CHAPTER II

REVIEW OF LITERATURE
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In the past three decades research on stress has grown to a multitudinous level which makes difficult to review the Universe of literature in this area. Yet a small attempt is being made in the following passages to identify the basic themes related to the present investigation.

When we look back into the history, probably, Hippocratic, was the person who first recognized the nature's healing power—the inherent body mechanism to restore health after exposure to disease. Much later French Physiologist Claud Bernard said that the internal environment of the organism must remain fairly constant despite changes in the external environment. This view had an enormous impact and stimulated later investigation on adaptive changes by which a steady state is maintained, (Pfluger 1877, Fredericq 1885). In the twentieth century Cannon brought in the name "Homeostasis"—the coordinated physical process which maintains steady state in the organism. It is against this background Selye was drawn towards a problem of stereotype response for any task which exhibited similar signs and symptoms such as, loss of weight and appetite. He found that this was an experimental replica of 'the syndrome of just being sick'. Adrenalin enlargement-gastro intestinal ulcers and thymicolympatic shrinkage were constant to the body for any attack of disease. These observations formed the basis for developing the entire concept of the stress.
Thus in 1936 Seyle put forward the 'General Adaptation Syndrome' (GAS) which is characterised by: 1) **The alarm phase**, in which the activity of adrenocortical system increases dramatically and facilitates hyper vigilance, increased activity and readiness for action; 2) **The stage of resistance** which represents the organisms attempt to regain and maintain homeostasis; and 3) **The stage of exhaustion**, which results from a depletion of the adoptive energies and may cause irreversible damage to cardiovascular, digestive, immune, and circulatory systems. Within Selye's frame work, a typical alterations in rest-activity cycles, hypervigilance, fatigue and sleep-wake disorders represent non specific components of the GAS.

From then onwards, Selyes work on stress has acted as an impetus to the interest of many and had been defined in diverse ways. Lazarus (1976) says that stress occurs where there are demands on the person which tax or exceed his adjustive resources. Bonner (1967) said that stress is frustration and threat which cannot be reduced, Paykel, Prusoff and Uhlexhuth (1971) state that stress is whatever upsets people. Groen and Bastians (1975) noted it as a sort of unpredictability of the future.

With the phenomenal growth of stress research in recent years, there has also been a better understanding and appreciation of the
concept of stress itself. Several attempts have been made to review the
development and ramifications of this ubiquitous conception of stress.
Fairly good accounts of these are available in the literature (Holmes and
Rahe, 1967; Appley and Trumbull, 1977; Coyne and Lozarus, 1980:
McGrath, 1970; Hanneman and McEven, 1975 and Pearlin, 1982). For
a better understanding of the historical growth of the stress concept field
articles such as those by John Mason (1975) and Tiwary and Shukla
(2004) can be seen.

The importance of stress as a concept is not because of its for
reaching definition or its diverse nature, but because of its deleterious
consequence on the person. These consequences may be Physiological,
sociological and psychological. True to the conception of "Psycho-
Physiological (mind-body) interactionism is the basis for understanding
the causes and effects of stress. It is perhaps more meaningful to
conceive stress as a psycho-physiological entity rather than as a purely
psychological or physiological affair. Nevertheless, for purpose of easy
understanding and organization let us consider the physiological and
psychological effects of stress separately.
Physiological Effects of Stress

The history of stress research is interwoven with that of neurochemistry. The first contributions on the physiology of stress were made by investigating or studying the responses of the autonomic nervous system. Which was first seen in the work of Cannon over a half century ago, but there is much that have not discovered relationship between stress and neurochemistry.

Cannon's (1929) work initially focused on bodily changes in pain, hunger, fear and rage, with the aim of understanding how stress would lead to disease. Cannon showed that rats which had been adrenalectomized remained well, provided they were not stressed, but the same animals could not survive stressful stimuli. He attributed this to a chemical which he had recently discovered and named "sympathin". This maternal was normally present in the adrenal medulla and was released into circulation in copious quantities during stress. Cannon postulated that "sympathin" is essential for the animals survival. Which is now recognized as norepinephrine. Cannon's discoveries were momentous, and are the corner stones of modern neuroendocrinolar and neuro-chemistry, which has stimulated many researches to examine the
cellular and molecular events in stress. Neurochemical systems are influenced by stress as both responders and effectors, that is they are both stimulated by stress, and inturn act upon other systems to provoke secondary and tertiary response. The result is a cascade of biochemical and neuronal responses that begin with the perception of a stressful event and result in a complex array of behaviours. In between, a multitude of physiological responses has been provoked each of which act in some way to mobilize the organism secretion of hormones, (Rose, 1980) acceleration of heart rate (Grinker 1980, Karen et. al., 1997) vasoconstriction and rerouting of blood flow (Glass 1977, Frankenhaeuser, 1978) contraction of muscles (Levine Henry, 1978) immunological responses (Olff, Mirinda, 1999) alerting and arousal reactions, and alterations in mood and emotional state.

When we look into past with regarding the studies related to children and stress effects we find that there are no comparable studies of children in which the effects of different types of stress are contrasted systematically. However, we can utilize the adult findings as a guide in considering the effects of stress on children also. The results of some biological studies on adults are reasonably consistent in showing a fairly predictable and similar endocrine response to most important changes in the environment (Rose, 1980; Ursin, Baade & Lerne, 1978).
Huether and Gerald (1998) investigated the biological role of stress-response and the relationship between stress and brain development and reported that effects on neurological connectivity changes in the release of transmitters and hormones destabilization of cortical and limbic brain structures. The children who had experience more stress had effect on brain development. Stress leads to disfunctioning of brain activity and also psychological difficulties among children.

The evidence of neurobiological changes in animals has led to the suggestion that such changes are mediating factors in the effects of abuse and neglect on children. Infants and very young children are at an especially high risk for such changes due to the continued development of the neural pathways and their greater dependency on caregivers (Graham et. al., 1999). With the invention of new research techniques, researchers have begun to demonstrate the biological changes associated with abuse and neglect, specifically changes involving the stress response and its neuroendocrinology (hormones in and controlled by the brain) (Golier & Yehuda, 1998).
These neuroendocrinological changes in response to abuse are thought to be related to the brain's response to stress. The normal stress response involves the hypothalamic-pituitary-adrenal (HPA) axis, a system which involves the hypothalamus (part of the brain), the pituitary gland (a gland in the brain which controls other glands) and the adrenal gland (a gland in the abdomen) (Golier & Yehuda, 1998). When exposed to a stressor, neurons (brain cells) in the hypothalamus release a chemical called Corticotrophin Releasing Factor (CRF), which in turn causes the pituitary gland to release another chemical called ACTH (adrenocorticotopin hormone). ACTH then stimulates the adrenal cortex to release cortisol, a chemical which influences the brain response to stress (e.g., it causes the heart to beat faster) (Graham et. al., 1999). CRF binding sites appear in the brain during weeks 12-13 in the human fetus, indicating that even the fetus may be capable of responding to stress. This capability may be protective in some situations, but when exposed to prolonged stress it may be developmentally detrimental. It is likely that early exposure to chronic abuse and neglect activate the HPA axis, which because the infant's neural circuitries are still developing, may lead to permanent changes in the HPA axis and response to stress. High levels of cortisol can also accelerate death of neurons, predisposing the child to cognitive and memory impairments and perhaps affective disorders in adulthood (Graham et. al., 1999).
Findings from the Watamura, Donzella, Alwin, and Gunnar (2003) study support the growing recognition of the importance of context on physiology an affective and behavioral regulation early in human development. This discussion focuses on the role of context and development on hypothalamic-pituitary-adrenalin (HPA) axis regulation in young children. Watamura, et. al., (2003) findings with regard to relevant animal studies, extension of these observations to samples of children at elevated risk for psychopathology and experimental prevention studies with young children. It is concluded that environmental factors operating at key points in development may shape affect and behavioral regulation as well as HPA axis function in children.

Gilmour and associates (1999) studied characteristics of the children with a hyperphagic short stature. They found hypotonia, enuresis / encopresis and sleep disruption, poor growth, poor appetite etc., are related to stressful disease symptom in children.

