the effects of stress on psychological well-being. Further research is therefore needed in order to investigate the coping strategies that South African adolescents employ when dealing with daily stressors, which may ultimately increase

their levels of psychological well-being. Coping strategies that exacerbate the effects of stress should be highlighted in order for adolescents to make conscious efforts of not resorting to such maladaptive strategies which consequently may lead to lower levels of psychological well-being.

3.3.4. Gender Differences in Psychological Well-Being

Males experiences of stressors differ substantially to that of females. Differences include the kind of stressors they are exposed to, the coping strategies they use (Calvete et al., 2011), their social relationships as well as their personal resources and vulnerabilities (Rosenfield & Mouzon, 2013). These are all factors that could affect their psychological well-being. It therefore seems plausible that male and female adolescents would also experience differences in psychological well-being. Due to differences in gender roles and the socialisation of adolescent males and females, gender differences in levels of psychological well-being are also presumed to occur, particularly in traditional African communities (Arndt & Naudé, 2016; Bray et al., 2010; Khumalo et al., 2012; van Rooyen et al., 2014).

International literature emphasised noticeable gender differences in psychological well-being with the norm being that adolescent males report higher levels of positive self-esteem, higher levels of self-efficacy, less unhappiness, and fewer past worries as compared to female adolescents (Almquist et al., 2014; Bradley & Inglis, 2012; Li et al., 2015; Vogt Yuan, 2010). Thus, the general consensus is that female adolescents' well-being is significantly lower than that of males. This understanding was consistent with an American longitudinal study, conducted with a sample of 12 814 adolescents, where gender differences in the relationship between body perceptions and behaviour and changes in adolescents' psychological well-being were explored over a one-year time period (Vogt Yuan, 2010). Results showed that perceptions of being larger or more developed generally lowered female adolescent's levels of psychological well-being. The psychological well-being of adolescent males, however, was not significantly influenced by body perceptions and behaviour (Vogt Yuan, 2010). These results imply that negative body perceptions and behaviour are

associated with lower levels of psychological well-being amongst female adolescents, whilst male adolescents remain unaffected.

In a more recent study, Swedish researchers investigated the association between friendship networks and psychological well-being amongst a sample of 1289 adolescents (Almquist et al., 2014). The results revealed gender differences such as adolescent females seemingly benefitting more (as indicated by higher levels of psychological well-being) from having high-quality and trusting friendships as compared to their male counterparts. In addition, a statistically significant strong positive relationship between self-disclosure and higher levels of psychological well-being was found exclusively among the group of male adolescents (Almquist et al., 2014).

Consistent with previous research findings, Kumar (2014) also found 200 adolescent males in India to have higher psychological well-being scores. *Ryff's Scale of Psychological Well-Being* was used in Kumar's (2014) research. It was found that adolescent males scored higher on the scale dimensions of autonomy and environmental mastery as compared to their female counterparts (Kumar, 2014). Similarly, Li and colleagues (2015) investigated gender differences in the six factors of the 18-item version of *Ryff's Psychological Well-Being Scale* with 653 Taiwanese participants. Findings also indicated that female participants had significantly lower levels of autonomy and higher levels of environmental mastery than their male counterparts. The correlation of environmental mastery and self-acceptance was higher for males than for the female participants. In addition, the correlation of positive relations with others and autonomy was lower for the male participants (Li et al., 2015).

Research on gender differences in adolescent psychological well-being within the South African context is, however, inconclusive. Inconsistent findings have been reported as studies have found gender to not be significantly correlated with psychological well-being. Research conducted by Khumalo and colleagues (2012) is one such example. The researchers explored the association of socio-demographic

variables with psychological well-being with 459 Setswana-speaking individuals from rural and urban areas in the North West Province of South Africa. Findings indicated that although some socio-demographic variables such as urban living and education were associated with higher levels of psychological well-being, gender was not significantly associated with psychological well-being (Khumalo et al., 2012). The researchers reported that these counterintuitive results could be due to the fact that the socially disadvantaged position held by women, as compared to men, may be historical. In today's society, men and women experience similar levels of psychological well-being. Moreover, this similarity in levels of psychological well-being could be ascribed to shared conditions of living and the flexibility of previously rigid traditional gender roles (Khumalo et al., 2012).

In a similar study conducted with 280 students from eight colleges in Mysore, India, Daraei (2013) aimed to explore the impact of social factors including gender, educational levels of parents, family income, occupation of parents, and family relationships on psychological well-being. Findings revealed that there were no gender differences in relation to the psychological well-being levels of students (Daraei, 2013).

Given the inconsistent findings of previous research on gender differences in adolescent psychological well-being, it is necessary to investigate this phenomenon within the current sample of South African adolescents. Understandings of gender differences in psychological well-being may help efforts towards empowering both male and female adolescents towards achieving self-actualisation and optimal functioning albeit using different paths (Khumalo et al., 2012).

3.3.5. Conclusion

Historically, the field of psychology has given much more consideration to human unhappiness and suffering than to the origins and significances of positive functioning. Individuals, however, possess qualities needed to flourish and experience happiness, wisdom, and psychological, physical, and social well-being. These are the same

assets that shield against stress and physical and mental illness (Seligman & Csikszentmihalyi, 2000), thus contributing towards an enhanced understanding of psychological well-being, and amplifying its need and relevance. Individuals with higher levels of psychological well-being are viewed as more successful in meeting environmental stressors and pressures, while a lack of psychological well-being can mean an absence of success, and the existence of emotional problems (Ryff, 1989; Ryff & Singer, 2005; Ryff & Singer, 2008).

Current research trends on the psychological well-being of adolescents reveal that stress and adversity are characteristic features of the daily lives of adolescents. The ways in which South African adolescents respond to stress can have a significant effect on their current and future psychological well-being (Smith & Somhlaba, 2015). Furthermore, the better an individual's ability to cope with stress, the higher his or her levels of psychological well-being will be, as he or she is better equipped to handle and adjust to stressful situations (Smith & Somhlaba, 2015). Increased levels of psychological well-being can consequently bring about changes in many aspects of the functioning of South African youth, and these changes could lead to further transformations, which are urgently needed in the South African society. Further research is therefore required in order to investigate the coping strategies that South African adolescents use to deal with daily stressors and which could ultimately increase their psychological well-being.

3.4. Chapter Summary

Chapter 3 has focussed on the three main constructs of the present study, namely coping, leisure, and psychological well-being. A detailed discussion on the different components of each construct, with specific reference to the adolescent years and the South African context were included. In chapter 4, the focus will be on the research methodology. The aim of the research, research questions, design and method, participants, and ethical considerations will be addressed.

Chapter 4

Research Methodology

The focus of this chapter will be on the methodology used in conducting the research. A discussion on the research aims and objectives, as well as the research design and approach that was used will also be included. This will be followed by a clarification of the particulars of the study participants, the ethical considerations and the data collection process. Furthermore, this chapter will describe the measuring instruments utilised, and the statistical analyses that were performed.

4.1. Research Aims

The researcher aimed to investigate if leisure engagement, as assessed by the use of leisure as a coping strategy, significantly moderates the relationship between coping strategies and psychological well-being amongst adolescents in the Northern Cape Province of South Africa.

In order to achieve the aim of this study, the following research objectives were formulated:

1. Determine if there is a significant relationship between coping strategies and psychological well-being amongst adolescents.
2. Determine if there is a significant relationship between leisure as a coping strategy and psychological well-being amongst adolescents.
3. Determine if gender is a moderator in the relationship between coping strategies and psychological well-being.
4. Determine if leisure engagement, as assessed by leisure as a coping strategy, is a moderator in the relationship between coping strategies and psychological well-being.

4.2. Research Questions

The following research questions were explored:

1. Is there a significant relationship between coping strategies and psychological well-being amongst adolescents?
2. Is there a significant relationship between leisure as a coping strategy and psychological well-being amongst adolescents?
3. Is gender a moderator in the relationship between coping strategies and psychological well-being in adolescents in the Northern Cape?
4. Is leisure engagement, as assessed by leisure as a coping strategy, a moderator in the relationship between coping strategies and psychological well-being in adolescents in the Northern Cape?

4.3. Research Design

In order to answer the research questions, a quantitative, non-experimental, cross-sectional study (Stangor, 2015) was conducted. In a non-experimental research design the researcher is a passive agent; observing, measuring, and describing a phenomenon as it occurs or exists (Gravetter & Forzano, 2016). The advantage of this design includes its tendency of having a high level of external validity, which can thus be generalised to a larger population (Stangor, 2015). Non-experimental research also allows for measuring constructs as they exist without any manipulation (Gravetter & Forzano, 2016; Stangor, 2015).

4.4. Participants

The current research focused on adolescents in the Northern Cape Province of South Africa. The participants were selected from three schools in the Northern Cape Province by means of non-probability, convenience sampling (Stangor, 2015). The sample for this study consisted of 228 adolescents ($N = 228$) in Grades 10 to 12. Participants included male and female adolescents in the age group between 14 and 19 years. Adolescents 17 years of age contributed towards the largest proportion of adolescents (33.04%) in this sample. Furthermore, the mean age was found to be 16.26 with a standard deviation of 1.1 years. The distribution with regards to the

participants' age is displayed in Table 1. One participant did not indicate their age. In addition, the sample was almost evenly divided as females comprised 50.88% ($n = 116$) of the total sample and males made up the remaining 49.12% ($n = 112$).

Table 1

Distribution with Regards to Age

Age	Frequency	Valid %
14	9	3.96
15	55	24.23
16	62	27.31
17	75	33.04
18	22	9.69
19	4	1.76
Total	227	100

The sample is adequately representative compared to the 2015 estimated demographic statistics for the Northern Cape Province. Individuals between the ages of 15 and 19 years account for 10% of the total Northern Cape population (Statistics South Africa, 2015). Within this age group, adolescents are also fairly evenly divided between males (50.37%) and females (49.63%).

Table 2 summarises the distribution of the sample with regards to race, residence, and home language.

Table 2

Distribution with Regards to Race, Residence, and Home Language

Variable	Category	Frequency	Valid %
Race	Asian	7	3.07
	Black	147	64.47

	Coloured	56	24.56
	White	10	4.39
	Other	8	3.51
	Total	228	100
Residence	Town	36	16.07
	Urban area/ suburbs	149	66.52
	Rural area/ townships	34	15.18
	Farm district	3	1.34
	Other	2	0.89
	Total	224	100
Home Language	English	86	37.89
	Afrikaans	26	11.45
	IsiXhosa	18	7.93
	IsiZulu	2	0.88
	Sesotho	8	3.52
	Setswana	81	35.68
	Other	6	2.64
	Total	227	100

The majority of the participants were black, comprising 64.47% of the total sample. Statistics South Africa (2015) also reported that the black African population group constitutes the majority (50.35%) of the total Northern Cape population. This is followed by the coloured population group (40.31%), and thereafter the white population group (7.09%). The current sample is therefore fairly representative of the different population groups in the Northern Cape Province. In addition, there were eight participants who selected the 'other' option as they did not identify with any of the race options provided. From these eight participants, Indian and Latin American were specified.

Four participants did not indicate their place of residence and the two participants who selected the 'other' option mentioned that they reside in the school hostel. Participants reported urban areas (66.52%) as their most frequent place of residence. However, a further 15.18% of the participants reported that they reside in rural areas in the Northern Cape Province.

Participants were also asked to indicate their primary home language. As can be seen in Table 2, the majority of participants speak English (37.89%) and Setswana (35.68%). However, one participant did not respond to this question, and a further six participants selected the 'other' option. Four languages, Chinese, Shona, Spanish and Urdu, were indicated by these six participants. English-speaking adolescents were over-represented in the current study since the total number of individuals who reported English as their first language only accounted for 3.36% of the total Northern Cape Province (Statistics South Africa, 2015). In addition, 53.76% of the total Northern Cape population reported Afrikaans as their first language (Statistics South Africa, 2015). This group is under-represented in the current sample, with only 11.45% of the adolescent participants indicating Afrikaans as their home language.

4.5. Ethical Considerations

Since adolescents are a particularly vulnerable population and are frequently considered to be an "at risk" group (World Health Organisation, 2014), ethical considerations were of the utmost importance during the preparation for and completion of this study. Ethical clearance was obtained from the Research Ethics Committee of the Faculty of Humanities, University of the Free State (Ethical clearance number: UFS-HUM-2014-69). Permission to conduct research at three schools in the Northern Cape Province was also obtained from the Northern Cape Department of Education as well as the school principals. Subsequently, the respective school principals requested the voluntary participation of learners in the relevant grades. Further permission for participation in the data collection sessions was obtained from the learners' parents/ legal guardians, on behalf of the adolescents. Finally, informed consent was also obtained from the participants themselves. Copies of all the

aforementioned documentation can be found in appendix B to F. These documents explained the purpose of the study as well as what was expected from the participants should they agree to participate.

Data collection was conducted on the premises of the participating schools. Each session accommodated approximately 20-30 participants in order to enable the researcher to attend to each participant's queries or concerns individually. During the data collection process, the contents of the consent form were verbalised to participants before commencement of the data collection. The researcher clarified to participants that they may withdraw from the study at any time, without any penalties. Moreover, as adolescents constitute a vulnerable population group, the notions of voluntary participation and anonymity (Allan, 2011, 2015) were also explained and upheld throughout the research process. Participants were guaranteed that their right to privacy and confidentiality would be secured by protecting their identities at all times (Allan, 2015). As a result, no identifying details have been made public or disclosed in the current research results. In addition, the data obtained during the research process has been securely stored in a cloud storage file which is password protected.

In addition, deception was strictly avoided, and the principles of non-maleficence and beneficence (Allan, 2011, 2015) were maintained throughout the study by taking all the necessary steps to ensure that the participants were not harmed while participating in the research (Allan, 2011). The researcher considered the participants' right to have their dignity respected, and therefore all questionnaires used were standardised for the adolescent population and were not harmful to the participants in any way. It was not foreseen that participants would be subjected to increased risk of physical or psychological harm through taking part in the study. Nevertheless, in an effort to maintain sound ethical practice (Allan, 2015), arrangements were made with the relevant school guidance counsellors to be of assistance should any problems arise. However, no problems arose and none of the participants had to be referred for debriefing or counselling. After the completion of the study, feedback will also be provided to the Northern Cape Department of Education, the relevant schools, as well as to the authors of the psychological scales that were used in this study.

4.6. Data Collection

Permission was granted by the Northern Cape Department of Education for conducting the research at English medium schools in the Northern Cape Province. Thereafter, the researcher requested permission from six schools, of which three responded. Permission was thus obtained from the three respective schools' principals for the research to be conducted with their learners. The respective school principals requested the participation of learners from grades 10, 11 and 12. Information sheets and permission letters were given to the learners and sent home with them in order to gain permission from their parents or legal guardians. On return of the signed letters to the school principals, which gave consent on behalf of the adolescents, the data collection sessions commenced.