Ishihara et. al., (1999) examined that time dependent effects of stressors application on metastasis of tumour cells. These studies found that stress application and tumour cell inoculation induced transient decreases in body weight in children and also rotational stress reduces splenic Natural Killer(N.K) cell activity.
Sandberg et al., (1998) also examined the differences between independent and behaviour dependent stressful life events and chronic adversities in child psychiatric patients, community controls and children with asthma. Results showed that in the previous years, the psychiatric patients had on average, experienced significantly more independent and behaviour dependent severe events and major adversities than either the controls or the asthmatic patients. The difference were most pronounced in relation to behaviour dependent high-threat life events and long term experiences.

Grant W T Foundation (2000) evidence points to a relationship between psychosocial stress and the early onset of asthma in children with a genetic predisposition to the disease. Specifically, clinical judgment of "early parenting difficulties" is now known to be a significant predictor for the development of asthma in genetically at risk children. This study has spent the last 14 years examining the associations among parental behaviour, emotional stressors and later illness expression in genetically at-risk children. The data currently under review provide support for the contribution of psychosocial factors to asthma onset and persistence into childhood.
Langeveld, Johannes et al., (1999). Examined the moderating effects of trait negative affectivity (NA) and experienced stress (ES) on the interrelation between headache and health-related quality of life (HQL) in adolescents age 12-18 years. Participants with migraine or with no-migraine primary headache \( n = 64 \) were selected from the total population of two secondary schools \( N = 1566 \). Across a 4 weeks interval, participants completed a headache and stress diary and HQL questionnaire. Additionally, a neuroticism scale was completed as a measure for NA. Independent of negative affectivity and stress, headache was found to affect functional status, satisfaction with life in general, and satisfaction with health. The ES moderated the effect of headache on psychological functioning and satisfaction with life in general. The authors conclude that headache activity in adolescents leads to a lower functional status, health satisfaction, and life satisfaction. The effect of headache on life satisfaction is greater in adolescents who experience high levels of stress.

\* Martin et al., (1999). Evaluates the relationship between headache frequency and psycho-social factors including anxiety, depression on somatization and functional status in early adolescents. Results indicate that a non clinical sample of students reporting frequent headache
endure more symptoms of anxiety, depression, somatization and functional disabilities than a matched sample of students with infrequent or no headache.

Sevenoaks, Susan and Kent (1992), reported that handwriting leaves a permanent record of hand movement and is frequently affected and disrupted by stress from a variety of sources. Actual physical stress can be caused by the act of writing; this may be the result of poor postural strategies, exacerbated by the demand of speed and academic pressure.

Spungin (1985) discusses the persistent misdiagnosis of her 15 years old daughter, who had been supposed to be suffering from anorexia nervosa by a number of doctors before the final diagnosis of her case as Crohn's disease. Her illness had symptoms of fatigue, stomach pains, and an inability to eat, which had been attributed to social and academic stress "A ninth opinion".

Iny et. al., (1994). Suggested that there was a neurochemical link between depression, anxiety and stress among children and that disturbances in neurochemical functioning may be associated with specific symptomatology, independent of psychiatric diagnosis.
De Bellis, Michel et al., (1999). Investigation on biological stress systems in children and early adolescents. Biological stress system can effect children and early adolescents maltreatment experiences, over anxious disorder, health controls, Post Stress Traumatic Disorder was associated with greater co-morbid psychopathology including depressive and dissociative symptoms, lower global assessment of functioning, increased suicidal ideation and attempts.

Julian Ford, (1998). Discussed children are frequent victims of stress because they are often unable to communicate their feelings accurately or their responses to events over which they have no control. Certain physical symptoms, notably recurrent abdominal pain without a known cause, may be indicators of stress in children a 2002 study reported that low birth weight plus slow growth up until age was related to stress in adulthood. It appears that children who compensated for the low birth weight with higher weight gain after birth did not have as high risk for stress later on. People who are less emotionally stable or have high anxiety levels tend to experience specific events as more stressful than others. Some experts describe an exaggerated negative response to stress as "catastrophizing" the event (turning it into a catastrophe). Nevertheless, a 2003 study of patients with anxiety disorder did not find
any differences in actual physical response to stress (heart rate, blood pressure, release of stress hormones) compared to people without anxiety.

Olff, Miranda (1999) recognized that acute and chronic stress have an impact on the immune system. Acute stress may have a stimulating effect on immune system, while in the case of chronic stress - and in particular depression - the immune system may be down - regulated. However, there is considerable individual variability in the immune response to stress. This seems to a large extent to be determined by the S's way to dealing with stress. The perception and evaluation of a stressor and specific ways of stress. The perception and evaluation of a stressor and specific ways of stress coping may be related to various aspects of the neuroendocrine stress response system through activation of the sympathetic nervous system and the hypothalamic-pituitary-adrenal (HPA) axis. Prolonged exposure to stressors(children) or to severe life stress may out weight the person's coping resources, leading to feelings of depression. The affective changes with the accompanying changes in the HPA axis are one of the hypothesized mechanisms underlying immune changes in depression. the relationship between depression and immunity is affected by several other factors, such as gender, age and other personal resources.
Stress and Sleep Disturbances in Children

Stress and its relation to sleep is an area where children are to be taken care. Sadeh (1996) summarizing the research on the relationship between stress and sleep found that the relationship is multidimensional. To the extent that sleep and dreaming phenomena are sensitive to physiological and psychological stress, sleep and sleep-related issues may arouse significant fears and anxieties in many children and thus represent a significant stressor in their lives. In additional sleep disturbances and the resulting sleep loss or sleep deprivation and daytime fatigue and sleepiness can become a significant source of stress and require adoptions resources. The review focuses only on the effects of stressful and traumatic experience on sleep wake patterns.

Zack and Hill (1998) studied relation between dreams and stress in children. Dreams interpretation sessions by dream violence, dream arousal attitudes towards dreams, and walking life stress. Negative interpretation of dreams were related to life stress and positive interpretations of dreams were related to adjustment to a life style. Pleasant dream arousal attitudes towards dreams were related to life style and unpleasant dreams are related to violence.
Verlander, Larrie, Benedict, James and Hauson (1999) examined that stress and sleep patterns of early adolescents and college students. They found that effects of stress on sleep and categorises of some sleep patterns, depth of sleep, depth in waking up, quality and latency of sleep aspects, negative affects in dreams, sleep irregularity. All these aspects were found in children and students who had stress experience and the children may get some psychological difficulties.

Stress - Heart

Numerous investigations have affirmed very marked individual differences in the response to potentially stressful events. (Rose, 1980). On the other hand heart rate and / epinephrine secretion tends to increase afresh with each new encounter even in individuals (children) well habituated to that particular - stressor indicating that there are different components of physiological response which functions in desperate ways.

Mathews, Karen (1997) studied children cardiovascular response to acute stress. They found that cardiovascular responses, heart beating, pulse rate, increasing blood pressure are related to level of the stress intensity.
Psychological Effects of Stress

The records of 16th, 17th and 18th century medicine provide few resources for learning about children emotional and cognitive responses to conflicts, aspirations, reactions to work, and to dreadful work house environment.

specific serious traumatic events such as child abuse or environmental catastrophes and subsequent behavioural problems (Stouthameer, Loeber et. al., 2001), Thornberry, Ireland and Smith (2001). However, research using general additive indices of social stress to predict the various problems over time has been rare (Aseltine, Gore and Gardon 2000).

The concept of stress incorporates both situational variables as well as person variables, research literature has shown that experiences of stress are associated with negative mental health outcomes. Blaney, (2000); Mazure (1998); Monk, Evelyn Millings & Mahmood Zahid (1999). Studied consequences of stress on students' mental health, they concluded that some aspects bring major difficulties. There is significant relationship between these difficulties and stress and mental health. There is significant effect on mental health and significance difference between emotional state and mental health.

Alva and Reyes, et. al., (1999) suggests that the deleterious link between stress and mental health outcomes and found that, a direct relation between experiences with stressful life events and internalized symptoms of depression and anxiety in a sample of ninth grade children.
Pearlin, Leonard. (1999). Social research into stress and its consequences has burgeoned over the past 25 years or so. Indeed, the accumulated body of knowledge about social stress has contributed substantially to our understanding of the forces affecting the well-being of people. The expansion of knowledge has not occurred because sociologists are of one mind about stress and its consequences; far from it. Research into stress has moved in many directions, has examined multiple levels of social and personal life, and has focused on an array of issues. The notion of "the stress process," a label first used in 1981 (Perlin et. al., 1981), represents an attempt to give some conceptual organization to the diverse lines of research that were - and still are - under way. This is not task that is easily or quickly brought to completion. Instead, it is a continuous challenge requiring an unending appraisal of what we know and of the future directions that merit attention.

Molgoard (1985) examined disorganization, lack of interest in oneself and others and found pre-occupation, sadness and crying, contrary to natural behaviour violence, regression, loss of weight, fear, fatigue, extreme obedience/compliance, absence from school to be the symptoms of children/teenagers under stress.
Bhattacharji (1989) in his study in the past three years reported that a number of school children from english medium school, in the age group of 8 - 14 years, lost their mental balance due to their inability to cope with the syllabi prescribed by the school authorities and the expectation of their parents. The study revealed that apart from common neurotic trends and phobic reactions, psychosomatic illness like bronchial asthma, palpitations, stammering were mostly found in children. The fear of failure to satisfy the school authorities, anxiety and tensions of the parents also, did contribute to the frustration and consequent breakdown of their children.

Rudolph and Hammen (1999), Murray and Canzoniero, (1999). Studies conducted on consequences of emotional distress in children, consequences of emotional distress may account for why, such distress endures in some children, research was to take a step toward identifying the process by which emotional disturbances contributes to the development of one negative consequence - the tendency for children underestimate their competence relative to their performance. They are concluded from a growing body of work indicating that emotional distress may have significant costs for the views children develop about themselves and their world and emotional distress to specifying the processes involved, under some conditions.
Cohen and Li (2000), Rudolph and Hammen (1999) suggested that children experiencing emotional distress blame themselves for their failures and come to experience diminished self-worth, that children suffering from depression make their lives more difficult by generating stress (e.g. doing poorly in school relating interpersonal conflicts) in their lives and emotional distress is associated with heightened memory for negative information.

Simmons (1987) obtained a report showing that young adolescents who experience a pile-up of life-changes show negative effects on their self-esteem, school grades, and participation in extra-curricular activities. These differences between individuals could be expected to create instability in emotional experience (i.e., change with age in the relative remaking among youth in levels of happiness to unhappiness) can cause for stress in young adolescents.

Thoits, Peggy (1999). Despite considerable theoretical emphasis placed on self and identity factors in psychiatry and clinical psychology, sociology's currently dominant etiological approach to mental disorder, stress theory, only relatively recently has begun to attend explicitly to these constructs. It is often necessary to include self or identity factors
when trying to distinguish stressors' physical effects from their psychological ones, and when trying to explain why some people are emotionally disturbed by stress experiences, whereas other people are not, scrutinizes newly developing theoretical ideas, empirical findings, and still unanswered questions about the influences of self and identity factors in the stress process.

Cowen, Emory et. al., (1997). Study of 181 young highly stressed urban children (aged 8 - 11 years), classified as stress-resilient (SR) and stress-affected (SA) 1.5-2 years earlier. At follow-up (T2), children were retested on five initial (T1) test measures; self-rated adjustment, perceived competence, social problem solving, realistic control attributions, and empathy; parents and teachers did knew child adjustment ratings, and parents participated in a phone interview focusing on the T1 - T2 interval. Child test and adjustment measures and parent interview responses at T2 sensitively differentiated children classified as SR and SA at T1. No relationship was found between family stress experienced in the T1 - T2 interval and changes in children's adjustment during that period.
During a traumatic experience, children will survive better if they have a structure to follow and can maintain some sense of control. Learning the survival skills will aid in maintaining this control. Children need accurate and specific information about their immediate safety, about what has happened and about what will happen to them next (James, 1989). Knowledge helps them control their thoughts and feelings. Following a trauma, debriefing is critical. Children will vary concerning their willingness and readiness to talk about their experiences. Some will play out the event, while others may be more comfortable writing or drawing about the event. What is important is the opportunity to communicate. There are different avenues for the child to communicate, including online discussion forums for children (Sleek, 1998).

A child's initial debriefing should be child-centred and nonjudgmental. The adult should recognize that each child did his or her best, no matter what the outcome, and refrain from offering advice. Adults should recognize that no two children will have the same thoughts, feelings, or opinions. All expressions about the trauma are acceptable. Following a trauma, it is also important to help a child reestablish control. Reviewing survival skills and drills and planning for "next time" reestablishes strength. Allowing a child to make choices reestablishes their governance over their own lives.
Stress and Depression

Rohde, Lewinsohn, and Seeley (1990, 1994) suggested that depressive episodes may leave a scar that fosters risk for future depression and this was consistent with transactional models of depression that emphasize the reciprocal relation between symptoms and children functioning.

Kovacs, (1997) suggested that depressive symptoms lead to several disruptions in children lives, such as negative views of the self, problematic interpersonal relationship and stressful life experiences. These developmental costs of emotional distress then put children, at risk for further symptoms and life time difficulties. The guiding proposal that emotional distress, including depression and anxiety, leads children to view themselves and their surroundings in a manner that causes them to underestimate their competence relative to their performance. Specifically feelings of uncertainty and self esteem and the world.

Holahan, Charles, and Cronkite, Ruth, (1999) conducted study on association between role of psychological resources and changes of life events and its impact on psychological well being of the children. They concluded that there is association between change in life events and depressive symptoms.
Karkouski and Prescant Carol, (1999) studied stressful life events and depression in children and early adolescents. The effects of stressful life events and depression on individually rated on contextual threat and dependence was observed. The nature of the relation between stressful life events and depression can effect psychological adjustment.

Mazur, Elizabeth, Sandler, Irwin et. al., (1999) studied cognitive moderators of children adjustment to stressful divorce events, and the role of negative cognitive errors and positive illusions. They suggested that children reported depression is cognitive moderate of stressful events and mother reported externalizing problems are stressful events in children. Children have a negative cognitive errors on psychological adjustment.

Donnelly, Michael (1999) study the pattern of self-reported depressed mood among a sample of 887 11-15 year old secondary school students in Northern Ireland and examined the association between depressed mood and stressful life events, family support and perceived control. ANOVA of mean depression scores did not reveal main or interaction effects for age (school year) or sex. However, a school year x sex interaction effect was found when the variation in depression
scores due to family cohesiveness (or support) was partialled out in an ANCOVA. In years 1 and 2, males reported higher mean depression scores than females, whereas the pattern was reversed in years 3 and 4. The covariates of stressful life events and perceived control did not significantly affect the patterns of mean depression scores. This would tend to suggest that the sex differences in depression found consistently with adults may begin to emerge in middle adolescence; and that the nature and level of family relationships may influence the prevalence and pattern of adolescent depression. The study found a higher mean depression score and a larger proportion of "cases" (27%) than has been recorded in studies of young adolescents living outside Northern Ireland.

Zimmerman et al., (2000) found that stressful life events were associated with alcohol and marijuana use, as well as depressive symptoms and anxiety in a sample of African, American high school students.

Harkness, Kate et al., (1999) holds that depressed individuals generate stressful conditions for themselves, which lead to recurrence. The present research tested differences in dependent and independent events between depressed individuals who had experienced (1) no
previous major depressive episodes, (b) 1 previous episode, and (c) 2 or more previous episodes. It was predicted that, based on the stress generation hypothesis, recurrent depressives would show more dependent events than people without a depression history, and that these generated stressors would be of etiological importance for precipitating recurrence (i.e., severe events in the 3 months preceding recurrence). Recurrent depressives experienced significantly more total dependent events than 1st-onset depressives in the 12 months but not the 3 months preceding their episode. Although the findings support the general premise of stress generation, the etiological relevance of the generated stress for recurrence requires further study.