During the data collection process, the purpose of the study was explained and the researcher emphasised that participation was voluntary and all responses would remain confidential and anonymous (Allan, 2011, 2015). The participants all signed an informed consent form giving the researcher permission to use the data obtained during the sessions. On signed consent, the participants were requested to complete a biographical questionnaire and three self-report questionnaires.

The advantage of self-report questionnaires is that the researcher is able to obtain the view of the participants directly, easily and timeously (Gravetter, & Forzano, 2016). Disadvantages of this data collection method include the absence of any guarantee that participants have the desire to respond accurately or honestly to the questions posed (Stangor, 2015). Respondents being aware of being measured may influence them to represent themselves in a different light than what is accurate (Foxcott & Roodt, 2013; Stangor, 2015). The researcher attempted to control for participants' possible tendency to respond in a socially desirable manner or to alter their responses. Thus, participants were requested to respond to the items in a manner that reflects their true experience, rather than what they believe their experience should be. In other words, the researcher emphasised that there were no incorrect or correct answers, and participants were requested to respond as truthfully as possible.

Rapport was maximised through conducting the data collection sessions in groups of approximately 20-30 learners.

Data collection took place on a day set aside by each of the three school principals. The questionnaires were completed by learners at the respective schools and this process was administered by the researcher with assistance from educators and school guidance counsellors. Furthermore, as English is the official language of communication of the Northern Cape Education Department, and thus the medium of instruction and communication at the three participating schools, the questionnaires were only made available in English. The battery of tests was completed in a time frame of one hour.

4.7. Measuring Instruments

A biographical questionnaire and three self-report questionnaires were administered. Permission to use the psychological scales in this study was obtained from the relevant scale authors. Each of these measuring instruments will now be discussed in more detail.

4.7.1. Biographical Questionnaire

The researcher compiled a biographical questionnaire in order to gather biographical data such as age, gender, race, residential area, and home language. In addition to the demographic details, the researcher also sought information regarding the types of leisure activities that the learners participate in, if any, as well as the frequency of participation.

4.7.2. Brief COPE

The *Brief Coping Orientations to the Problem Experienced Questionnaire* (Brief COPE) (Carver, 1997) was used to measure the coping strategies that the adolescent participants utilise. This scale consists of 28 items presented in the form of a coping

statement. Respondents were asked to rate each item on a four-point Likert-scale, ranging from 1 = “*I haven’t been doing this at all*” to 4 = “*I have been doing this a lot*”. The scale is comprised of 14 two-item subscales, namely active coping, planning, positive reframing, acceptance, humour, religion, emotional support, instrumental support, self-distraction, denial, venting, substance use, behavioural disengagement, and self-blame (Carver, 1997). There is no overall score for this measure and the scale author thus recommends that researchers use their own data to determine the composition of higher-order factors (Carver, 2007), as was done in this study (see chapter five, section 5.2.3.). The reliability and validity of the *Brief COPE* was previously tested among a sample of 37 Malaysian women undergoing treatment for breast cancer (Yusoff, Low, & Yip, 2010). The *Brief COPE* indicated fair internal consistencies with alpha coefficients ranging from 0.50 to 0.90. The researchers concluded that the *Brief COPE* showed fairly good reliability and validity (Yusoff et al., 2010).

4.7.3. *Leisure Coping Strategy Scale*

The *Leisure Coping Strategy Scale* (Iwasaki & Mannell, 2000) was used to assess the extent to which specific leisure pursuits help individuals to cope with stress. The scale comprises of 18 items and three subscales, namely leisure companionship, leisure palliative coping, and leisure mood enhancement. Each item is rated on a seven-point Likert scale ranging from 1 = “*very strongly disagree*” to 7 = “*very strongly agree*”. The reliability and validity of the scale has been investigated in various populations. For example, in a sample of 247 volunteer first-year participants from two Canadian universities, a very high alpha reliability coefficient of 0.93 for the total scale was found and the alpha value for internal consistency was found to be 0.87 (Iwasaki & Mannell, 2000). The subscales of the *Leisure Coping Strategy Scale* also showed consistently high alpha reliability coefficients: 0.87 for leisure companionship; 0.86 for leisure palliative coping; and 0.85 for leisure mood enhancement (Iwasaki & Mannell, 2000). In a more recent study conducted in Philadelphia, Pennsylvania with 101 culturally diverse individuals with mental illness, a high alpha reliability coefficient of 0.95 was also found for this scale (Iwasaki et al., 2014).

4.7.4. Ryff's Scale of Psychological Well-Being

To assess adolescent psychological well-being, *Ryff's Scale of Psychological Well-Being* (Ryff, 1989), a 42-item scale consisting of the six key dimensions of psychological well-being, was utilised. The six dimensions of psychological well-being include self-acceptance, environmental mastery, purpose in life, positive relations with others, personal growth, and autonomy (Ryff, 1989). Respondents were asked to indicate their level of agreement with 42 self-descriptive statements based on a six-point Likert scale ranging from 1 = “*strongly disagree*” to 6 = “*strongly agree*”. The total score for the scale was used as an indication of psychological well-being where larger scores represent higher levels of psychological well-being. The subscales indicating the six components of psychological well-being may also be used and interpreted individually. The scale was previously tested with a nationally representative sample of American English-speaking adults ($N = 1108$), and was shown to have good reliability and validity. Cronbach's alpha coefficient for the total scale was found to be 0.90 (Ryff & Keyes, 1995). In a more recent study, the six dimensions of psychological well-being were tested among a sample of 664 healthy Romanian individuals and yielded high reliability scores (Kállay & Rus, 2014). For instance, alpha reliability coefficients for the six subscales were as follows; autonomy = 0.88, environmental mastery = 0.91, personal growth = 0.92, positive relations with others = 0.89, purpose in life = 0.91, and self-acceptance = 0.92 (Kállay & Rus, 2014).

4.8. Statistical Analysis

The statistical analysis was conducted using SPSS version 24 (IBM Corp, 2016). Descriptive statistics and internal consistency reliability coefficients were calculated for all the scales and their subscales respectively. For the *Brief COPE Scale* (Carver, 1997), a preliminary analysis was conducted, using principal components analysis, prior to the main analysis. This was done to determine how subscales grouped together to form higher-order coping constructs in the current sample. Furthermore, in an effort to answer the first research question, namely, is there a relationship between coping and adolescent psychological well-being, the Pearson product-moment correlation was used. Backward stepwise hierarchical multiple regression was also used to analyse the percentage of variance in psychological well-being

explained by coping strategy categories. In addition, a Pearson product-moment correlation was conducted to answer the second research question which aimed to investigate the relationship between leisure as a coping strategy and adolescent psychological well-being. In order to answer the final two research questions, moderated multiple regressions were run, testing the moderating effects of gender, and leisure as a coping strategy in the relationship between coping and adolescent psychological well-being.

4.9. Chapter Summary

The aims, research design, demographic details of the participants, as well as the data gathering process have been explained in detail in this chapter. In addition, the measuring instruments that were utilised, as well as the statistical analyses that were run, have been described. The subsequent results of the current study will be presented and discussed in the chapters that follow.

Chapter 5

Results

The findings of the study are presented in this chapter and the results pertaining to the descriptive and inferential statistical procedures are also reported.

5.1. Participation in Leisure Activities

From the *Participation in Leisure Activities Questionnaire* that formed part of the biographical information obtained from the participants, the researcher aimed to investigate which activities South African adolescents in the Northern Cape Province most frequently participate in.

These activities were grouped into four categories, namely sporting activities, cultural activities, recreational/ relaxation activities, and outdoor activities. Figure 1 summarises the four categories of leisure activities and indicates the percentage of participants who reported participation in each of the various activities. Percentages are of the total number of participants ($N = 228$).

The majority of the participants indicated that they participate in some form of exercise (57.46%), music (30.70%), listening to music (90.79%), and gardening (29.39%) from the four categories of leisure activities.

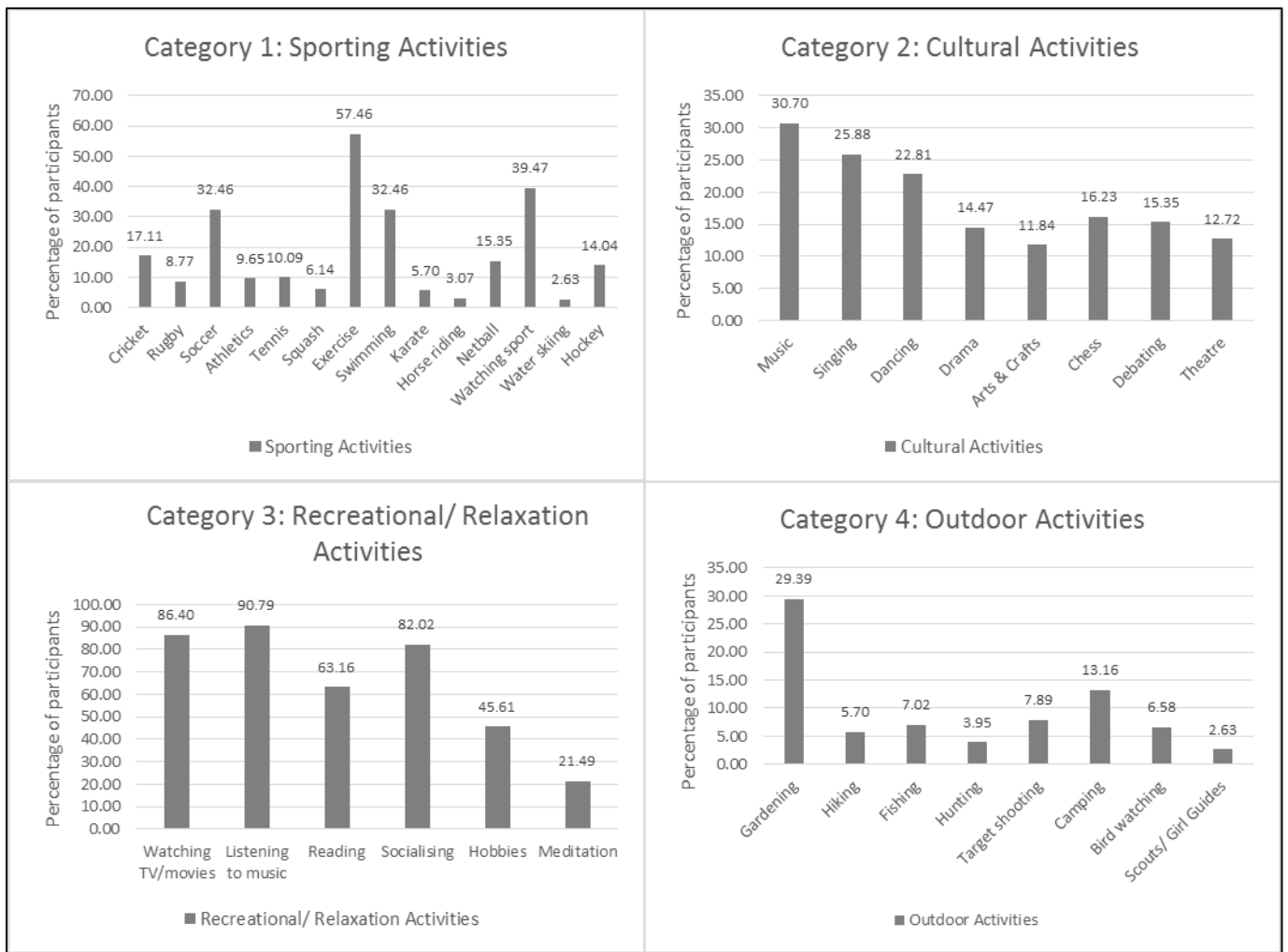


Figure 1. Participation in Four Categories of Leisure Activities

5.2. Statistical Analysis

The results of the current study including the handling of missing data, descriptive statistics, principal components analysis, as well as the reliability scores found for each measuring instrument within the current sample of adolescents will be subsequently discussed. This will be followed by a discussion on the statistical analyses that were run in order to answer the research questions, and the findings thereof.

5.2.1. The Handling of Missing Data

Before the statistical analyses were conducted it had already been decided how to handle missing data. For all three measuring instruments (*Brief COPE Scale*, *Leisure Coping Strategy Scale*, and *Ryff's Scale of Psychological Well-Being*), some form of

mean substitution was used to replace missing data. For the *Brief COPE Scale*, if missing data accounted for less than 15% of a participant's total for this scale, then the missing data points were replaced with that participant's mean on completed items on that scale. This criterion was used by Grasso et al. (2012) in their research with college students who were exposed to a potentially traumatic event and completed the *Brief COPE* questionnaire. For the current study, missing data points were replaced with mean scores, and therefore, none of the participants had to be omitted as their missing data did not account for more than 15% of their totals for the *Brief COPE Scale*.

Similarly, for *Ryff's Scale of Psychological Well-Being*, any missing responses were handled in the following manner: Missing values were replaced with the mean of the distribution of all participants for that variable (Harris, Martin, & Martin, 2013; Miller & Kim, 2016). Replacing missing values with the mean of the distribution is a frequently used procedure for continuous data. According to George (2011), replacing a small number of missing values with the mean score of the other subjects for that variable has little influence on the outcome of the analysis of the individual's scores.

For the *Leisure Coping Strategy Scale*, the mean scores of the items for each dimension were calculated after reversing the scores on the negatively worded items. In order to handle missing data, mean scores were calculated for each respondent as long as four out of the six items in each subscale had been completed by the respondents (R.C. Mannell, personal communication, August 8, 2016). Thus, mean scores were obtained for all participants and none of the participants had to be excluded from the dataset.

5.2.2. Descriptive Statistics

The means and standard deviations, as well as range of scores obtained for the *Brief COPE Scale*, *Leisure Coping Strategy Scale*, and *Ryff's Scale of Psychological Well-Being* are presented in Table 3. On each of the 14 subscales for the *Brief COPE*, participants could obtain a score ranging from 2 to 8. Means and standard deviations

for each subscale are shown in Table 3. For the *Leisure Coping Strategy Scale*, participants could score a minimum of 18 and a maximum of 126 for the total scale. For this sample, scores for the total scale ranged from 41 to 119 with a mean score of 87.04. Scores for each of the three subscales of the *Leisure Coping Strategy Scale* could range from 6 to 42. The mean scores for each of the three subscales were 26.85, 28.23, and 31.96 respectively. Furthermore, participants could have obtained a total score for *Ryff's Scale of Psychological Well-Being* ranging from 42 to 252. As can be seen in Table 3, participants' total scores ranged from 74 to 237 with a mean of 176.59. Total scores for each of the six subscales could range from a minimum of 7 to a maximum of 42.

Table 3

Descriptive Statistics for the Brief COPE Scale, Leisure Coping Strategy Scale, and Ryff's Scale of Psychological Well-Being

Brief COPE Scale	Minimum	Maximum	Mean	Standard Deviation
Total scale	29	92	67.41	10.79
<i>Subscales</i>				
Self-Distraction	2	8	5.65	1.75
Active Coping	2	8	5.63	1.64
Denial	2	8	3.89	1.80
Substance Use	2	8	2.59	1.27
Emotional Support	2	8	4.58	1.78
Instrumental Support	2	8	4.78	1.88
Behavioural Disengagement	2	8	3.56	1.65
Venting	2	8	4.64	1.70
Positive Reframing	2	8	5.57	1.85
Planning	2	8	6.03	1.68
Humour	2	8	4.51	2.09
Acceptance	2	8	5.92	1.66
Religion	2	8	5.29	2.06
Self-Blame	2	8	4.77	1.95
Leisure Coping Strategy Scale	Minimum	Maximum	Mean	Standard Deviation
Total scale	41	119	87.04	13.13
<i>Subscales</i>				
Leisure Companionship	11	42	26.85	5.31
Leisure Palliative Coping	6	42	28.23	5.73
Leisure Mood Enhancement	11	42	31.96	5.90
Psychological Well-Being Scale	Minimum	Maximum	Mean	Standard Deviation

Total scale	74	237	176.59	27.60
<i>Subscales</i>				
Autonomy	14	42	29.53	6.29
Environmental Mastery	7	37	26.49	4.88
Personal Growth	12	42	32.16	5.39
Positive Relations	7	42	29.08	6.49
Purpose in Life	16	42	31.44	6.06
Self-Acceptance	9	42	27.89	7.16

5.2.3. Principal Components Analysis for the Brief COPE Scale

The *Brief COPE Scale* (Carver, 1997) consists of 14 subscales. Theory proposes that the 14 coping strategies assessed by these subscales are part of several larger constructs (for example, problem-focused, emotion-focused, approach, avoidance, and dysfunctional coping strategies). Researchers have cautioned against the practice of assuming that certain coping strategies are always grouped in the same way across different contexts (Bose, Bjorling, Elfstrom, Persson, & Saboonchi, 2015; Carver, 1997; Carver, 2007; Hastings et al., 2005; Lazarus & Folkman, 1984; Snell, Siegert, Hay-Smith, & Surgenor, 2011; Steinhardt & Dolbier, 2008). Therefore, a principal components analysis was run in order to reduce the large set of variables into smaller sets of variables that account for most of the variance in the original variables. The researcher aimed to see how the variables grouped together, forming broader coping constructs within the current sample of adolescents. This procedure was not necessary for the *Leisure Coping Strategy Scale* and *Ryff's Scale of Psychological Well-Being* since total scale scores were used for these two instruments in the subsequent analyses.

In order to run a principal components analysis, four basic requirements should be met first. In particular, the study's design should have multiple variables that are measured at the continuous level (although ordinal data is frequently used), there should be a linear relationship between all variables, no outliers, and the sample should be large enough for a principal components analysis to produce reliable results (Laerd Statistics, 2015). When checking for patterned relationships amongst the variables, one item (BC_21) showed a lack of patterned relationships with all other variables, as evidenced by having no correlation coefficients greater than or equal to

0.3 with any of the other variables. For this reason, this item was deleted and the analysis was run again. After the analysis was rerun, all assumptions were met. Inspection of the correlation matrix showed that all variables had at least one correlation coefficient greater than 0.3. The overall Kaiser-Meyer-Olkin (KMO) measure was 0.689 with individual KMO measures all greater than or equal to 0.5, indicating sampling adequacy. Bartlett's Test of Sphericity was statistically significant ($p < 0.0005$), indicating that the data was appropriate for principal components analysis (Laerd Statistics, 2015).

The subsequent component loadings are represented in Table 4.

Table 4

Component Loadings for Principal Components Analysis with Varimax Rotation of the Brief COPE Scale

Items	Components: Rotated component coefficients		
	Action-Oriented/Approach Coping Strategies	Maladaptive/Dysfunctional Coping Strategies	Acceptance/Avoidance Coping Strategies
Cronbach's alpha coefficients	0.771	0.734	0.641
BC_Q15	0.653	0.038	0.022
BC_Q14	0.609	-0.054	0.018
BC_Q25	0.574	-0.045	0.145
BC_Q10	0.529	0.040	0.089
BC_Q27	0.522	0.065	-0.101
BC_Q2	0.505	-0.159	0.071
BC_Q22	0.494	-0.022	-0.109
BC_Q12	0.491	-0.054	0.347
BC_Q5	0.477	0.021	0.219
BC_Q7	0.472	-0.379	0.030
BC_Q23	0.467	0.091	0.077
BC_Q1	0.384	0.151	0.136
BC_Q19	0.310	0.220	0.187
BC_Q6	-0.115	0.703	0.069
BC_Q16	-0.070	0.615	-0.060
BC_Q26	0.138	0.588	-0.220
BC_Q11	-0.119	0.583	0.283
BC_Q13	-0.047	0.547	-0.143
BC_Q4	-0.170	0.540	0.251
BC_Q3	0.215	0.519	-0.031

BC_Q8	0.364	0.491	-0.143
BC_Q9	0.299	0.410	0.149
BC_Q18	-0.052	0.135	0.763
BC_Q28	-0.050	0.204	0.688
BC_Q17	0.367	-0.198	0.501
BC_Q20	0.204	-0.137	0.443
BC_Q24	0.285	-0.174	0.425

Note: Major loadings for each item are bolded

After scrutinising the literature, an a priori decision was made to restrict the number of components (coping constructs) to be extracted to three. The subsequent results of the principal components analysis showed that a model with three components was a good fit for the data. The three-component solution explained 34.88% of the total variance. Finally, a Varimax orthogonal rotation was employed. A principal components analysis using a Varimax rotation has been specifically used for the *Brief COPE Scale* in several previous studies (Aitken & Crawford, 2006; Hastings et al., 2005; Radat et al., 2009; Welbourne, Eggerth, Hartley, Andrew, & Sanchez, 2007; Zelikovsky, Schast, & Jean-Francois, 2007).

Brief COPE items were included as part of three new coping strategy subscales, only if they met two basic criteria, namely: 1) they loaded > 0.3 on one of the components; however, if an item had a loading of 0.3 or greater on more than one component, then the item had to load > 0.4 on one component and < 0.4 on the other two components, and 2) the loading on the main component was positive (Hastings et al., 2005; Laerd Statistics, 2015).

Component 1 (Action-Oriented/ Approach Coping Strategies) included all of the items from the original *Brief COPE* subscales for planning, use of emotional support, use of instrumental support, religion, active coping, self-distraction, and one item from the positive reframing subscale. These coping strategies are a mix of problem-focused and emotion-focused coping strategies but ultimately seemed to reflect active attempts in dealing with the stressor. The second component (Maladaptive/ Dysfunctional Coping Strategies), included all of the items from the original *Brief COPE* subscales

for behavioural disengagement, self-blame, substance use, denial, and one item from the venting subscale¹. Thus, this category most clearly represented maladaptive or dysfunctional coping strategies. Finally, component 3 (Acceptance/ Avoidance Coping Strategies) included all of the items from the original *Brief COPE* subscales for humour, acceptance and the second item from the positive reframing subscale. These coping strategies involve accepting the situation or making attempts to avoid having to deal with the stressor.

Table 4 also shows Cronbach’s alpha coefficient values for the three new coping strategies subscales. Cronbach’s alpha coefficient for the Action-Oriented/ Approach Coping Strategies, Maladaptive/ Dysfunctional Coping Strategies, and Acceptance/ Avoidance Coping Strategies subscales were 0.771, 0.734, and 0.641 respectively. These values were acceptable and generally good, indicating that the subscales making up the three components had adequate internal consistency reliability for the current sample ($N = 228$).

5.2.4. Reliabilities of the Measuring Instruments

Alpha coefficients were calculated for all three of the measuring instruments for the current sample of participants and are reported in Table 5. This was done in order to determine the internal consistency reliability of the data yielded by each of the scales and their subscales for this specific sample.

Table 5

Cronbach’s Alpha Coefficients for all the Scales and Subscales

Scale	Number of items	Alpha coefficient
Brief COPE	28	0.768
Action-Oriented/ Approach Coping Strategies	13	0.771
Maladaptive/ Dysfunctional Coping Strategies	9	0.734
Acceptance/ Avoidance Coping Strategies	5	0.641

¹ The second item from the venting subscale (BC_21) was removed from the analysis as it showed a lack of patterned relationships with all other variables.

Leisure Coping Strategy Scale	18	0.818
Leisure Companionship	6	0.623
Leisure Palliative Coping	6	0.645
Leisure Mood Enhancement	6	0.821
Ryff's Scale of Psychological Well-Being	42	0.902
Autonomy	7	0.730
Environmental Mastery	7	0.445
Personal Growth	7	0.669
Positive Relations	7	0.707
Purpose in Life	7	0.681
Self-Acceptance	7	0.795

From Table 5, it can be seen that the *Brief COPE*, and the three coping strategies subscales that were derived from the principal components analysis had moderate to good alpha coefficients, as mentioned previously. The *Leisure Coping Strategy Scale* had a high alpha coefficient of 0.818. In addition, the three dimensions of leisure as a coping strategy yielded alpha coefficients of 0.623, 0.645, and 0.821 respectively. Overall, *Ryff's Scale of Psychological Well-Being* had a very high alpha coefficient of 0.902. Subsequently, the six psychological well-being subscales ranged from an alpha coefficient of 0.445 (Environmental Mastery) to 0.795 (Self-Acceptance). The alpha coefficient for the Environmental Mastery subscale is relatively low (0.445) and would generally not be acceptable. However, it does not apply to this study as the total scale was used. Therefore, apart from this one subscale, moderate to high alpha coefficients (approximately 0.6 – 0.9) were found for all three of the scales and their subscales. This indicates that the data obtained in the present study may be considered reliable, and could be used for further analyses.

5.2.5. Pearson Product-Moment Correlation

5.2.5.1. The Relationship between Coping and Psychological Well-Being

The first research question addressing the relationship between coping strategies and adolescent psychological well-being was answered by running a Pearson product-moment correlation. The researcher aimed to determine what the relationship was between each of the three coping strategy subscales (as derived from the principal components analysis) and psychological well-being. The Pearson product-moment

correlation was used to determine the strength and direction of these three linear relationships.

Preliminary analyses showed the relationship to be linear with all of the variables normally distributed and with no outliers. The skewness and kurtosis values were as follows: Action-Oriented/ Approach Coping Strategies Subscale, skewness = -0.307, kurtosis = -0.125; Maladaptive/ Dysfunctional Coping Strategies Subscale, skewness = 0.540, kurtosis = -0.113; Acceptance/ Avoidance Coping Strategies Subscale, skewness = -0.167, kurtosis = -0.479; and Psychological Well-Being Total, skewness = -0.441, kurtosis = 0.269. These values are within the intervals for which normality is assumed (Field, 2013). Results indicated a statistically significant relationship between each of the three coping strategy subscales and psychological well-being amongst the sample of adolescent participants (Table 6). Due to the analysis involving multiple comparisons, the Bonferroni correction was also used. Therefore, the p -value (α) was divided by the number of comparisons that were being made (3). Thus, the new p -value was calculated as such, $\alpha(0.05 \div 3) = 0.017$. Each of the three correlations still yielded statistically significant results taking the new p -value into consideration. The results of the three correlations are displayed in Table 6.

Table 6
Pearson Correlations for Coping and Psychological Well-Being

	Psychological Well-Being Total	
Action-Oriented/ Approach Coping Strategies Subscale	Pearson Correlation	0.420**
	Sig. (2-tailed)	0.000
	<i>N</i>	228
Maladaptive/ Dysfunctional Coping Strategies Subscale	Pearson Correlation	-0.489**
	Sig. (2-tailed)	0.000
	<i>N</i>	228
Acceptance/ Avoidance Coping Strategies Subscale	Pearson Correlation	0.246**
	Sig. (2-tailed)	0.000
	<i>N</i>	228

** . Correlation is significant at the 0.01 level (2-tailed).

There was a moderate positive correlation between the action-oriented/ approach coping strategies and psychological well-being, $r_{226} = 0.420$, $p < 0.01$, where 226 represents the degrees of freedom, which is $N-2$. Therefore, an increase in the use of action-oriented/ approach coping strategies is associated with an increase in the level of psychological well-being amongst the sample of adolescents. Furthermore, action-oriented/ approach coping strategies statistically explained 17.64% ($r^2 = 0.1764$) of the variability in psychological well-being. Secondly, there was a moderate negative correlation between maladaptive / dysfunctional coping strategies and psychological well-being, $r_{226} = -0.489$, $p < 0.01$. This indicates that an increase in the use of these types of maladaptive/ dysfunctional coping strategies is associated with a decrease in the level of psychological well-being amongst the adolescent participants. The coefficient of determination for this correlation was found to be $r^2 = 0.2391$, suggesting that maladaptive/ dysfunctional coping strategies explained 23.91% of the variance in psychological well-being. Finally, there was a small positive correlation between acceptance/ avoidance coping strategies and psychological well-being amongst the sample of adolescents, $r_{226} = 0.246$, $p < 0.01$. Thus, an increase in the use of acceptance/ avoidance coping strategies is associated with an increase in the level of psychological well-being amongst the sample of adolescents. In addition, acceptance/ avoidance coping strategies statistically explained 6.05% ($r^2 = 0.0605$) of the variability in psychological well-being. Moreover, in order to interpret the results of the three correlations in terms of practical significance, Cohen's (1992) effect size criteria indicated that the results revealed a medium ($r = 0.3$) to large ($r = 0.5$) effect size.

Furthermore, a backward stepwise hierarchical multiple regression analysis was run in order to determine the percentage of variance explained in psychological well-being, firstly by all three coping strategy subscales combined. Secondly, each coping strategy category in turn was dropped from the model to determine the resultant reduction in R squared, and thus the unique variance explained by the particular coping strategy category (i.e. unique contribution of each of the coping strategies subscales). These results are displayed in Table 7.

Table 7

Contributions of Coping Strategies to R² with Psychological Well-Being as Criterion

Variables in equation	Variable omitted	R ²	Contribution to R ²	F	f ²
1. Malad+Acc+Action		0.468			
2. Malad+Acc	Action	0.303	1-2=0.165	69.163**	0.31
3. Malad+Action	Acc	0.458	1-3=0.010	4.192*	0.02
4. Acc+Action	Malad	0.188	1-4=0.280	117.368**	0.52

** $p \leq 0.01$; * $p \leq 0.05$

Key: *Malad* = Maladaptive/ Dysfunctional Coping Subscale; *Acc* = Acceptance/ Avoidance Coping Subscale; *Action* = Action-Oriented/ Approach Coping Subscale

It is evident from Table 7 that the three coping subscales collectively explained 46.8% ($R^2 = 0.468$) of the variance in adolescent psychological well-being. This calculated R^2 -value was significant at the 1% level ($F_{3;224} = 65.795$; $p = 0.000$). Furthermore, it is clear that the maladaptive/ dysfunctional coping strategy subscale uniquely contributed 28.0% (46.8% - 18.8%) of the variance in psychological well-being. This percentage was significant on the 1% level, ($F_{1;224} = 117.368$; $p \leq 0.01$), and the corresponding effect size ($f^2 = 0.52$) indicated that this result is of large practical importance. The action-oriented/ approach coping strategy subscale made a unique contribution of 16.5% (46.8% - 30.3%) to the variance in psychological wellbeing. This percentage was also significant on the 1% level, ($F_{1;224} = 69.163$; $p \leq 0.01$), and the corresponding effect size ($f^2 = 0.31$) indicated that this result is also of large practical importance. The results from Table 6 further show that the acceptance/ avoidance coping strategy subscale also made a statistically significant unique contribution (at the 5% level) to the variance explained in psychological wellbeing. However, the corresponding effect size of 0.02 indicated that this result is not of practical significance.