Professionals, however, have long recognized the great impact stress can have on children. Stressors that affect children, even as infants, can include early trauma, abuse, neglect, loss of a parent and inadequate parenting (Graham, Heim, Goodman, Miller, & Nemeroff, 1999). Findings show that the effects of these stressors may be long lasting, and that a frequent outcome of childhood maltreatment and abuse is major depression (Graham et al., 1999). Women who have been abused in childhood are four times more likely to develop major depression in adulthood than women who have not been abused, and the
magnitude of the abuse is correlated with the severity of the depression (Helm, Newport, Heit, Graham, Wilcox, Bonsall, Miller & Nemeroff, 2000).

Studies of students and non-human primates have demonstrated that early adverse events, such as maternal separation and early handling by humans, produce behavioural changes that resemble fear, anxiety, and depression. These studies have also shown that these conditions are associated with neurobiological changes (changes to the structure or chemical content of the brain) that persist into adulthood and some of these chemical changes can be reversed by treatment with antidepressants.

**Stress and Suicide**

Stewart, Sunita *et. al.*, (1999). A sample of 14 - 17 years Chinese secondary school students in Hong Kong provided information about their suicide ideation. The stressors and Chines Beck Depression Inventory (C-BDI) scores predicted 33% of the variance in suicide ideation in boys, most of the prediction was attributable to CBDI scores, suggesting that depression mediated the effects of stressors. In girls the C-BDI scores perceptions of low parental causing and high conflict with parents had additive effects in predicting level of suicidal ideation.
Pillay Anthony and Wassenaar, Duglas (1997). Investigation on recent stressors and family satisfaction in suicidal adolescents. There is a significant difference between stress and suicidal SS than controls experienced, and they identified, family conflict, problem at school and problems with boy / girl friend, lower levels of family satisfaction as the aspects that can lead adolescent stress and suicidal behaviour.

Hovey, Joseph (1998) reported that children who have a suicidal thought, and behaviour can result from stress conditions. Acculturative stress, depression and suicidal ideation by using Reynolds Adolescent Depression Scale. They concluded that depressive symptoms leads to suicidal ideation.

Stoelb et al., (1998) model study show risk as related to assessing young adolescent suicide. A process models for assessing young adolescent risk for suicide. Primary risk factors can influence depressive adolescent : Previous attempt affective disorders and helplessness are primary risk factors for suicide. Secondary risk factors are substance abuse and personality and behavioral disorders can produce stress in young adolescents and finally situational risk factors are family functioning, suicide exposure, social support, life stressors and
homosexuality can influence the stressful behaviour in young adolescents and negative life events also leads to stress producing situations.

Hoffmann, John, and Susan (1998) suggested that stressful life events and early adolescent substance use and depression, conditional and gender differentiated effects. Early adolescence substance use were related to human health and behaviour, stressful life events and depression condition were related depressive symptoms, gender differentiated effects on both human health and behaviour and depressive symptoms.

Studies taken together suggest that early exposure to abuse and neglect alter the stress response in children, which can influence the long-term functioning of the HPA axis. In the study conducted by Kaufman et al., (1997), the increased ACTH secretion was found only in depressed abused children, and not in non-depressed children who had been abused. This indicates that this increase in related to depression, and not simply to abuse. In addition, the lack of a corresponding increase in cortisol indicates that there may be some type of regulation occurring, allowing the child to produce greater quantities of ACTH without
affecting levels of cortisol. A similar phenomenon was seen Heim et. al., (2000) with respect to abused women who weren't depressed. These women also exhibited an increase in ACTH without a corresponding increase in cortisol. This however, is in conflict with the results obtained by Kaufman et. al., (1997). In which abused children who weren't depressed did not exhibit higher levels of either ACTH or cortisol. This suggests, then, that this effect may be one that develops over time, or that other factors may be involved. The relationship between stress (abuse and neglect), HPA axis functioning, and depression is a complex one which needs more research and study.

Stress and Delinquency

Hoff Mann and Su (1998). Investigated stressful life events as a risk factor for delinquency. They demonstrated that stressful life events significantly and positively predicted delinquent behaviour. Studies suggest that stressful life events influence the delinquent behaviours of adolescents. Stressful events appear to predict change or increasing risk for conduct problems. Antisocial or depressed youth may generate above average levels of stressful life experiences.
Lead beater et. al., (1999). Found that only girls delinquent behaviours were significantly associated with their level of stressful life events. Aseltine and Collegues (2000). Found that delinquent behaviours among 9th, 10th and 11th graders predicted higher levels of life stress and conflict with family members. However, was that adolescents they did not control for earlier levels of stress in the equations predicting later stress from earlier delinquency i.e delinquency is associated with change or increased risk for stressful events over time.

**Stress and Emotionality**

The term, state anxiety is used to refer to the emotional reaction or pattern of response that occurs in an individual, irrespective of the presence or absence of objective danger of a student apprises a situation as threatening (Lazarus, 1966).

Brooks-Gunn and Warren et. al., (1995). Research on whether down ward trend in emotions continues or reverse in middle and late adolescence is stressful life events and research indicate that number of stressful life events are out or even declines in later. There is a significant effect of negative event in early adolescence on stress.
Haan (1993) found that the correlation between stress and negative affect emerged between the fifth and sixth and seventh and ninth grade students. For the younger age period life stress was not significantly related to negative reflect and they proposed that developmental changes across this age span, such as increased cognitive awareness of the implications of negative events, may make older youth more sensitive and emotionally vulnerable to negative life events.

Eisenberg et. al., (1997). Examined the extent to which daily range of adolescents positive-to-negative emotion remained constant versus changed across the association of emotional experience with other variables specifically life stress and adjustment. They found that there is high significant relationship between the changes in early adolescence and emotional experience and there is a close relationship between emotional experience and stress and adjustment variables.

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Despert (1965) in her history of the emotionally disturbed child noted that the use of this term to denote "problem" children is only a product of the past quarter of our century and reflects on evolution in our attitudes toward maladjusted children.
Stress and Perception.

Lange, Clare and Byrd, Mark (1998) studied on perception of financial distress and feelings of psychological well being in school children. They found that the ability to meet their daily financial needs, the negative effects of long-term debt, perceived levels of financial understanding and control individuals, perception of manageability and students levels of psychological well being. All these are the results from stressful events. Yamamoto, Kaoru; Whittaker, Jean and Danes (1988) examined the relation between stress related perceptions and stressful events in children. They found that there is a significant relation between stress related perceptions and stressful events and suggested that the importance of learning and knowing children and interpretation of every day experiences. Child as rejecting deserting threatening or sharing.

Hiramoto, Raymond et. al., (1999). Investigated that perception of stress in children. They found that how stress can influence the children perceptions. Effects of stress and the perception of other stimuli the Central Nervous System (CNS) and immunity. The relationship between body temperature changes and drugs or handling. The
relationship between endogenous opiates and changes in the temperature. The role of the adrenergic system and adrenocorticotropic cell activity. The perception of stress induced by handling or rotation raises or lower body temperature and heightens Natural Killer (NK) cell activity.

Stress and Education

Jackson and Getzel (1963) conducted a study on educational problems in the lives of early adolescents. They found that the major sources of maladjustment in schools were: (a) lack of intellectual ability (b) failure in socialization (c) personal maladjustment (d) lack of parent/teacher/peer group identification (e) economic and cultural deprivation (f) low religious status (g) unfavourable social attitudes.

Sterling et. al., (1985) Cowen et. al., (1984) suggested that the cumulative life changes are significantly related to low academic performance and adjustment problems and also showed a relationship between life stress and behaviour problems. The life stress scores of children and early adolescents were significantly related to mental status, decreased level of self esteem, delinquent behaviour and school performance.
Siu, Aaron and Walkisn, David (1997). Investigation on the influence of gender, age, and the self concept, coping with stress in Hong Kong children, were authors reported pressure for academic stress was major source of stress, problem focused coping is the most frequently utilized coping method by Hong Kong male and female children. Females are seek social support. There is gender difference in using coping methods. Higher self-esteem, social support is associated with utilizing coping method.

Burnett, Paul and Fanshawe, John (1997). Conducted a study on measuring school-related stressors in early adolescents using a children stress inventory. They found negative attitude to academic work, disinterest in subjects and negative feelings about school administration, lonely feelings, rejection by the peer group were related to children and adolescents stress.

Bo Ekerts, Monique and Roder, Irma (1999). Examined stress, coping and adjustment in children, with a chronic disease. They reported the academic and psychological adjustment, cope with disease-related stress, effectiveness of coping strategies, social withdrawal and depression, were related to stress, coping and adjustment in children.
Ross, Shannon, Neibling Bradley, and He Ckert, Teresa (1999). Research findings suggested that interpersonal, intrapersonal, academic and environmental aspects are more significant stress producing factors among children. There is a chance to easily get stress related aspects than the other stressful life events.

In a study of the early and mid adolescents in England and in the United States, West et. al., (1982) found that the extent of academic stress was the same in the two samples. The four factors of stress that emerged were parental stress, peer stress, importance of school and fear of failure. The variables, social and individual differences were the major contributing factors to academic stress.

The study of school-related stress in children with and without disabilities indicated that students without disabilities scored higher on scales related to academic stress and academic self-concept. However, only the inter-group differences at the high school level on the peer infractions and academic stress scales were statistically significant (Helms, 1996).

Sears and Milburn (1983) in their book stress in children and adolescents summarized the typical stress of school-age children. As the
main developmental task of this stage concerns schooling, many of the stresses are school-related. School related problems, in general are test taking, school fears, for example, home work, and fear of failure or success, including school phobia.

Bossong (1985). Studied the influence of stress on 88 secondary students of approximately 15 years of age. SS wrote comments on 1 of 4 fictitious results obtained from empirical studies and then completed assessing school related stress and anxiety. The fictitious results created four experimental conditions: they made no mentions of stress, merely mentioned stress, or indicated that a low or high proportion of students in the reference group experienced severe stress. They showed that mere mention of stress in the fictitious study did not influence secondary students perceptions of experienced stress. However, exposure to fictitious study results indicated that a high proportion of reference students experiencing severe stress resulted in increased indications of stress on the questionnaires.

Ahluwalia and Nirmaljit Sidhu (1969). The present study is concerned with a survey of personal problems of some selected adolescent girls and on assessment of the effect of personal problems on
the academic achievement of these girls. 260 adolescent girls report to have the maximum number of problems in the area of school, society, where as they have marked the minimum number of problems in the area of "health". Emotional problems appears to have greatest evil effect on academic achievement.

Rajendran and Kaliappan (1991). An attempt was made to develop a compromise scale for measuring students academic stress a sample of 100 high school boys 12 - 15 years Student Academic Stress Scale. Results of the factor analysis shows the out come of four factors. They were labelled as: personal inadequacy, fear of failure, interpersonal difficulties and lack of study facilities.

Harris (1972) found a significant correlation between stressful life-events and the academic performance of students. The high levels of stress were associated with relatively poor grades.

Dobson's (1979) studied that 66% of the students reported that being a student and preparing for examination was causing them 'a lot of stress' of extreme stress. Kohn and Frager, (1986) felt that excessive homework, term papers, examinations and studying for examinations are the most significators leads to develop academic stress in children.
Thomas (1987). Investigated study on search for "stress profiles of early adolescent students" school works and homework, fear of the unexpected, exhaustion and lack of concentration were quoted to be the most severe stress symptoms.

Kaufman, David et. al., (1998). Examined how a major curriculum revision and year of study affected stressors reported by students. 83 students in the final class of a conventional lecture based curriculum were compared to 84 students in the first class of a new Problem-Based Learning (PBL) curriculum, at the end of 1st and 2nd year, on a 27 item stressor checklist. Results indicate that there were differences between the 2 curricula and years in relative frequency of stressors marked by students. However, ranks of stressors were highly correlated among all groups, and the 5 highest ranked stressors were identical for the PBL and conventional groups. It is concluded that curriculum differences in 1st and 2nd year medical school may not necessarily cause differences in the overall pattern of stressors, although frequency of some stressors may be significantly different.

Daugherty, Timothy et. al., (1999). Examined the eventual dropouts in terms of academic ability, family legacy status specific stress
perceptions and self-perceived social alienation among eventual dropouts of the academic and psychosocial variables was found to be predict attrition, and were associated with increased vulnerability to attrition.

According to Lazarus (1961) stress is the internal response of the individual to pressure - when the pressure experience is greater than normal ability. Results suggested that school situation, this pressure may be accountable for individuals success and failures. This kind of stress (academic stress) is important factor accounting and showing more impact on academic achievement.

Bisht (1980) studied the effect of school-climate and need for high achievement on the academic stress of students. Results found that the school children did not shown any effect on academic stress independently, but their interaction was statistically significant among the four components of academic stress-frustration, conflict, pressure and anxiety.

Baker, Jean (1999). Examined teacher student interaction and relationship quality among poor, urban African - American children expressing differential school satisfaction and suggested that perceptions of a caring supportive relationship with a teacher and a positive class
environment were related to school satisfaction and children's relationship with others as an important variable in learning and in light of contemporary movements within education that stress the importance of relationship in schooling.

Manju, Vani (1998) studied the influence/impact of sexual type of school perception of the school environment in a sample of 514 high school students (12 - 14 years). Results reveal that boys and girls differed significantly in their perception of psychological as well as physical environment of the school. Girls viewed their school environment more positively than boys of unisex schools. Both boys and girls of unisex schools perceived their school environment to be better than students of coeducational schools.

Gadzella, Bernadette et. al., (1998). Studied the relationship between stress and learning strategies, and the tendency are reported that effects of stress on cognitive appraisal, frustrations and changes, conflicts and changes, physiological and total stress with change, physiological and emotional and test anxiety can influence the learning strategies.
Wenz - Gross, Mélodie & Siperstein et. al., (1998). Compared the stress, social support, and adjustment of 40 students with learning problems due to learning disabilities or mild mental retardation and 396 general education students without learning problems, in middle school (Grade 6, 7 and 8). The authors examined stressors related to academics, peers, and problems with teacher / rules and overall felt stress; social support from family, other adults and peers; and adjustment including feelings about self and liking school. The relation between stress, social support, and adjustment also was examined. Students with learning problems experienced more stress, less peer support, greater adult support and poorer adjustment than did those, without learning disabilities. Adjustment was related to students' stress in middle school.

Spencer, Margeret Beale et. al., (1998) potential stressors during early adolescence include physical characteristics, peer acceptance and familial expectations, pubertal timing and stressful experience have previously been identified as affecting academic achievement. This study examines the impact of those constructs on early adolescents learning experiences and behaviour as potential mediators of achievement variables. For boys, independence linked hassles were a positive
predictor of LR (learning) while negative life events predicted negative learning presence attitudes. For girls negative life events predicted LR and presence for group learning - while independence linked hassles predicted the learning presence pattern: negative learning (attitudes) learning preference.

Sociological Causes of Stress

The importance of individual and environmental factors that can influence vulnerability in relation to stress has now gained general acceptance. Children are not strangers to stress, over a significant span of human history they have been more often the victims of the stings and arrows of an un-caring society than recipients of its beneficent protection.

Despert (1965) writes, "to recreate in one's mind the physical hardships, it is even more of a challenge to envision the inner feelings of the stunted young beings at work. Maccoby (1980) says that the child as victims" in her portrayal of stressors of childhood in England and American colonies whipping at home, in school and child abuse. The studies of Rutter and associates (1979) provide evidence that social organisational factors influence behaviour in childhood.
Children activities also serve as a forum for the socialization of cultural knowledge and practices. Children's patterns of time use have highlighted individual, subcultural, and cultural differences in patterns of everyday activities. The physical, cognitive and motivational demands of children daily activities may constitute important development opportunities.

Developmental significance of children activities by measuring the links between how children spend their free time (specifically, sports, hobbies, playing with toys and games, outdoor play, reading, television viewing and hanging out) and their adjustment both as they move from middle childhood into early adolescence.

There are several reasons why middle childhood may be an especially important developmental period in which to study free time use. Although time use varies less in early childhood by adolescence, social class differences in time use are pronounced, suggesting that important individual and group differences may emerge in middle childhood. Middle childhood has been described as a time of "industry" when children attention is directed at becoming competent in a range of important skills.
Early adolescence is described as a period of flux: Time when previously well adjusted and happy become distressed, persons, behaviour, personality, and experience discontinues overtime as well as a time for "second chances and opportunities to reinvent oneself and normative life changes and events is disruptive for many younger. (Freud, 1946, Gurian, 1996; Larson, 1984; Erikson, 1968).