It is therefore evident that maladaptive/ dysfunctional coping strategies and action-oriented/ approach coping strategies are the two main contributors towards the psychological well-being of adolescents. Maladaptive/ dysfunctional coping strategies have a statistically significant negative contribution towards adolescent psychological well-being, whereas action-oriented/ approach coping strategies have a statistically

significant positive contribution towards adolescent psychological well-being in the current sample (see Table 6).

5.2.5.2. The Relationship between Leisure as a Coping Strategy and Psychological Well-Being

In order to answer the second research question and investigate if there was a significant relationship between leisure as a coping strategy and adolescent psychological well-being, an additional Pearson product-moment correlation was run. This analysis was used to determine the strength and direction of the abovementioned linear relationship. Preliminary analyses showed the relationship to be linear with both variables normally distributed (Leisure Coping: skewness = -0.437, kurtosis = 0.705; Psychological Well-Being Total: skewness = -0.441, kurtosis = 0.269), and there were no outliers. The skewness and kurtosis values were within the intervals prescribed for normality to still be assumed (Field, 2013).

Table 8

Pearson Correlation for Leisure as a Coping Strategy and Psychological Well-Being

		Psychological Well-Being Total
Leisure Coping Strategies Total	Pearson Correlation	0.351**
	Sig. (2-tailed)	0.000
N		228

** . Correlation is significant at the 0.01 level (2-tailed).

As can be seen from Table 8, there was a moderate positive correlation between leisure coping strategies and adolescent psychological well-being, $r_{226} = 0.351$, $p < 0.01$, where 226 represents the degrees of freedom, which is $N-2$. In addition, leisure coping strategies explained 12.32% ($r^2 = 0.1232$) of the variation in adolescent psychological well-being. Furthermore, this result indicates a medium ($r = 0.3$) effect size (Cohen, 1992).

5.2.6. Moderated Multiple Regression

5.2.6.1. Gender as a Moderator

In order to answer the third research question and investigate the role of gender in the relationship between coping strategies and adolescent psychological well-being, a moderated multiple regression was used in the analysis. In order to determine whether gender significantly moderated the relationship between coping (the predictor) and psychological well-being (the outcome), three different product terms were created for inclusion in the moderated multiple regression, one each for the interaction between gender and each of the three coping strategy subscales. Furthermore, to address the issue of multicollinearity that results from the creation of interaction terms and their inclusion in the analysis along with their individual components, as a precaution in the current study, all independent variables were centred around their respective means prior to the calculation of the product terms.

A moderated multiple regression was run to assess the increase in variation explained by the addition of interaction terms between the three coping strategies subscales and gender to a main effects model. The assumptions for linearity, multicollinearity and homoscedasticity were met. There was only one outlier in the data and two high leverage values. However, neither of the two high leverage values were also outliers. In addition, there were no highly influential cases in the dataset, with Cook's Distance values all smaller than 1. Since the one outlier was not due to a data entry error, it was decided to keep the data point in the analysis.

Table 9

Model Summary for Gender as a Moderator

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R ² Change	F Change	df1	df2	Sig. F Change	
1	0.687 ^a	0.472	0.462	20.23745	0.472	49.796	4	223	0.000	
2	0.693 ^b	0.480	0.464	20.20880	0.009	1.211	3	220	0.307	1.821

a. Predictors: (Constant), Acceptance_Avoidance_Subscale_Centred, Maladaptive_Dysfunctional_Subscale_Centred, Action_Approach_Subscale_Centred, Gender

b. Predictors: (Constant), Acceptance_Avoidance_Subscale_Centred, Maladaptive_Dysfunctional_Subscale_Centred, Action_Approach_Subscale_Centred, Gender, Action_Approach_CentredXGender, Maladaptive_Dysfunctional_CentredXGender, Acceptance_Avoidance_CentredXGender

The results indicated that the addition of the interaction terms did not statistically significantly add to the prediction of psychological well-being (See Table 9). Thus, gender did not moderate the effect of coping strategies on psychological well-being, as evidenced by an increase in total variation explained of only 0.9%, which was not statistically significant [R^2 change = 0.009; $F_{(3, 220)} = 1.211$, $p = 0,307$].

5.2.6.2. Leisure Engagement as a Moderator

A second moderated multiple regression was run to answer the fourth research question and assess whether leisure engagement, as assessed by leisure as a coping strategy, significantly moderates the relationship between coping strategies and psychological well-being amongst the sample of adolescents. In order to test the possible moderating influence of leisure as a coping strategy, three product terms were created between leisure as a coping strategy and each of the three coping strategy subscales. Again, to address the issue of multicollinearity that results from the creation of interaction terms and their inclusion in the analysis along with their individual components, all independent variables were centred around their respective means prior to the calculation of the product terms.

The assumptions were subsequently tested, and the assumptions for linearity, multicollinearity and homoscedasticity were met. There were a number of high leverage values; however, none of these were also outliers as there were none in the present dataset. There were also no Cook's Distance values greater than 1, and thus no highly influential cases. Since the high leverage values were not due to data entry errors, it was therefore decided not to exclude these data points from the analysis. The data was also found to be approximately normally distributed, as can be seen in the Normal P-P Plot represented in Figure 2.

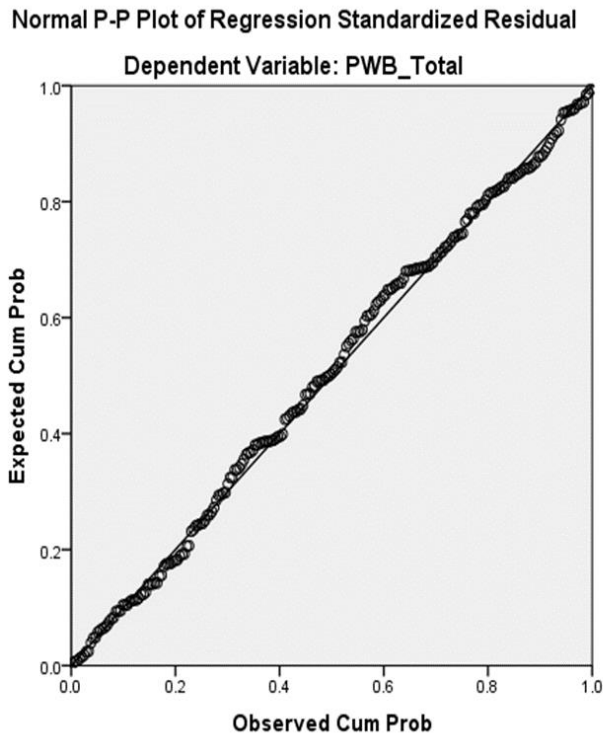


Figure 3. Normal P-P Plot of Regression Standardized Residuals

The subsequent results for the moderated multiple regression are represented in Table 10.

Table 10

Model Summary for Leisure Coping as a Moderator

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R ² Change	F Change	df1	df2	Sig. F Change	
1	0.723 ^a	0.522	0.514	19.24831	0.522	60.922	4	223	0.000	
2	0.726 ^b	0.527	0.512	19.27940	0.005	0.760	3	220	0.517	1.723
2.1	0.480 ^c	0.230	0.220	24.37609	0.001	0.313	1	224	0.576	1.853
2.2	0.614 ^d	0.377	0.368	21.93250	0.000	0.057	1	224	0.812	1.889
2.3	0.417 ^e	0.174	0.163	25.24708	0.014	3.665	1	224	0.057	1.879

a. Predictors: (Constant), Total_Leisure_Mean_centred, Maladaptive_Dysfunctional_Subscale_Centred, Acceptance_Avoidance_Subscale_Centred, Action_Approach_Subscale_Centred

b. Predictors: (Constant), Total_Leisure_Mean_centred, Maladaptive_Dysfunctional_Subscale_Centred, Acceptance_Avoidance_Subscale_Centred, Action_Approach_Subscale_Centred, Leisure_centredXMaladaptive_Dysfunctional_centred, Leisure_centredXAcceptance_Avoidance_centred, Leisure_centredXAction_Approach_centred

c. Predictors: (Constant), Action_Approach_Subscale_Centred, Total_Leisure_Mean_centred, Leisure_centredXAction_Approach_centred

d. Predictors: (Constant), Maladaptive_Dysfunctional_Subscale_Centred, Total_Leisure_Mean_centred, Leisure_centredXMaladaptive_Dysfunctional_centred

e. Predictors: (Constant), Acceptance_Avoidance_Subscale_Centred, Total_Leisure_Mean_centred, Leisure_centredXAcceptance_Avoidance_centred

From model 2, represented in Table 10, it can be seen that leisure as a coping strategy did not have a statistically significant moderator effect, as evidenced by the addition of the product terms not resulting in a significant increase in the variance explained in psychological well-being [R^2 change = 0.005; $F_{(3,220)} = 0.760$; $p = 0.517$]. This model represented the combination of all three coping strategy subscales.

In addition, the moderating effect of leisure as a coping strategy was analysed for each of the three coping strategy subscales individually. Firstly, model 2.1 indicates that leisure coping did not statistically significantly moderate the relationship between action-oriented/ approach coping strategies and psychological well-being [R^2 change = 0.001; $F_{(1,224)} = 0.313$; $p = 0.576$]. Secondly, model 2.2 indicates that leisure as a coping strategy did not have a statistically significant moderator effect in the relationship between maladaptive/ dysfunctional coping strategies and psychological well-being [R^2 change = 0.000; $F_{(1,224)} = 0.057$; $p = 0.812$]. For the final analysis, model 2.3 also showed that leisure as a coping strategy did not moderate the relationship between acceptance/ avoidance coping strategies and psychological well-being [R^2 change = 0.014; $F_{(1,224)} = 3.665$; $p = 0.057$].

5.3. Chapter Summary

The statistical findings for the current study have been presented in this chapter. Chapter 6 will include interpretations of these findings with a discussion of previous research results in comparison to the current results.

Chapter 6

Discussion

This chapter includes a discussion of the main findings of the study in relation to the theoretical framework utilised, as well as previous research findings in the field.

6.1. Introduction

The main aim of the study was to investigate the role that leisure engagement plays in the relationship between coping and psychological well-being amongst a sample of adolescents in the Northern Cape Province of South Africa. This aim was achieved by answering the four research questions as highlighted in chapter 4 (section 4.2). However, certain demographic, circumstantial, and contextual factors need to be considered when interpreting the results obtained from this study.

During adolescence, individuals are confronted with a series of developmental hurdles and challenges that need to be overcome in order to successfully progress to adulthood (Louw & Louw, 2010; Schwartz et al., 2013). Individuals within this developmental phase are also particularly susceptible to peer pressure, risky behaviour and psychological problems such as depression and anxiety (Gagné & Melancon, 2013; Hendricks et al., 2015; Pfeifer et al., 2011; Smith & Somhlaba, 2015; Thompon et al., 2013; Wegner, 2011). Furthermore, South Africa presents a unique context for adolescents to mature in, especially given that they are faced with various environmental stressors, social inequality, racial discrimination, a poor education system, and a lack of resources needed for optimal development (Brook et al., 2011; Fleetwood, 2012; Mattes, 2012; Smith & Somhlaba, 2015; van Rooyen et al., 2014). In addition, previous South African research has drawn associations between socio-economically disadvantaged communities and increased risky behaviour such as substance abuse (Brook et al., 2011; Cortina et al., 2016; Hendricks et al., 2015; Weybright et al., 2014). Adolescents living in rural, socio-economically disadvantaged areas of South Africa experience considerable adversity and are therefore particularly

vulnerable to increased stress, psychological problems, and maladaptive behaviours. Thus, the concerns present in this population group represent a salient need for interventions focusing on adaptive coping behaviours, particularly leisure participation.

6.2. Participation in Leisure Activities

The current findings indicated that the highest reported participation in leisure activities was found in the category of recreational/ relaxation leisure activities. This category included activities such as listening to music (90.79%), watching television or movies (86.40%), socialising with friends and family (82.02%), reading (63.16%), hobbies (45.61%), and meditation (21.49%).

Participation in these types of recreational/ relaxation pursuits provides individuals with the opportunity to engage in meaningful activities, interact with others in the community, and develop new skills and interests (Hood & Carruthers, 2016). Spending time with family is also an important source of socialisation for adolescents and contributes towards healthy adolescent development (Elkington & Gammon, 2013). Furthermore, participating in family leisure time promotes healthy relationships, and thus allows children and adolescents to experience trust and companionship amongst family members (Elkington & Gammon, 2013). For instance, previous research, conducted by Kim et al. (2016), investigated the types of leisure activities and their associations with acculturation among 434 Korean immigrants between the ages of 18 and 76. It was found that communal social leisure activities were important sources of social development and allowed individuals to form bonds, friendships, and networks with the people in their community. In addition, the results of their study indicated that engaging in social activities within one's community provides and encourages cross-cultural interaction, thus enhancing sensitivity and understanding amongst other cultures (Kim et al., 2016).

A large proportion of the current sample also reported participation in sporting activities such as exercise (57.46%), swimming (32.46%), soccer (32.46%), cricket (17.11%), and netball (15.35%). This finding is congruent with a previous Australian study which

found that children and youth spend most of their discretionary time playing organised sport outside of school hours (Goltz & Brown, 2014). Some of the most popular sport-related activities youth engage in included bike riding, skateboarding, football, swimming, netball, basketball, and dancing (Goltz & Brown, 2014).

Nevertheless, it has been reported that frequent engagement in leisure activities decreases over the years as adolescents become young adults (Hood & Carruthers, 2016; Shikako-Thomas et al., 2014). Furthermore, participation patterns may change with age and stage of development, although continuous participation throughout childhood and adolescence is important to ensure a healthy transition into adult life (Shikako-Thomas et al., 2014). Thus, frequent participation in leisure activities should be encouraged during and after adolescence in order for adolescents to continue to engage in leisure activities during adulthood.