Coleman (1974) emphasized that individuals may differ greatly in their experience of transitional period, some adolescents experience the life changes of transitional period as spaced out over time allowing them to cope and adjust to each one without experiencing major disruption.

Leadbeater, Blatt and Ounlan, (1995). Research was to provide a more gender sensitive evaluation of children social cue interpretation processes than has been achieved in most previous studies. This studies have focused on the way's in which children process social information about social contexts that been shown in stress research to be most sailient provocative and destressing for males.

Bronfenbrenner (1979), Silbereisen et. al., (1986). From their developmental perspective, time use marks opportunities for learning and practising particular competencies and skills which in turn may foster identity development, studying children who were resilient in the face of stressful life circumstances.
Larson and Richards, (1989). Cross-cultural analysis reveal that social differences in the time children spend on work, school, and leisure activities are marked, with US children notable for their sizable quality of free time; whether free time in middle childhood constitutes a source of stress and mental health problems because children are hurried by frenetic schedules of extracurricular activities, a missed opportunity for academic learning or an occasion to develop social, cognitive, and physical competencies and social bonds has been a topic of speculation.

Crick and Grotpeter (1994) in their studies have demonstrated that, similar to physical aggression, relational aggression is associated with significant social psychological adjustment problems for children. (e.g., peer rejection, internationalizing difficulties, externalizing problems, border live personality features. They found that there is significant effect of all the social, psychological problems on depression were they used children's feelings of distress procedures.

Kilmer, Ryan et. al., (1998). The frequency of occurrence of 30 stressful life events and circumstances (SLE-Cs), most major and chronic stressors, was compared among 1,179 African American, White, and Hispanic 2nd to 6th - grade, poor (76% eligible for the or reduced-cost
lunch) urban children, and their families. Parents completed a Life Events Checklist (LEC) reporting all SLE-Cs experienced by child and family. Factor analysis identified a factor solution for the LEC. Family Turmoil, Poverty, Family Separation/ Social Services, Injury / Illness, and Unsafe / Violent Neighbourhood. Although the 3 groups did not differ in overall number of SLE-Cs reported, there were significant group differences on 15 of the 30 LEC items distributed across all 5 factors. Implications of these findings, both for identifying future research directions and framing preventive interventions, are considered.

Repetti, Rena et al., (1998). Conducted a study on daily stress and coping in childhood and adolescence. They suggested that stress is result from negative experiences in life and feeling of rejected by peers or over hearing an argument between parents were negative experiences are more stressful producing factors in childhood and adolescence.

Davey, Tim (1998) conducted study in relation to homeless children and stress and its effects on children behaviour and family environment. They suggested stress can influence family shelter facilities, industrial and environmental level, and psycho-social effects on children.
Bowker et al., (1998) Harrist et al., (1997). Investigation on social anxiety and peer exclusion are conceptualized as key proximal determinants of elevated solitude in children, and how these events are correlate with stressful events research bounding suggests that there is a positive relationship between peer rejection and peer exclusion and the ability of peer rejection to partially mediate the relationship between socially withdrawn behaviour and others forms of overt peer mistreatment and they found that there is a significant relation between peer mistreatment and stressful events.

Wheaton, Blair (1999) discussed social stress in children. They are focusing on problems with the concept of a social stressor in particular and variety of stress concepts finally total effects of these in stress in children.

Holahan, Charles and Bonin, Liza (1999) conducted a study on social context and depression. An integrative stress and coping frame work. The context of individual treatment preventive interventions with children and females are related to stress and coping and health, residence, and adoptive competence are also related to children social stress.
Segrin, Chris, (1999). Study to determine the extent to which social skill and stressful life events predict the development of psychological problems. At time 1, 142 students completed a laboratory interaction and measures of social skill and depression, loneliness, and social anxiety. At Time 2 (four months later) an Time 3 (nine months later) participants again completed measures of psychosocial problems and a measure of stressful life events. Results indicated that poor social skills are causally linked, in small magnitude, to loneliness and anxiety, but less so to depression. All psychosocial problems worsened over time as a function of experiencing stressful life events. There was no evidence to suggest that social skill worsen over time as a function of experiencing depression, loneliness, or social anxiety.

Social stress to predict externalizing problems over time has been rare Aseltine, Gore and Gordon (2000). Association between life stress and early adolescent depression and anxious mood is fairly well related to stressful life events, actual predict change in internalizing problems over time.
Stress and Social Support

When we talk about the combination of chronic and acute stressors we would be talking about one variable, such as social support which would tend to reduce the effect of stressors and tend to reduce the effect of stressor. They are usually termed as protective factor (Rutter, 1970). Thus researchers have increasingly focused on the importance of social networks and close personal relationships in reducing stress in children (Bowlby 1969, 1973, 1980).

Du Bois, Felner and Brand (1992). Examined the relation of stressful life events and social supports to psychological distress and school performance in early adolescents and found that both stress and support variables made significant of psychological distress, whereas stresses alone predicted the school performance.

Baxter, Abigail & Kahn, James (1999). Investigated the needs, supports and stress of urban minority families living in poverty often affect family functioning more than they affect children's developmental needs. Attention to changes in these variables may enable interventionists to better serve children and families. Authors investigated the needs, supports, and stresses of 37 families of children
enrolled in an urban early intervention program at the beginning of the program and approximately 12 months later. (Families in the program had a child with a diagnosed developmental disability or one at risk for developmental delay). At both assessment points, caregivers reported food, shelter, transportation, medical, informational, and personal time needs and feelings of stress. Families' support networks included family members, friends, and professionals that could be mobilized to meet needs and reduce stress. Significant differences in scores from program start to 12 months later were not found. Qualitative changes in caregivers' needs, stress, supports and the interrelationships among these variables were found. Involvement in the early intervention program may have influenced families' needs, stress, and supports.

Wenz, Gross, Melodie et.al., (1997). Examined stress social support, and adjustment of adolescents of middle school - they suggested relate differing types of stress and social support to students self concept, feelings of depression and disliking of school, higher academic stress and less emotional support from the family were related to lower academic self-concept. Emotional support from the family moderated the influence of peer stress on feelings depression - problem solving support from adults outside the family moderated the effects of teacher / rules stress on adolescents liking of school. The importance of identifying the linkages between types of stress, Social support and adjustment.
Yarcheski, Adela & Mahon, Noreen et. al., (1999). Examined social support as both a mediator and a moderator of the relationship between perceived stress and symptom patterns in early adolescents. Data were collected from 148 boys and girls, aged 12 - 14 years. Who responded to the Perceived Stress Scale, the Personal Resource Questionnaire 85 part II and the Symptom Pattern Scale. Using multiple regression analysis procedures specified for the testing of moderation and mediation, results indicated that social support did not play a moderating role in the relationship between perceived stress and symptom patterns, but social support did play a mediating role in this relationship. As expected, perceived stress contributed positively to the symptom patterns reported by the Ss. The more perceived stress experienced by Ss, the more likely they were to report such symptoms as headaches, sleep disturbances, loss of appetite, and an upset stomach. Results found that perceived social support does not interact with perceived stress to determine the level of symptom patterns experienced by Ss. The findings are interpreted within the 2 major theoretical orientations that guided the study.

Printz, Shermis and Webb (1999) looking at the influence of support from family and peers, family support appeared to be more
critical for healthy functioning than support from friends. In respect to problem-solving, and adolescent's appraisal of how effective he or she is at solving problems appeared to have a greater buffering effect than actual problem-solving skill. The authors proposed some possible school-based interventions such as working with adolescents to improve their cognitive and behavioral responses to daily hassles in order to reduce potential accumulating effects of chronic stress.