6.3. The Relationship between Coping and Psychological Well-Being

In answer to the first research question, the relationship between coping strategies and adolescent psychological well-being was investigated within the current sample. However, before this relationship could be explored, a principal components analysis had to be conducted in order to reduce the large set of coping strategies in the *Brief COPE Scale* into smaller sets of coping strategy categories. The results from the principal components analysis suggested that three key coping dimensions are relevant to the current sample of adolescents. Two of the three obtained categories, namely action-oriented/ approach coping strategies, and acceptance/ avoidance coping strategies, appear to map quite clearly onto a typical problem-focused versus emotion-focused and approach versus avoidance categorisation prevalent in most research on stress and coping (Blomgren et al., 2016; Carver et al., 1989, Compas et al., 2012; Eschenbeck et al., 2012; Gagné & Melancon, 2013; Lazarus & Folkman, 1984; Moodley et al., 2012; Valiente et al., 2015).

In contrast, the obtained category of maladaptive/ dysfunctional coping strategies includes coping mechanisms such as behavioural disengagement, self-blame,

substance use, and denial. These types of coping strategies have previously been identified as less useful and more maladaptive in nature (Carver et al., 1989; Carver, 1997; Compas et al., 2012). This is based on the notion that these types of coping strategies have negative side effects and delay the individual from dealing with the actual stressor. Although deemed as maladaptive or dysfunctional, adolescents tend to use these types of coping strategies in an attempt to buffer against the common, normative stressors characteristic of daily life (Smith & Somhlaba, 2015). Previously, it has also been hypothesised that adolescents turn to more non-productive coping strategies when their attempts at adaptive coping are unsuccessful (Brook et al., 2011; Hoff et al., 2010; Frydenberg & Lewis, 2009; Thompson et al., 2013; Zeidner & Saklofske, 1996).

The current results revealed that these three categories of coping strategies are significantly associated with adolescent psychological well-being. All three of the comparisons yielded statistically significant results, indicating that there is a relationship between each of the three coping strategy categories and adolescent psychological well-being within the current sample. This finding was anticipated since links between coping and psychological well-being have been reliably observed in previous international and national research (Almquist et al., 2014; Bach & Guse, 2015; Cicognani, 2011; Cortina et al., 2016; Gustems-Carnicer & Calderón, 2013; Khumalo et al., 2012; Smith & Somhlaba, 2015).

Firstly, a statistically significant positive correlation was found between action-oriented/ approach coping strategies (planning, use of emotional support, use of instrumental support, religion, active coping, self-distraction, positive reframing) and psychological well-being. This finding is consistent with international studies which found positive correlations between these types of coping strategies and adolescent psychological well-being (Blomgren et al., 2016; Compas et al., 2012; Frydenberg & Lewis, 2009; Gagné & Melancon, 2013; Rodríguez-Naranjo & Caño, 2016). Thus, the current finding indicates that the use of action-oriented/ approach coping strategies is associated with higher levels of psychological well-being amongst adolescents.

Furthermore, this finding is of significant value since active or approach types of coping strategies have been linked to positive adaptation and fewer depressive symptoms in both local and international research (Ayres & Leaper, 2013; Cicognani, 2011; Gustems-Carnicer & Calderón, 2013; Mutumba et al., 2016; Pressman et al., 2009; Rodríguez-Naranjo & Caño, 2016; Smith & Somhlaba, 2015; Trainor et al., 2010; Vogt Yuan, 2010). However, a major concern during adolescence is depression and suicidal behaviour due to adolescents facing various developmental challenges, academic and social stress, as well as peer and family relationship difficulties. South African adolescents are also challenged by additional stresses such as economic deprivation, poverty, high crime rates, and the HIV pandemic (Brook et al., 2011; Christie, 2010; Fleetwood, 2012; Mattes, 2012; Smith & Somhlaba, 2015; van Rooyen et al., 2014). Thus, the current finding suggests that these types of coping strategies could be beneficial for South African adolescents who are grappling with daily as well as more acute and chronic stressors.

Secondly, the current study also found a statistically significant positive correlation between acceptance/ avoidance coping strategies (humour, acceptance, positive reframing) and psychological well-being. This finding is in line with the results of a cross-sectional survey of 206 South African student athletes, where the avoidance coping strategy was reportedly used more frequently than approach coping strategies for managing stress (Dhurup & Dubihlela, 2014). Similarly, in a recent South African study conducted with adolescents, the researchers reported that avoidance coping can be related to better adjustment, specifically with regards to fewer depressive symptoms and higher social and adaptive functioning (Smith & Somhlaba, 2015). Although avoidance coping strategies have often been assumed to be related to more dysfunctional outcomes and are closely related to the arguably less useful, maladaptive coping strategies (Blomgren et al., 2016; Carver et al., 1989; Compas et al., 2012), these types of coping strategies could also be beneficial and contribute towards higher levels of psychological well-being, as indicated in the current study.

For instance, Smith and Somhlaba (2015) primarily found a positive correlation between daily hassles and avoidant coping amongst South African adolescents,

indicating that an increase in daily hassles was related to the increased use of avoidant coping strategies in their sample of adolescents. Furthermore, while the South African socio-cultural and political environment may present unique challenges for adolescents which threaten their development and well-being, they are still confronted by a range of ordinary, everyday stressors while carrying out their daily activities at home, in school, and in the communities in which they live (Bray et al., 2010; Fleetwood, 2012; Hendricks et al., 2015). Thus, the current finding suggests that acceptance/ avoidance coping strategies could positively contribute towards higher levels of psychological well-being amongst South African adolescents. This is an indication that these coping strategies may serve as a buffer against the common, normative stressors characteristic of adolescents' daily lives. These types of coping strategies may also be an adaptive means for adolescents when facing minor life stressors which do not require more active coping responses in order to facilitate positive outcomes. It is therefore argued that no single coping strategy is always preferable nor should be avoided; instead, the effectiveness of a particular coping strategy depends on the particular stressful context.

For the final comparison between maladaptive/ dysfunctional coping strategies and psychological well-being, a statistically significant negative correlation was found amongst the current sample of adolescent participants. The literature suggested that this finding was expected, since these types of coping strategies (which include behavioural disengagement, self-blame, substance use, denial, and venting) are presumed to exacerbate the effects of stress on psychological well-being. Therefore, the current finding is congruent with previous international and local research which reports that more frequent use of maladaptive coping strategies has been linked to poorer adaptation, higher levels of depressive symptoms, psychological distress, and subsequently lower levels of psychological well-being (Compas et al., 2012; Gustems-Carnicer & Calderón, 2013; Knowles, Cook, & Tribbick, 2013).

In their review of children and adolescents coping with chronic illnesses, Compas and colleagues (2012) specifically identified the use of behavioural disengagement as generally related to poorer adjustment. In addition, research conducted with 98

Spanish undergraduates indicated that behavioural disengagement and emotional discharge (venting) were associated with lower levels of psychological well-being (Gustems-Carnicer & Calderón, 2013). Similar results were found in an Australian study conducted with 83 adults when investigating the relationship between health status, illness perceptions, coping strategies, and psychological morbidity (Knowles et al., 2013). Findings indicated that maladaptive coping strategies, which included the use of alcohol, focusing on and venting of emotions, behavioural disengagement, and mental disengagement, were associated with increased anxiety and depressive symptoms (Knowles et al., 2013).

To summarise, it can be said that various types of coping strategies have either a positive or negative association with psychological well-being amongst the adolescent participants of this study. Adolescents utilise a combination of coping strategies and these may be differentially effective under different conditions and in response to different stressors. However, the coping strategies that promote increases in levels of psychological well-being need to be emphasised and facilitated in school-based interventions in order to decrease the use of coping strategies that tend to be associated with lower levels of psychological well-being.

6.4. The Relationship between Leisure as a Coping Strategy and Psychological Well-Being

In accordance with the second research question of the current study, a statistically significant positive correlation was found between leisure as a coping strategy and adolescent psychological well-being. This research question was based on the assumptions of previous research which proposes that leisure may serve as a coping strategy by buffering the impact of negative life events through distraction, generating optimism, and enabling individuals to preserve a sense of self (Denovan & Macaskill, 2016; Hutchinson et al., 2003; Iwasaki et al., 2014). The current significant result was anticipated since there is a vast amount of international and national research that attributes higher levels of psychological well-being to leisure engagement (Badia et al., 2013; Bantjes et al., 2015; McClelland & Giles, 2016; Nolan & Surujlal, 2011; Shikako-Thomas et al., 2014; Surujlal et al., 2013; Trainor et al., 2010; Wegner et al.

2014; Zawadzki et al., 2015). Thus, this positive linear relationship indicates that the use of leisure activities as a coping strategy, be it deliberate or unconscious, has a positive effect on adolescent psychological well-being.

Specifically, engagement in physically active leisure activities has frequently been reported as a promotor of increased levels of psychological well-being (Badia et al., 2013; Nolan & Surujlal, 2011; Shikako-Thomas et al., 2014; Surujlal et al., 2013). Within the current sample, 57.46% of adolescents reported that they participate in some form of physical exercise. Therefore, the positive relationship found between leisure engagement and higher levels of psychological well-being is not surprising. Consistent with past research (Nolan & Surujlal, 2011; Shikako-Thomas et al., 2014; Surujlal et al., 2013), the current results also indicate that participation in structured exercise and physical leisure activities could play an important role in contributing towards individuals' overall satisfaction with life and increased levels of psychological well-being.

However, physically active or structured sporting activities are not the only forms of leisure engagement that contributes towards higher levels of psychological well-being. Previous research has also found unstructured activities, such as dedicated hobbies and unstructured sports, to afford many positive initiative- and identity-building experiences (Müller et al., 2013; Sharp et al., 2015). In addition, various researchers (Bradley & Inglis, 2012; Caldwell & Witt, 2011; Müller et al., 2013; Sharp et al., 2015) have argued that recreational/ relaxation time is important for healthy development and self-expression. Although unstructured leisure activities such as socialising with friends have previously been associated with negative outcomes (Hendricks et al., 2015; Hoff et al., 2010; Pfeifer et al., 2011; Wegner, 2011), Caldwell and Witt (2011) indicate that this type of participation could be important for healthy development, especially when the activities are considered more broadly (for example, going for a hike with friends) or when these activities are viewed as self-managed or family-based activities.

Positive psychology also highlights the study of leisure and active living as positive contributors towards the overall flow and well-being of individuals (Kleiber et al., 2014; Seligman & Csikszentmihalyi, 2000; Seligman et al., 2005). Previous research, conducted by Badia and colleagues (2013), has shown that participation in leisure activities has a positive effect on self-perception, could promote emotional and social quality of life, and may contribute to happiness and enjoyment. In addition, previous research indicates that participation in various leisure pursuits, such as informal leisure engagements, recreational activities, active physical activities, as well as social and skill-based activities, contributes towards higher levels of life satisfaction, including a sense of competence (Badia et al., 2013; McClelland & Giles, 2016). These findings support the principles underlying Csikszentmihalyi's construct of flow, which refers to the mental state of operation in which an individual performing an activity is fully immersed in a feeling of energised focus, full involvement, and enjoyment in the process of the activity (Csikszentmihalyi & LeFevre, 1989). In essence, flow is characterised by complete absorption in what one does. Furthermore, Kleiber and colleagues (2014) have proposed that participation in any of the various types of leisure activities could be positively associated with experiences of flow and well-being.

In sum, the underlying psychological mechanisms (such as coping, flow, and well-being) that are activated during leisure engagement are critically important in understanding the nature of psychological well-being within leisure engagement. Therefore, leisure engagement can be regarded as a promoter of health and well-being, particularly amongst adolescents. Furthermore, the current findings underscore the importance of leisure engagement and provide further evidence that positive leisure experiences and specific types of leisure activity not only help individuals cope with various stressors, but also facilitate psychological well-being.

6.5. The Role of Gender in the Relationship between Coping and Psychological Well-Being

The third research question in the current study aimed to examine whether gender would moderate the relationship between coping strategies used by adolescents and

their subsequent levels of psychological well-being. The current results revealed that gender did not have a statistically significant moderator effect in the relationship between coping and adolescent psychological well-being. This finding is inconsistent with previous research where gender has frequently been found to be one of the most prominent moderators of coping (Calvete et al., 2011; Huan et al., 2012; Perry & Pauletti, 2011; Persike & Seiffge-Krenke, 2016; Rodríguez-Naranjo & Caño, 2016).

Although this finding contradicts previous assumptions regarding gender being a moderator in the relationship between coping and psychological well-being, it is not entirely surprising. Past research on gender differences with regards to coping and psychological well-being have been largely inconsistent. For example, in a study conducted with 1791 Asian adolescents, males and females did not differ in their use of problem-solving coping strategies (Huan et al., 2012). In addition, a South African study sought to ascertain gender differences amongst university students in relation to stress and coping mechanisms, yet no significant differences were found in the results (Dhurup & Dubihleba, 2014).

Research on gender differences in adolescent psychological well-being within the South African context is also inconclusive. Inconsistent findings have been previously reported as studies have found gender to not be significantly correlated with psychological well-being. Research conducted by Khumalo and colleagues (2012) is one such example. Their findings indicated that gender was not significantly associated with psychological well-being amongst Setswana-speaking individuals from rural and urban areas in the North West Province of South Africa (Khumalo et al., 2012).

A possible explanation for why gender did not moderate the relationship between coping and psychological well-being in the current study may be as a result of the homogeneous nature of the sample. The participants were all secondary school pupils between the ages of 14 and 19. Adolescents in this age group are under a considerable amount of pressure to perform well academically (Romero et al., 2014).

Thus, regardless of gender, adolescents in this age group may be more concerned about academic performance and therefore prefer to solve problems quickly and simply in order to concentrate on school and academic activities.

6.6. The Role of Leisure Engagement in the Relationship between Coping and Psychological Well-Being

The final research question in the current study aimed to determine if leisure engagement, as assessed by leisure coping strategies, significantly moderates the relationship between coping and psychological well-being amongst adolescents. The motivation for this research question was based on the notion that leisure engagement may be beneficial in buffering against or moderating the detrimental impact of stress on physical and mental health (Denovan & Macaskill, 2016; Iwasaki, 2003; Iwasaki et al., 2014). Therefore, the role of leisure engagement was investigated within the relationships between each of the three coping strategy categories and adolescent psychological well-being.

The current research results revealed that leisure as a coping strategy did not have a statistically significant moderator effect. This was true for the relationship between psychological well-being and all three coping strategy categories together as a whole, as well as individually. This was not the expected result as theory proposes that engaging in leisure activities can either enhance positive emotions or reduce negative emotions when individuals are faced with stress (Iwasaki & Mannell, 2000; Iwasaki, 2006). Furthermore, researchers have suggested that leisure engagement may help individuals to relax temporarily, contribute to positive energy, or reduce fatigue, which in turn may enhance their levels of psychological well-being (Iwasaki, 2002; Iwasaki & Mannell, 2000; Newman et al., 2014; Tsaur & Tang, 2012).

Although leisure engagement has been found to display a moderating effect in past research (Denovan & Macaskill, 2016; Tsaur & Tang, 2012; Zawadzki et al., 2015), leisure coping strategies may not always have direct and positive effects on health and well-being. For instance, Tsaur and Tang (2012) found that planned-breather

leisure coping strategies were positively associated with psychological well-being amongst a sample of Taiwanese women, whereas avoidant leisure coping strategies had a negative effect on psychological well-being. The researchers concluded that planned-breather leisure coping strategies played a buffering role, while avoidant leisure coping strategies played an amplifying role (Tsaur & Tang, 2012). These findings indicate that some types of leisure coping strategies may moderate the relationship between coping and psychological well-being, while others may not. Furthermore, the abovementioned findings could serve as a possible explanation for the current insignificant result.

Another possible explanation for the insignificant result could be due to the utilisation and analysis of the *Leisure Coping Strategy Scale*. The results from this measuring instrument were assessed as a whole, using the total scale score. Therefore, the different types of leisure coping strategies, as assessed by the three subscales (*leisure companionship*, *leisure palliative coping*, and *leisure mood enhancement*), were not analysed. As a result, it is not possible to determine which leisure coping strategies contributed towards the current insignificant result. Thus, as different coping strategies have different effects, it is plausible that although various types of leisure coping strategies may buffer the effects of stress on coping and psychological well-being, other types may amplify the negative effect of stress and result in lower levels of psychological well-being. Even though leisure activities can provide a way of replenishing energy (Iwasaki, 2006), spending too much time on certain leisure activities could also be seen as a way of avoiding the completion of tasks or goals and may impede the stress regulation process (Tsaur & Tang, 2012). Therefore, an individual may be less likely to effectively cope with stress.

Furthermore, participants' perception of leisure activities may serve as an additional explanation for the current unexpected finding. Key authors in the field of leisure studies have acknowledged that unique characteristics and requirements of stressful circumstances may influence individual reactions (Iwasaki & Mannell, 2000). Thus, the individual will either consciously or unconsciously use certain leisure coping strategies in response to the specific circumstances (Iwasaki & Mannell, 2000).

However, the current participants may be participating in leisure activities primarily for enjoyment, recreation, or to keep fit. They may not be aware of the psychological benefits of leisure engagement and therefore might not perceive leisure engagement as a beneficial coping strategy.

This assumption may be due to the developmental life stage that the South African adolescents find themselves in. The majority of participants fall within the age category of mid-adolescence (14 to 16 years). During this stage of development, adolescents' metacognition is not yet fully developed (Louw & Louw, 2010; Sigelman & Rider, 2010; Simmonds et al., 2015). This means that adolescents might not be fully aware of and understand their thought processes and actions (Berk & Meyers, 2015; Louw & Louw, 2010). Therefore, the current sample of adolescents may struggle to adequately value their coping strategies and subsequently underestimate the psychological benefits thereof.

6.7. Chapter Summary

This chapter included a discussion and interpretation of the statistical results of the current study. The discussion aimed to address the four research questions by highlighting similarities and discrepancies with previous research, and providing possible explanations for contradictory findings. The following chapter will provide an outline of the limitations of the current study. It will also include recommendations for future research and practice.

Chapter 7

Limitations, Future Recommendations, and Conclusion

The key findings of the current study are presented in this chapter. Thereafter, the limitations of the present study are documented and this is followed by recommendations for future research and practice. The chapter concludes with the theoretical and practical value of the current study.

7.1. Summary of Key Findings

The purpose of the current study was to further our understanding of the role of leisure in coping and psychological well-being amongst school-going adolescents in the Northern Cape Province of South Africa. This was achieved by focussing on the contributions of leisure engagement, particularly leisure coping strategies, to adolescent development, coping with stress, and psychological well-being. Thus, the primary aim of this study was to investigate whether leisure engagement, as assessed by leisure as a coping strategy, played a role in the relationship between coping and adolescent psychological well-being within the South African context.

Since adolescents constitute a large proportion of the South African population (Statistics South Africa, 2015) and are a particularly vulnerable group (World Health Organisation, 2014), the adolescent years may be seen as a critical period of analysis and intervention. It is thus crucial to enhance our understanding of the present mental health state of South Africans, in particular adolescents, and contribute towards our knowledge about this issue, especially given the legacy of apartheid, which has been psychologically and sociologically devastating to South Africa and its citizens (Bach & Guse, 2015; Khumalo et al., 2012; Theron & Theron, 2010). As a result of the vast amounts of stressors that South African adolescents encounter daily, it was necessary to explore whether these adolescents might benefit from engaging in leisure activities which could aid in coping as well as promote their psychological well-being.

Thus, in light of this study's theoretical background and rationale, the current results revealed that individuals who tend to use more action-oriented/ approach coping strategies, and acceptance/ avoidance coping strategies experience significantly higher levels of psychological well-being. In contrast, those who reported more frequent use of maladaptive/ dysfunctional coping strategies subsequently had lower levels of psychological well-being. These results demonstrate that the coping strategies employed by adolescents in dealing with everyday life stressors may buffer or exacerbate the effects of stress on psychological well-being. The coping strategies that positively contribute towards higher levels of psychological well-being should be highlighted so that adolescents can make conscious efforts to utilise these types of coping strategies rather than utilising maladaptive types of coping strategies.

Furthermore, the aforementioned coping strategies constitute the typical coping strategies found in positive psychology literature (Carver et al., 1989; Carver, 1997; Lazarus & Folkman, 1984; Zeidner & Saklofske, 1996). Leisure engagement, however, does not form part of these typical coping strategies. Despite leisure coping strategies having received an increasing amount of attention in past research (Ebscohost search, 12 November 2016), there is a paucity of research regarding the use of leisure as a coping strategy within the South African adolescent population. The current study therefore also aimed to explore the relationship between leisure as a coping strategy and adolescent psychological well-being.

Subsequently, leisure as a coping strategy was found to have a statistically significant positive relationship with psychological well-being amongst the sample of adolescents from the Northern Cape Province of South Africa. This finding indicates that the use of leisure activities as a coping strategy buffers the harmful effects of stress and contributes towards higher levels of psychological well-being. Furthermore, the current finding is in line with previous research that has found leisure engagement to be positively associated with increased levels of self-esteem (McClelland & Giles, 2016), better abilities to cope with stress (Denovan & Macaskill, 2016; Iwasaki et al., 2014), and higher levels of both physical and psychological well-being (Badia et al., 2013; Shikako-Thomas et al., 2014).

Despite these significant findings, the current study also revealed insignificant results. Neither gender, nor leisure engagement were found to be statistically significant moderators in the relationship between coping strategies and adolescent psychological well-being. Although these findings counteract previous research which highlights the moderating effects of gender and leisure engagement, the insignificant results are not entirely surprising. Previous research in the field of psychology and leisure studies have been largely inconsistent. Therefore, the gaps in research with regards to the moderating roles of gender and leisure engagement need to be further investigated.

Essentially, the results of this study confirm the theoretical assumptions made earlier that coping during adolescence could be associated with higher levels of psychological well-being. In turn, this might lead to reduced stress and less psychological problems amongst South African adolescents. In addition, the current findings underscore the importance of leisure engagement and provide further evidence that positive leisure experiences and specific types of leisure activities not only help individuals to cope with various stresses, but also facilitate psychological well-being. Furthermore, these findings highlight the importance of examining coping, leisure, and psychological well-being as multidimensional constructs within the South African context. Finally, the current results also help to explain some of the mixed findings prevalent in previous research.

7.2. Limitations of the Study

The results of this study should be understood in terms of certain methodological and theoretical limitations. There are several methodological limitations that need to be considered. Firstly, a quantitative, cross-sectional research design was used to explore the variables of coping, leisure engagement, and psychological well-being amongst a sample of South African adolescents. Utilising a quantitative research design does not provide the researcher with an in-depth understanding of the aforementioned variables and could thus be a possible limitation. In addition, the results of this study are only an indication of the coping abilities and psychological well-being of the adolescent participants at the specific time the study was conducted,

since a cross-sectional design was used. Consequently, a cross-sectional design does not allow researchers to draw any conclusions on causal relationships.

Secondly, the study made use of a non-probability, convenience sampling method. A limitation in using this method is that the results of this study cannot be generalised to the general population of South Africa. Therefore, it cannot be concluded that the significant results found in the current study can be generalised to the larger population of interest. In addition, although ethnicity was included as a variable in the demographics section, cultural comparisons could not be undertaken in the study since the frequency distribution indicated that the majority of the participants belong to one ethnic group, namely, black South Africans. Thus, the current sample does not reflect a multicultural representation of all ethnic groups in South Africa.

A third limitation of the current study is that self-report questionnaires were administered to measure the relevant variables. Self-report measures could be problematic as researchers are not guaranteed that participants have the desire to respond accurately or honestly to the questions posed (Stangor, 2015). This results in the risk of social desirability bias where the respondents react in socially desirable or acceptable manners (Foxcott & Roodt, 2013). The respondents thereby wish to create a favourable impression of themselves (Foxcott & Roodt, 2013). This could result in the self-report questionnaires not portraying an accurate description of the participants' coping abilities, use of leisure as a coping strategy, and levels of psychological well-being.

A fourth limitation includes the possible lack of understanding of the constructs presented in the questionnaires. Due to the diverse nature of the construct of leisure, it is possible that the participants did not understand the concept of leisure and may not have found it personally relevant. This became evident during the data collection process as participants frequently asked for further explanations of leisure engagement as well as examples. Therefore, the construct of leisure and the use of leisure as a coping strategy may have been interpreted as foreign constructs to these

adolescents. As a result, the participants might not have fully understood, and accurately responded to the questions posed in the *Leisure Coping Strategy Scale*.

Furthermore, at the time of the study, no formal leisure engagement questionnaire probing the advantages and/or disadvantages of participating in leisure activities was available for the South African population. The researcher therefore included questions regarding four categories of leisure participation, namely sporting activities, cultural activities, recreational/ relaxation activities, and outdoor activities, as part of the biographical questionnaire, in order to determine which leisure activities the sample of adolescents most frequently participate in. Although some examples of the types of leisure activities were listed in the questionnaire, they were still subject to the individuals' interpretations. For example, some adolescents might consider a form of dance to be a sport, while others might view it as a cultural activity. Thus, different interpretations of leisure activities could be ascribed to the adolescents' cultural differences. While the researcher categorised the types of leisure activities based on the definitions in previous literature, due to personal experiences, some typology might not adhere strictly to one particular category.

A fifth limitation is that the questionnaires were only administered in English since it is the official language of communication of the Northern Cape Department of Education. Although 37.89% of the adolescent participants indicated English as their home language, a further 35.68% selected Setswana as their home language. An additional 11.45% of the participants reported that Afrikaans was their home language. During the data collection process, there were several participants requesting clarifications of specific terms as well as whole questions in the questionnaires. This could have led to possible misunderstandings in completion of the questionnaires, due to some of the participants not understanding all of the broad psychological concepts and terminology.

As a final methodological consideration, a limitation of the statistical analysis process arose while conducting a moderated multiple regression in order to answer the fourth

research question, namely: “Does leisure engagement play a role in the relationship between coping and adolescent psychological well-being?”. While testing the assumptions for this analysis, a number of high leverage points were present in the dataset. However, none of these high leverage points were also outliers and therefore, it was decided to keep the cases in the dataset.

Ryff’s model of psychological well-being served as the theoretical framework for the current study. As a theoretical limitation of the current study, previous criticisms of Ryff’s model should be considered. Although this model has received much praise for its sound theoretical basis, empirical evidence, adaptability to different languages and cultures, and its established success within the South African context (Bach & Guse, 2015; Daraei, 2013; Kumar, 2014; Li et al., 2015; Ryff & Keyes, 1995; van Schalkwyk & Wissing, 2010), it is not without limitations. Despite the popularity of Ryff’s conceptualisation of the construct of psychological well-being with its six key dimensions, the construct of psychological well-being which focusses on positive psychological functioning continues to generate debates regarding its meaning, dimensions, and measurement (Abbott, Ploubidis, Huppert, Kuh, & Croudace, 2010; Dagenais-Desmarais & Savoie, 2012; Disabato, Goodman, Kashdan, Short, & Jarden, 2016; Mehrotra, Tripathi, & Banu, 2013).

As a first concern, Mehrotra and colleagues (2013) acknowledged that the nature and number of dimensions of psychological well-being across different cultures may not fully correspond to Ryff’s model. Although the construct of psychological well-being is an extremely appealing variable in psychological research, its meaningful utilisation in research and practice is hampered due to unresolved issues regarding its conceptualisation and measurement (Mehrotra et al., 2013). In a review of the existing literature on psychological well-being, Dagenais-Desmarais and Savoie (2012) identified 23 different operationalisations of psychological well-being. However, Ryff’s conceptualisation is rooted primarily in the ideas of western personality theorists and therefore the extent to which such a conceptualisation may be universally appropriate is an issue worthy of serious consideration. Researchers have highlighted the

possibility that the six dimensional model's interpretations and relevance are likely to vary across cultures (Mehrotra et al., 2013).

In addition, notwithstanding the popularity of Ryff's six dimensional model of psychological wellbeing, results from empirical studies have been inconsistent. The psychological well-being measures based on Ryff's model have not revealed consistent factor structures. For instance, in a longitudinal study conducted with 1778 individuals residing in England, Scotland and Wales, researchers discovered that the items in Ryff's scales of psychological well-being cross-loaded on more than one factor (Abbott et al., 2010). In other words, their results revealed that there were overlaps between the six dimensions of psychological well-being. These researchers concluded that there could be less than six dimensions underpinning psychological well-being (Abbott et al., 2010).

Furthermore, in an analysis of the main research methods used to conceptualise psychological well-being, Dagenais-Desmarais and Savoie (2012) found that previous conceptualisations are largely based on a deductive approach in which a theoretical approach is more or less explicitly defined by the research and then applied to the construct measurement. This "top-down" approach, in which a phenomenon is studied from the general to the specific, may have overlooked some components of psychological well-being (Dagenais-Desmarais & Savoie, 2012). They therefore suggested that inferring a conceptual model using a "bottom-up" approach, which begins from the experience of the individuals, would bring a unique contribution to the conceptualisation of psychological well-being (Dagenais-Desmarais & Savoie, 2012).

These concerns indicate that there is a need for more qualitative methods of inquiry to develop in-depth, culturally rooted understandings of dimensions of psychological well-being (Mehrotra et al., 2013). Qualitative approaches may perhaps be most appropriate for developing a richer understanding of what constitutes psychological well-being within specific cultures. Thus, a more qualitative approach could pave the

way for the development or refinement of contextually appropriate assessment tools as well as cross-cultural comparisons (Mehrota et al., 2013).