Grant (2000) study whose parents demonstrated superior parenting skills would be protected from illness despite high or low levels of stress. Researchers divided the sample into four groups based on stress levels reported using the Family Inventory of Life Events (FILE), a family-oriented inventory of life events designed to assess the impact of stressors in multiple family members, and parenting risk ratings. Only 5.3% of children in families with low stress and adequate parenting developed asthma, compared with 25% of children in families categorized as having high stress and problematic parenting. Also 4.4% of children in families with high stress and adequate parenting and 10.7% of children in families with low stress and problematic parenting expressed asthma.
Susan (2001) said that school children may be exposed to trauma in their personal lives or, increasingly, at school. Classroom teachers can help prepare children to cope with trauma by understanding the nature of trauma, teaching children skills for responding to an emergency, and learning how to mitigate the after-effects of trauma.

**Family and Stress**

The trauma for children of potential separation with its accompanying loss of parents has a universal stress quality. The first prototypic statement of what we today study as the toddler's response to the experimental strange situation was provided by Freud (1959), followed by Spity (1946), Gold Farb (1955) who studied the unfavourable long term effects of institutionalization of children effects of institutionalization of children on their intellectual and personality development, Bowlby's (1951) concept of affectionless character which was put forward in his work on attachment Rutter's reassessment of maternal deprivation (1972, 1979b, 1981), Dunn (1977), work on studies of development of emotion in infancy. But Kagan's (1983) model and method of distress evocation in year-old which reflect the beginnings of more systematic studies of stress responsiveness in very young children.
Parental divorce, differs from the stress event, namely the separation of the parents, generally takes place following a rather prolonged period of discord and disharmony (Wallerstein and Kelly, 1980) clearly show that, in many children, emotional disturbance tends to worsen immediately following a divorce. It would appear that the circumstances associated with the divorce do constitute an additional stressor which may aggrevate or precipitate emotional difficulties.

There are no comparable studies of children in which the effects of different types of stress are contrasted systematically. With respect to hospitalization, the most obvious feature is the child age at the time. Distress is more marked in those aged, age when selective attachments are farming and yet when children are only just beginning to be able to maintain relationship during a period of separation the implication is that the interference with attachment implicit, may constitute one of the features first young children's distress is much reduced by either daily visits or the presence of a familiar person such as a parent or a sibling. Second individualized family care during a period of separation from the family reduces young children's distress (Robert Son and Robert Son, 1971) and a supportive relationship with a consistently present reduces emotional disturbance. Nevertheless there are indicators to suggest that
stress seems that persisting disturbance is more likely if the child comes from a deprived or disturbed family, or if the previous parent-child relationship often separation is strongly connected with the quality of the mother-child relationship. The implication is that the nature of the parent response to a child's difficult and behaviour may help to determine whether the emotional distress is rapidly alienated, and also evidenced more prohibitions, confrontations, and negative verbal interactions. The development of emotional and behaviour problems in liked to temperamental variables and with the mothers mental state (children of depressed mothers were more likely to exhibit signs of withdrawal as well as with changes in the mother-child relationship).

Kliewer, Wendy, Fearnow et. al., (1998). Explained that threat appraisals are a key component of the coping process, yet little is known about the factors that influence children's perceptions of threat during stressful situations. The present study examined predictors of threat perceptions in response to everyday stressors among 215 4th and 5th graders (aged 9.2 - 12.2 years) and their parents and teachers. Children's internal resources, the family environment, and qualities of the stressful encounter were studied for their contributions to perceptions of threat. Children's ratings of maternal and paternal acceptance and maternal
ratings of family expressiveness were associated with lower perceptions of threat; children's ratings of other-culpability were associated with higher perceptions of threat. Although threat perceptions were associated with coping behaviour, threat perceptions did not mediate associations between family, contextual, or dispositional influences and coping.

Compas et al., (1988) focused his attention on psycho social stressors such as family turmoil (inter personal conflict) and disruption (marital separation) (divorce) or adverse social circumstances (violence) all these stressful life events are directly influence the children's behaviour and increase the stress in children.

According to the Davis and Cummings (1999) preserving emotional security is a significant goal for children in the inter-parental relationship and is a primary process that mediates the direct effects of inter-parental conflict and significant stressful factors on children. Research hypothesis suggest that a child goal of preserving emotional security is, from exposure to destructive histories of parental conflict. Emotional security in contexts of parental conflict motivates responding there component process. (1) heightened emotional reactively
characterized by prolonged, disregulated distress; (2) regulation of exposure to parental effect manifested by elevated involvement in and avoidance of conflict; and (3) hostile internal representations of the meaning that inter-parental have for the welfare of the self and family the resulting insecurity in turn has been hypothesized to increase children's psychological problems and these problems are directly leads to stressful events in children.

In their study Lamb and Bartolovic (1993) found that family problems on high school students were reported experiencing stressful events were related to school, family friendship, health and transpiration.

Rohner (2001). Theoretical models of child rearing mostly comprise two dimensions, which can be described as "acceptance / warmth Vz. rejection" parental acceptance and rejection is a continuum, which marked by parental acceptance one, one hand and parental rejection in their end. Parental rejection is usually expressed in any one or a combination of four different farms of behaviour patterns (1) cold and unaffectionate (2) Hostile and aggressive (3) Indifferent and neglecting and (4) undifferentiated rejecting. He said that these aspects are sometimes may cause for psychological stress.
Grych and Finoham, (1990) Harold and Covger (1997). Researchers investigated that children from homes characterized by high levels of parental conflict are at increased risk for developing psychological problems, parenting difficulties accompanying inter-parental conflict may account and stress experienced by children exposed to aversive marital interaction is also a direct source of risk for children.

Flinn, Mark (1999). Discusses how and why stress responses may affect child health and overviews results from the study of stress harmonies family environment and health among children living in a rural village. There association indicate that family for children living in this region.

Adams, Winston (2002) in their study 90 percent of families with children injured in a traffic crash, the child or a parent will suffer at least one significant acute stress symptom, according to a study at the children's hospital of Philadelphia. 25 percent of children and parents experience more pervasive symptoms that warrant clinical attention, offer guidelines for assessing acute stress symptoms in children and parents. The study investigated the range of acute stress symptoms in children and their parents to enable pediatricians to better identify and
address the psychological impact of injury, "Evidence about the prevalence of these symptoms in injured children can help physicians distinguish between normal reactions to trauma and reactions that require further care". The children's hospital researches found that acute stress symptoms were common within the first month after injury. Among injured children and their parents, more than four-fifths experienced at least one significant acute stress symptom. About one quarter of children and parents experienced broad acute distress, reporting symptoms, with the injured child, the parent, or both reporting broad distress. Symptoms did not always co-occur in both parent and child.

**Financial Causes and Stress in Children**

Developmental literature has little is knowledge about the actual condition that poor children face in their daily lives. This is true for the rural poor, who constitute the majority of impoverished children in the world. Some studies consistently reveal that low-income urban children experience more stressful events than do other middle class, urban counterparts. Attar, Guero, and Tolan *et. al.*, (1994).
Mayer (1997) investigated of income differentials in stress exposure combine psychosocial stressful events and circumstances into a single, additive index of exposure to multiple physical and psychological stressors is a key unique aspect of the environment of poverty.

Arnett, Jeffrey Jensen et. al., (1999) view that adolescence is a period of heightened "storm and stress" is reconsidered in light of contemporary research. The author provides a brief history of the storm-and-stress view and examines 3 key aspects of this view; conflict with parents, mood disruptions, and risk behaviour. In all 3 areas, evidence supports a modified storm-and-stress view that takes into account individual differences and cultural variations. Not all adolescents experience storm and stress, but storm and stress is more likely during adolescence than at other ages. Adolescent storm and stress tends to be lower in traditional cultures than in the West but may increase as globalization increases individualism. Similar issues apply to minority cultures in American society. Finally, although the general public is sometimes portrayed by scholars as having a stereotypical view of adolescent storm and stress, both scholars and the general public appear to support a modified storm-and-stress view.
Stress and Personality

The importance of individual and environmental factors that can influence vulnerability in relation to stress is an accepted notion. Despite the fact that the specific influences that account for differential responsiveness to stress too often remain speculative. The growth of interest in children's personality in relation to behaviour pattern as become significant aspect of recent research. Dunn and Kentrick (1980), and in children responsiveness to stressful events (Rutter and Quinton, 1981). These studies through a question whether we can reasonable predict stress proneness on the basis of individuals motives, goals and behaviour reinforcement.