As a final consideration, Ryff (1989) criticised previous models of well-being which relied too heavily on hedonic (the experience of positive emotional states and satisfaction of desires) perspectives. Ryff's model of psychological well-being was conceptualised from a eudaimonic viewpoint which focuses on meaning and self-realisation and defines well-being in terms of the degree to which a person is fully functioning (Ryff, 1989). However, it has been suggested that hedonia and eudaimonia represent one overarching well-being construct (Disabato et al., 2016). With a sample of 7617 American adolescents and adults, researchers aimed to investigate whether hedonia and eudaimonia form part of one overarching well-being construct or two related dimensions (Disabato et al., 2016). When compared with known correlates of well-being, such as curiosity and gratitude, the two perspectives indicated very similar relationships and thus displayed little evidence of discriminant validity. Subsequently, Disabato and colleagues (2016) concluded that conceptualising hedonia and eudaimonia as one higher order factor with multiple lower order constructs may be more appropriate than treating them as distinct constructs.

Irrespective of the abovementioned limitations, it is envisaged that the outcomes of the present research could still provide a better understanding of adolescent psychological well-being within the South African context. Therefore, the way forward is filled with rich possibilities.

7.3. Recommendations

The research findings of this study indicate that further research in terms of leisure coping strategies and adolescent psychological well-being in the South African context needs to be conducted. Variations were reported between the results of the present study and results reflected in western literature as well as previous South African studies. Therefore, particular recommendations for future research can be made.

Firstly, the use of mixed methods approaches (including qualitative research methods) in future studies could provide a better understanding of adolescents' experiences of leisure engagement and their perceived coping abilities and psychological well-being. Qualitative approaches to inquiry, such as structured interviews and focus groups, could assist participants in portraying their experiences (Gravetter & Forzano, 2016). This would allow the investigation of the affective component of coping, leisure engagement, and psychological well-being, which would yield a broader picture of these constructs within the South African context.

Secondly, a longitudinal research design could be valuable for assessing psychological constructs at a specific period, and also for determining the long-term effects of these variables on individual development in later life (Gravetter & Forzano, 2016). Previous research has seen an overreliance on cross-sectional, correlational designs. Therefore, longitudinal and daily diary studies could help determine the extent to which individuals remain stable in their use of certain coping strategies across time and situations, and to better understand how contextual factors interact with coping styles in order to predict psychological well-being.

Furthermore, the sample in the study could have been more heterogeneous regarding race/ ethnicity, language, and socio-economic status. Thus, a third recommendation for future studies is that samples need to be more representative of South African demographics. Stratified sampling methods could be used to provide a better representation of the South African population, as opposed to non-probability convenience sampling methods. In addition, future studies involving adolescents from different cultures and comparing their lived experiences related to coping, leisure engagement, and psychological well-being, could further aid the understanding of South African adolescents.

Moreover, the adolescent population has also been subdivided into three developmental groups, namely early adolescence (11-12 to 14 years), mid-adolescence (14 to 16 years) and late adolescence (16 to 19 years), each with its own

developmental tasks (Berk & Meyers, 2015; Craig & Dunn, 2013; Louw & Louw, 2010). It is recommended that future studies take into account the nuances and impact of these developmental stages. Age, along with other factors such as socio-economic status and culture, may also moderate the impact of coping strategies on psychological well-being amongst adolescents. Therefore, in addition to gender, these demographic factors should also be investigated in future research.

Questionnaires utilised in future research should also be made available in all relevant languages, and not only English. Even though participants were enrolled at English-medium schools, they may have preferred and felt more comfortable answering questionnaires of a sensitive nature in their home language. This could also help resolve future terminology misinterpretations that may arise when participants read and respond to material that is not written in their first language.

Furthermore, a number of directions for future studies are warranted. For instance, future research is needed to examine the extent to which the use of specific coping styles, for instance leisure, is effective in reducing stress intensity. It can be recommended that future research explores the moderating role of leisure as a coping strategy in the relationship between stress and adolescent psychological well-being. This may provide more appropriate information on how leisure could act as a buffer against the negative effects of stress on psychological well-being. A further suggestion is that researchers could make use of the three subscales of the *Leisure Coping Strategy Scale*. This would allow for a better understanding of which different types of leisure coping strategies contribute towards higher or lower levels of psychological well-being amongst adolescents.

Another important direction for future research would be the development and evaluation of leisure-based interventions to enhance adolescents' abilities to cope with daily stress as well as more acute and chronic stressors. Even though the current findings did not reveal gender to be a significant moderator in the relationship between coping and adolescent psychological well-being, further studies are needed to

replicate and expand on the current findings regarding the role of gender. This is especially necessary since previous research (Calvete et al., 2011; Huan et al., 2012; Perry & Pauletti, 2011; Persike & Seiffge-Krenke, 2016; Rodríguez-Naranjo & Caño, 2016) suggests that male and female adolescents may not equally benefit from leisure-based interventions. Thus, interventions should be more gender specific.

7.4. Conclusion

This study endeavoured to supplement existing research in positive psychology by aiming to demonstrate the specific representation of the constructs of coping, leisure, and psychological well-being in the lives of the South African adolescent population. For this purpose, these positive psychology constructs were measured amongst a sample of South African adolescents.

The aim of this study was to investigate whether leisure engagement moderates the relationship between coping and psychological well-being amongst a sample of adolescents in the Northern Cape Province of South Africa. The study confirmed statistically significant relationships between three coping strategy categories and adolescent psychological well-being, as well as between leisure as a coping strategy and adolescent psychological well-being. Gender, and leisure engagement, however, were not found to be moderators in the relationship between coping and adolescent psychological well-being.

Despite the limitations that have been highlighted, this study demonstrates several strengths. The study included a relatively large sample of adolescents ($N = 228$), employed psychometrically sound measures, and applied statistical procedures that allowed for the examination of correlations and moderating effects amongst the variables under study. Moreover, the findings in this study provided further evidence that positive leisure experiences and specific types of leisure activity not only help individuals cope with various stressors, but also facilitate psychological well-being.

The current study also addresses various gaps in the research base. Firstly, it paid due attention to the adolescent population in South Africa. As mentioned earlier, adolescents are considered as a vulnerable population group and a critical life stage for analysis and intervention (World Health Organisation, 2014). Secondly, this study contributes to the limited knowledge available regarding leisure engagement as a positive psychology construct within the discipline of social sciences, and psychology specifically. The current results thus add to the body of research that explores the positive relationship between leisure engagement, specifically leisure coping strategies, and adolescent psychological well-being. Finally, the results may be used to improve understandings of the manifestation of enhanced coping abilities and higher levels of psychological well-being amongst adolescents in the South African context.

In this regard, the results of this study indicate that leisure engagement should be encouraged and facilitated amongst adolescents in order to improve their ability to cope with daily hassles and ultimately contribute towards higher levels of psychological well-being. Subsequently, results from the current study could inform practice with regards to optimising the use of leisure as a coping strategy amongst South African adolescents. In addition to its conceptual contribution, this study has significant implications for intervention with regards to psychological health amongst South African adolescents. Thus, the outcomes of the current study could pave the way for future research on leisure-based interventions that will equip the South African adolescent population with coping strategies with a view of enhancing their levels of psychological well-being.

In summary, this study has emphasised the importance of participation in leisure activities on improving the psychological well-being of South African adolescents. The results of this study allowed some insights into the relationships between various coping strategies, including leisure as a coping strategy, and psychological well-being. Since there is ambivalent knowledge on these relationships thus far, additional research with different samples and more precise contextual measurements is needed. In addition, a closer examination of the assumed causal pathways could help

to unravel the distinct mechanisms linking leisure engagement with enhanced levels of psychological well-being. Leisure engagement thus has the potential to be an important context for promoting adolescent developmental outcomes. Therefore, longitudinal studies focusing on all aspects of leisure engagement (leisure participation, the experience of leisure, and the use of leisure for coping) promises to be a fertile ground for continued research regarding the importance of leisure engagement on adolescent health and development.

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Appendix A
Measuring Instruments

Biographical Questionnaire

Instructions: Please enter answer or place a cross (X) in the appropriate box.

1 Name of school: _____

2 Grade: _____

3 Age: _____

4 Gender:

Male	1
Female	2

5 Race:

Asian	1
Black	2
Coloured	3
White	4
Other	5

If other, please specify: _____

6 Indicate the place where you live:

Town	1
Urban area/ suburbs	2
Rural area/ townships	3
Farm district	4
Other	5

If other, please specify: _____

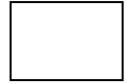
7 Home language (mark the one your family uses most at home):

English	
Afrikaans	

For office use only

IsiXhosa	
IsiZulu	
Sesotho	
Setswana	
Sepedi	

Other Specify: _____



Participation in Leisure Activities

Please indicate (**by marking with an X**) which leisure activity or activities you participate in, if any. If you do participate in any of the leisure activities, for each activity that you have marked with an X, please **ALSO** indicate how often (**by circling your answer**) you participate in that activity by using the following scale:

1 = occasionally (less than every month)

2 = once a month

3 = once a week

4 = 2-3 times a week

5 = daily

Category 1: Sporting activities	X	Frequency of Participation					For office use only
Cricket		1	2	3	4	5	
Rugby		1	2	3	4	5	
Soccer		1	2	3	4	5	
Athletics		1	2	3	4	5	
Tennis		1	2	3	4	5	
Squash		1	2	3	4	5	
Exercise		1	2	3	4	5	
Swimming		1	2	3	4	5	
Karate		1	2	3	4	5	
Horse riding		1	2	3	4	5	
Netball		1	2	3	4	5	
Watching sport		1	2	3	4	5	
Water skiing		1	2	3	4	5	
Hockey		1	2	3	4	5	
Other, specify _____		1	2	3	4	5	
Category 2: Cultural activities	X	Frequency of Participation					
Music		1	2	3	4	5	
Singing		1	2	3	4	5	
Dancing		1	2	3	4	5	
Drama		1	2	3	4	5	
Arts and crafts		1	2	3	4	5	
Chess		1	2	3	4	5	
Debating		1	2	3	4	5	
Attending live theatre or musicals		1	2	3	4	5	
Other, specify _____		1	2	3	4	5	
Category 3: Recreational/ relaxation activities	X	Frequency of Participation					
Watching TV/movies		1	2	3	4	5	
Listening to music		1	2	3	4	5	
Reading		1	2	3	4	5	
Socialising with friends and family		1	2	3	4	5	
Hobbies		1	2	3	4	5	
Meditation		1	2	3	4	5	
Other, specify _____		1	2	3	4	5	

Category 4: Outdoor activities	X	Frequency of Participation					For office use only
		1	2	3	4	5	
Gardening		1	2	3	4	5	
Hiking		1	2	3	4	5	
Fishing		1	2	3	4	5	
Hunting		1	2	3	4	5	
Target shooting and archery		1	2	3	4	5	
Camping		1	2	3	4	5	
Bird watching		1	2	3	4	5	
Scouts/Girl guides		1	2	3	4	5	
Other, specify _____		1	2	3	4	5	

Leisure Coping Strategy Scale (LCSS)

Instructions: The following statements assess to what extent your leisure helps you cope with stress in your life. In some cases, you may intentionally choose your leisure involvements to help you deal with stress. At other times, you may find that what you do in your leisure has helped reduce stress even though you chose to participate for other reasons. By leisure we mean the things you do in your free time and the recreational activities you engage in. Please think back to stressful events you encountered in the past month. Now recall how you coped with these events. Read each of the following statements and mark (**with an X**) which number best corresponds to your answer.

		Very Strongly Disagree	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Very Strongly Agree	For office use only
1	My leisure helped me feel better.	1	2	3	4	5	6	7	
2	My leisure allowed me to be in the company of supportive friends.	1	2	3	4	5	6	7	
3	I engaged in a leisure activity to temporarily get away from the problem.	1	2	3	4	5	6	7	
4	Escape through leisure was a way of coping with stress.	1	2	3	4	5	6	7	
5	Socializing in leisure was a means of managing stress.	1	2	3	4	5	6	7	
6	I gained a positive feeling from leisure.	1	2	3	4	5	6	7	
7	I dealt with stress through spending leisure time with my friends.	1	2	3	4	5	6	7	
8	Engaging in social leisure was a stress-coping strategy for me.	1	2	3	4	5	6	7	
9	Leisure was an important means of keeping myself busy.	1	2	3	4	5	6	7	
10	I maintained a good mood in leisure.	1	2	3	4	5	6	7	
11	Engagement in leisure allowed me to gain a fresh perspective on my problem(s).	1	2	3	4	5	6	7	
12	My leisure involvements failed to improve my mood.	1	2	3	4	5	6	7	
13	Leisure made me feel miserable.	1	2	3	4	5	6	7	
14	By escaping from the problem through leisure, I was able to tackle my problem(s) with renewed energy.	1	2	3	4	5	6	7	
15	Lack of companionship in leisure prevented me from coping with stress.	1	2	3	4	5	6	7	
16	Leisure helped me manage my negative feeling.	1	2	3	4	5	6	7	
17	I took a brief break through leisure to deal with the stress.	1	2	3	4	5	6	7	
18	One of my stress-coping strategies was participation in social leisure.	1	2	3	4	5	6	7	

The Brief Coping Orientations to the Problem Experienced Questionnaire (Brief COPE)

We are interested in how people respond when they confront difficult or stressful events in their lives. There are lots of ways to try to deal with stress. This questionnaire asks you to indicate what you generally do and feel when you experience stressful events. Obviously, different events bring out somewhat different responses, but think about what you usually do when you are under a lot of stress.

Choose your answers thoughtfully, and make your answers as true FOR YOU as you can. Please answer every item. There are no “right” or “wrong” answers, so choose the most accurate answer for YOU – not what you think “most people” would say or do. Indicate what YOU usually do when YOU experience a stressful event.

Use the following scale and write your answer for each item in the space provided:

- 1 = I haven't been doing this at all
- 2 = I've been doing this a little bit
- 3 = I've been doing this a medium amount
- 4 = I've been doing this a lot

1. I've been turning to work or other activities to take my mind off things.	
2. I've been concentrating my efforts on doing something about the situation I'm in.	
3. I've been saying to myself "this isn't real."	
4. I've been using alcohol or other drugs to make myself feel better.	
5. I've been getting emotional support from others.	
6. I've been giving up trying to deal with it.	
7. I've been taking action to try to make the situation better.	
8. I've been refusing to believe that it has happened.	
9. I've been saying things to let my unpleasant feelings escape.	
10. I've been getting help and advice from other people.	
11. I've been using alcohol or other drugs to help me get through it.	
12. I've been trying to see it in a different light, to make it seem more positive.	
13. I've been criticizing myself.	
14. I've been trying to come up with a strategy about what to do.	
15. I've been getting comfort and understanding from someone.	
16. I've been giving up the attempt to cope.	
17. I've been looking for something good in what is happening.	
18. I've been making jokes about it.	
19. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.	
20. I've been accepting the reality of the fact that it has happened.	
21. I've been expressing my negative feelings.	
22. I've been trying to find comfort in my religion or spiritual beliefs.	
23. I've been trying to get advice or help from other people about what to do.	
24. I've been learning to live with it.	
25. I've been thinking hard about what steps to take.	
26. I've been blaming myself for things that happened.	
27. I've been praying or meditating.	
28. I've been making fun of the situation.	

Ryff's Psychological Well-Being Scale (PWB), 42 Item Version

The following set of questions deals with how you feel about yourself and your life. Please remember that there are no right or wrong answers. Please indicate your degree of agreement (using a score ranging from 1-6) to the following sentences.

Indicate your chosen answer by marking (with an **X**) the most appropriate corresponding number. Please answer **ALL** the questions.

	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree	For office use only
1. I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.	1	2	3	4	5	6	
2. In general, I feel I am in charge of the situation in which I live.	1	2	3	4	5	6	
3. I am not interested in activities that will expand my horizons.	1	2	3	4	5	6	
4. Most people see me as loving and affectionate.	1	2	3	4	5	6	
5. I live life one day at a time and don't really think about the future.	1	2	3	4	5	6	
6. When I look at the story of my life, I am pleased with how things have turned out.	1	2	3	4	5	6	
7. My decisions are not usually influenced by what everyone else is doing.	1	2	3	4	5	6	
8. The demands of everyday life often get me down.	1	2	3	4	5	6	
9. I think it is important to have new experiences that challenge how you think about yourself and the world.	1	2	3	4	5	6	
10. Maintaining close relationships has been difficult and frustrating for me.	1	2	3	4	5	6	
11. I have a sense of direction and purpose in life.	1	2	3	4	5	6	
12. In general, I feel confident and positive about myself.	1	2	3	4	5	6	
13. I tend to worry about what other people think of me.	1	2	3	4	5	6	
14. I do not fit very well with the people and the community around me.	1	2	3	4	5	6	
15. When I think about it, I haven't really improved much as a person over the years.	1	2	3	4	5	6	
16. I often feel lonely because I have few close friends with whom to share my concerns.	1	2	3	4	5	6	
17. My daily activities often seem trivial and unimportant to me.	1	2	3	4	5	6	

18. I feel like many of the people I know have gotten more out of life than I have.	1	2	3	4	5	6	
19. I tend to be influenced by people with strong opinions.	1	2	3	4	5	6	
20. I am quite good at managing the many responsibilities of my daily life.	1	2	3	4	5	6	
21. I have the sense that I have developed a lot as a person over time.	1	2	3	4	5	6	
22. I enjoy personal and mutual conversations with family members or friends.	1	2	3	4	5	6	
23. I don't have a good sense of what it is I'm trying to accomplish in life.	1	2	3	4	5	6	
24. I like most aspects of my personality.	1	2	3	4	5	6	
25. I have confidence in my opinions, even if they are contrary to the general consensus.	1	2	3	4	5	6	
26. I often feel overwhelmed by my responsibilities	1	2	3	4	5	6	
27. I do not enjoy being in new situations that require me to change my old familiar ways of doing things.	1	2	3	4	5	6	
28. People would describe me as a giving person, willing to share my time with others.	1	2	3	4	5	6	
29. I enjoy making plans for the future and working to make them a reality.	1	2	3	4	5	6	
30. In many ways, I feel disappointed about my achievements in life.	1	2	3	4	5	6	
31. It's difficult for me to voice my own opinions on controversial matters.	1	2	3	4	5	6	
32. I have difficulty arranging my life in a way that is satisfying to me.	1	2	3	4	5	6	
33. For me, life has been a continuous process of learning, changing, and growth.	1	2	3	4	5	6	
34. I have not experienced many warm and trusting relationships with others.	1	2	3	4	5	6	
35. Some people wander aimlessly through life, but I am not one of them.	1	2	3	4	5	6	
36. My attitude about myself is probably not as positive as most people feel about themselves.	1	2	3	4	5	6	
37. I judge myself by what I think is important, not by the values of what others think is important.	1	2	3	4	5	6	

38. I have been able to build a home and a lifestyle for myself that is much to my liking.	1	2	3	4	5	6	
39. I gave up trying to make big improvements or changes in my life a long time ago.	1	2	3	4	5	6	
40. I know that I can trust my friends, and they know they can trust me.	1	2	3	4	5	6	
41. I sometimes feel as if I've done all there is to do in life.	1	2	3	4	5	6	
42. When I compare myself to friends and acquaintances, it makes me feel good about who I am.	1	2	3	4	5	6	

Appendix B

Ethical Clearance Letter

28 November 2014

Miss N. Beangstrom
Department of Psychology
UFS

Ethical Clearance Application: The role of leisure engagement in the relationship between coping and adolescent psychological wellbeing

Dear Miss Beangstrom

With reference to your application for ethical clearance with the Faculty of the Humanities, I am pleased to inform you on behalf of the Ethics Board of the faculty that you have been granted ethical clearance for your research.

Your ethical clearance number, to be used in all correspondence, is:

UFS-HUM-2014-69

This ethical clearance number is valid for research conducted for one year from issuance. Should you require more time to complete this research, please apply for an extension in writing.

We request that any changes that may take place during the course of your research project be submitted in writing to the ethics office to ensure we are kept up to date with your progress and any ethical implications that may arise.

Thank you for submitting this proposal for ethical clearance and we wish you every success with your research.

Yours sincerely,

Katinka de Wet
Research Ethics Committee (Faculty of the Humanities)

Copy: Charné Vercueil (Research Co-ordinator, Faculty of the Humanities)



Appendix C

Approval Letter from the Northern Cape Department of Education



To whom it may concern

REQUEST FOR PERMISSION TO CONDUCT DATA COLLECTION AT SCHOOLS IN THE NORTHERN CAPE PROVINCE

I am a Psychology Research Masters student from the Department of Psychology, University of the Free State. I am currently researching the role that leisure engagement plays in the relationship between coping and adolescent psychological well-being. The purpose of the study is to investigate whether adolescents might benefit from participating in leisure activities that may aid in coping as well as psychological well-being. The researcher aims to investigate what types of coping strategies adolescents use when faced with difficult situations. The researcher will thus be looking at how engagement in leisure activities might serve as a coping strategy. This study will add to the body of research in the field of Positive Psychology with specific reference to South African adolescents. The knowledge gained from this study could be used to inform intervention programmes aimed at assisting adolescents to cope with their daily stressors through the use of structured leisure activities.

Permission will be obtained from the relevant school principals. Informed consent will be requested from the parents/ legal guardians as well as the participants themselves. The participants who voluntarily choose to participate in the study will remain anonymous. Feedback will be provided to the participating schools after the completion of the study.

For the purpose of this study, we require the participation of Grade 10, 11 and 12 learners. Participation in this study will involve the completion of questionnaires, assessing leisure engagement, coping strategies and psychological well-being. Not more than 1 hour will be required for participants to complete the questionnaires. Participation is voluntary and learners may withdraw from the study at any point without any explanation. The responses of participants will be anonymous and kept confidential. I, as the primary researcher, will be present to organise the process, to give instructions and to deal with questions from the learners.

Should you require further information, please feel free to contact me or my supervisor at the details below.

Yours sincerely

Natasha Beangstrom
Researcher
Dept. of Psychology
University of the Free State
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084 645 5113

Dr P. Naidoo
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051-4012340





I, Dr MI Ishmail give Natasha Beangstrom (researcher) permission to conduct her data collection at schools within the Northern Cape Province. I have read and understand the purpose of the research and volunteer my assistance in this matter.

Dr MI Ishmail
DDG: Curriculum, Examinations and Assessment
Northern Cape Department of Education

16.09.2014
Date



Appendix D

Letter to School Principals

Dear principal

REQUEST FOR PERMISSION TO CONDUCT DATA COLLECTION AT YOUR SCHOOL

I am a Psychology Research Masters student from the Department of Psychology, University of the Free State. I am currently researching the role that leisure engagement plays in the relationship between coping and adolescent psychological well-being. The purpose of the study is to investigate whether adolescents might benefit from participating in leisure activities that may aid in coping as well as psychological well-being. The researcher aims to investigate what types of coping strategies adolescents use when faced with difficult situations. The researcher will thus be looking at how engagement in leisure activities might serve as a coping strategy. This study will add to the body of research in the field of Positive Psychology with specific reference to South African adolescents. The knowledge gained from this study could be used to inform intervention programmes aimed at assisting adolescents to cope with their daily stressors through the use of structured leisure activities.

Ethical clearance for this study has been obtained from the Research Ethics Committee of the Faculty of Humanities, University of the Free State. Permission has also been obtained from the Northern Cape Department of Education. Informed consent will be requested from the parents/ legal guardians as well as the participants themselves. The participants who voluntarily choose to participate in the study will remain anonymous. Feedback will be provided to the participating schools after the completion of the study.

For the purpose of this study, we require the participation of Grade 10, 11 and 12 learners. Participation in this study will involve the completion of questionnaires, assessing leisure engagement, coping strategies and psychological well-being. Not more than 1 hour will be required for participants to complete the questionnaires. Participation is voluntary and learners may withdraw from the study at any point without any explanation. The responses of participants will be anonymous and kept confidential. The involvement required from the school will be to identify one teacher to assist the researcher with the practical arrangements, namely



scheduling the date and time for data-gathering, distributing and collecting the parental consent letters, and arranging for a classroom(s) in which the data gathering can take place. I, as the primary researcher, will be present to organise the process, to give instructions and to deal with questions from the learners.

Should you require further information, please feel free to contact me or my supervisor at the details below.

Yours sincerely



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051-4012340



Appendix E

Letter to Parents/ Guardians

Dear Parent/ Guardian

I am a Psychology Research Masters student from the Department of Psychology, University of the Free State. I am currently researching the role that leisure engagement plays in the relationship between coping and adolescent psychological well-being. The purpose of the study is to investigate whether adolescents might benefit from participating in leisure activities that may aid in coping as well as psychological well-being. The researcher aims to investigate what types of coping strategies adolescents use when faced with difficult situations. The researcher will thus be looking at how engagement in leisure activities might serve as a coping strategy. This study will add to the body of research in the field of Positive Psychology with specific reference to South African adolescents. The knowledge gained from this study could be used to inform intervention programmes aimed at assisting adolescents to cope with their daily stressors through the use of structured leisure activities.

For the purpose of this study, we are looking for pupils in grade 10, 11 and 12 to participate in this research. Participation in this study is **voluntary** and students may withdraw from the study at any point without any necessary explanation. Should they wish not to participate or to withdraw their responses, there will be no negative consequences. The study will take the form of standardised questionnaires that will be handed out to the participants consisting of numerous questions. The participants will remain **anonymous** and the **confidentiality** of responses will be respected. I request permission to include your son/daughter in this research project that aims to contribute to the existing literature on leisure, coping and psychological well-being in South African adolescents. I would appreciate it if you could complete the attached form and send it back to the school. Should you require further information, please feel free to contact me on my details that appear below.

Yours sincerely



Natasha Beangstrom
Researcher
Department of Psychology
University of the Free State
natasha.beangstrom@gmail.com



Appendix F
Informed Consent Form

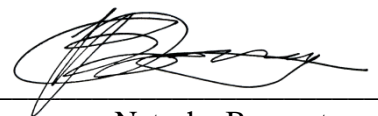
Informed Consent

The role of leisure engagement in the relationship between coping and adolescent psychological well-being

Purpose of the Research

The aim of the study is to determine if leisure engagement plays a role in the relationship between coping and adolescent psychological well-being. Coping is a prominent area of research within the field of Positive Psychology. The researcher aims to investigate what types of coping strategies adolescents use when faced with difficult situations. The researcher will thus be looking at how engagement in leisure activities might serve as a coping strategy. Leisure refers to activities that people engage in during their free time that are not school- or work-related. Leisure coping strategies are actual stress-coping behaviours available through participating in leisure. Our ultimate goal in life is to achieve personal growth and to reach our full potential, thus increasing our psychological well-being. The researcher has reason to believe that there is a positive relationship between coping and psychological well-being and that leisure may serve as a moderator in this relationship.

This study will add to the body of research in the field of Positive Psychology with specific reference to South African adolescents. Participating in this study is an opportunity to contribute to the knowledge base regarding leisure, coping strategies and adolescent psychological well-being. Information gained from this study will be used to inform intervention programmes aimed at assisting adolescents to cope with their daily stressors through the use of structured leisure activities.



Natasha Beangstrom
Researcher

Consent for Participation in Quantitative Research

I hereby volunteer to participate in a research study conducted by Natasha Beangstrom from the University of the Free State. I understand that this study is designed to gather information about the role of leisure engagement in the relationship between coping and adolescent psychological well-being. I will be one of approximately 200 adolescents completing questionnaires for this study. I understand and agree to the following:

1. I have read and understood the purpose of the research.
2. My participation in this project is voluntary. I understand that I will not be paid for my participation. I may withdraw and discontinue participation at any time without penalty.
3. If I feel uncomfortable in any way during the data collection session, I have the right to decline to answer any questions or to withdraw my participation in the study.
4. One data collection session will be held during the course of the study. This session will last approximately 1 hour.
5. I understand that this study has been reviewed and approved by the Research Ethics Committee of the Department of Humanities at the University of the Free State.
6. I have had all my questions answered to my satisfaction, and I voluntarily agree to participate in this study.
7. I have been given a copy of the consent form.

Signature of Participant: _____

Date: _____

*For further information, please contact:
Natasha Beangstrom (Researcher)
beangstromnl@ufs.ac.za*

Appendix G
Proof of Language Editing

LANGUAGE PRACTITIONING SERVICES

Anneke Denobili

BA (Communication Science), BA Hons (Communication Science)

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Tel: 084 244 8961
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12 December 2016

DECLARATION

I, Anneke Denobili, hereby declare that I edited the dissertation of Natasha Lynne Beangstrom titled, *The role of leisure engagement in the relationship between coping and psychological well-being among adolescents* for submission purposes in fulfilment of the requirements for the degree Magister Artium in the Department of Psychology, Faculty of Humanities, at the University of the Free State. All the suggested changes, including the implementation thereof, was left to the discretion of the student.

Kind regards

Anneke Denobili

SATI Registration #: 1003466

Appendix H
Turn it in Report

Natasha Master's thesis

ORIGINALITY REPORT

%**6**

SIMILARITY INDEX

%**4**

INTERNET SOURCES

%**3**

PUBLICATIONS

%**0**

STUDENT PAPERS

PRIMARY SOURCES

1	ujdigispace.uj.ac.za Internet Source	% 1
2	etd.ohiolink.edu Internet Source	% 1
3	media.wiley.com Internet Source	% 1
4	socialwork.journals.ac.za Internet Source	% 1
5	Erica Frydenberg. "The relationship between problem-solving efficacy and coping amongst Australian adolescents", <i>British Journal of Guidance & Counselling</i> , 02/2009 Publication	% 1
6	Malte Persike. "Competence in Coping with Stress in Adolescents from Three Regions of the World", <i>Journal of Youth and Adolescence</i> , 10/08/2011 Publication	% 1
7	Bradley, Graham L., and Brad C. Inglis. "Adolescent leisure dimensions, psychosocial adjustment, and gender effects", <i>Journal of</i>	% 1