According to Bio-psychosocial interactional model Type-A behaviour pattern (TABP) gets stimulated in constitutionally predisposed persons who perceive the situation as demanding and challenging. Type A's with their cognitive, affective and overt behavioural styles seek out and construct stress-endangering situation. Type-A's have a tendency to set higher goals the achievement of which lies beyond their performance falls well below the level of aspiration and resulting discrepancy leads to stress (Ward and Eisler, 1987).
Type - A's perceive their opponents hard - driving and competitive and their overt expression of hostility and competitiveness, which stimulates hostile and competitive behaviour from others, may arouse stress. Smith and Andarson (1986). Developed by the biopsychosocial interaction model, study in Type-A are productive and hence, their choice of career, selection of goals and performance standards are likely to create further challenges which may enhance the stress experienced by children and early adolescents.

Herlbrun and Friedberg (1988) have opined that hard driving competitiveness of type-A's create pressurized situations and their hostile, irritable, time urgent, impatient tendencies argument the stress once aroused. Type A's behavioral style exhibits impatience, restlessness, and aggression, and creates interpersonally conflicting situations that may lead to chronic elevations in stress (Toweiber et al., Hicks, Green, and Halebian (1989) suggested that student population have provided substantial evidence in favour of the positive association found between TABP and student stress. They have reported that Type-A children and adolescents have experienced more stress as compared to type - B personality children and adolescents.
Van Egerin, (1991), Thoresen and Powell, (1992) examined the type A behaviour pattern and stress among students. Students experience certain amount of stress during the year. They were used Type-A behaviour pattern-students scale and were suggested that TABP seems that a style of behaviour which is characterized by impatient, hard-driving competitive hostile - irritable syndrome is not only sanctioned culturally but strongly reinforced by competitive society. They conclude that Type-A behaviour pattern is the variable of crucial importance a sprit arguments the stress.

Matthews (1982), Keefe and Smith (1988). Psychologist have proposed various theories for explaining the relationship between TABP and stress, provide information about Type-A nature and help to explain how TABP generates stress and increases the psycho physiological reactively in Type-A persons. They hypothesized that there is no significant difference in the amount of stress experienced by the female and male students. Research evidence suggests that there were faculty differences on stress. In addition to the faculty, TABP in students had also been found to arouse stress independently undoubtedly is one of the stress - causing factors for students. However, differential amount of stress encountered by students belonging to defendant faculties may be due to the factors other than Type-A behaviour.
Beck (1967). Research findings discussed the characteristic of depressed patients in respect of self-regard ideas of deprivation, self-criticism and self-blame besides. They had exaggerated ideas of duties and responsibilities, frequent self-commands and suicides tendencies it can be thus, inferred that children who happened to be emotionally unstable are likely to have depression.

Holland, Alyce et. al., (1999). Investigated how the personality and social characteristics were related to students choose to be remembered after high school and provided information demographics, parental characteristics, personality traits, participation in school activities were associated with increasing with the stress level. Social activity participation, high school academic rank, mother's education were high correlates with students stress.

Gillack, Karen et. al., (1999) examined the stress, support and academic performance among school dropouts and found that academic achievement and emotional support was caused to most severe symptoms of stress. Stewart et. al., (1999) conducted study to find out the relationship on prospective analysis of stress and academic performance and identified personality variables predisposing to stress (optimise and trait anxiety), stress response (depression and state anxiety) are stress producing factors in students.
Stress and Gender Difference

The other important personal quality of the child that influences stress is the gender of the child. Stress response across gender appear to be saying that boys are more vulnerable (Rutter 1970, 1982). The evidence is least striking with respect to the effects of hospital admission, but there has been some tendency for males to show adverse effects (Rutter, 1981b). Dunn et. al., (1981) found that boys were more likely than girls to show an increase in withdrawal behaviour (sex differences for other forms of behavioral change were not statistically significant). With divorce, both Hetherington, (1980) and Wallerstain and Kelly, (1980) found that disturbance tended to be more severe and more prolonged in boys. Similarly, there has been a tendency for boys to show more behavioral change in response to day-care Rutter, (1981b) and more aggressive behaviour in relation to parental discord and disharmony (Rutter, 1982).

By using five-wave auto regressive model covering the full span of adolescence. Proposed reciprocal relationship between stressful life events and adolescent maladjustment operates and to determine whether it exist during each of the three stages of adolescence early, middle and late subsequent evidence of mutual influence during middle and late
adolescence can be thought of as replications of positive results during early adolescence. In this situation, the resulting path coefficients between stress and adolescent maladjustment can be interpreted as reflecting the degree of change in the predictor measures resulting from its association with the predictor variable (Kessler and Grinberg, 1981) consistent that there would be no gender differences in the association between stressful life events and either delinquency or emotional distress.

Gore et. al., (1992) found that parental mental illness did not relate to adolescents depressed mood when undesirable life events, which were significantly associated with stress. Although the girls in their study reported a higher number of negative events than did boys. There was no difference in the impact of stressful life events by adolescent gender. Boys were as vulnerable as girls in response to negative life events.

Katyal, Sudha, Vasudeva, Pramila, (2001). Explores gender differences among adolescents in the areas of academic stress parental attitude, parental aspiration, achievement motivation. Intelligence, anxiety and attitude towards school. 150 adolescents moderate to high
academic stress was noted among all adolescents. Girls experienced significantly higher academic stress and anxiety than boys—mothers were more authoritarian and less democratic towards girls than boys. Fathers had higher aspiration for boys than for girls.

Saraladevi and Niranjali Devaraj (2001). This study examines gender differences in examination stress and manifest anxiety examination stress questionnaire (Taylor). Results were analysed, findings show that examination stress and anxiety were related to each other—girls were having more examination stress and anxiety.

Conger's (1977) review indicates that females appear to experience few were and less stressful conflicts over the development of independence than do males particularly in early adolescence. Conger indicated that males are more likely to be actively engaged in establishing independence from parental control, to be concerned with issues of self-esteem and achievement of responsibility for their own action, and to be more preoccupied with issues of self control. (e.g., control of temper and impulsiveness).

Conger's (1977) findings are applicable to adolescence, the possibility however, while tempting, is speculative. A possibility with
more research support is that the two positions look at different manifestations of the same phenomenon. Rutter, Graham, Chadwick and Yule (1976). Examined the study concluded, along with American studies as summarized by Conger, that parent-child alienation is not a common feature unless adolescents (14-15) have already showed psychiatric problems. In addition, the study supported Congar in finding that when alienation existed, it was more common among males. However, the study also concluded that inner turmoil, as represented by feelings of misery and self-depression was quite frequent and more common among females. Thus, it may be this manifestation of stress.

Gove and Herb (1974). Studied their familiar theme of differential stress and hypothesized that middle adolescence brings an increase of stress for females and a decrease for males. The feminine sex role is thought to become more stressful first because there is a sudden narrowing of the sex role, in that the female is restricted from engaging in activities that are then deemed too masculine. Such a precipitous constriction of sex role is thought to induce conflict and anxiety since these activities have most likely been integrated into personality. This type of stress is that females who were once rewarded for academic success find, in adolescence, that they should not surpass men. Consequently, they come to fear success.
Locksley and Douvan (1968) reported that objective academic achievement was associated with less stress for adolescent males but not for females. Indeed, they found that females with high grade point averages were more depressed and reported more psychosomatic symptoms than males with high grade-point averages, and they were not significantly less aggressive than females with low grade point averages. Locksley and Douvan suggested that the reason why actual academic achievement did not reduce stress in females is that grades constitute a basis for social comparison with peers, precipitating conflicts over standards of femininity and sexual desirability and that the anticipated ramifications of academic achievement for future work and family plans are conflictful for females. Garai's, (1970) conclusion that for males happiness appears to be highly correlated with some strong vocational interest that manifest itself frequently during puberty or even earlier, whereas females are more interested in interpersonal relations. Consequently, though commitment to vocational goals, as signified by successful academic achievement, may serve to mitigate the stress of adolescence for males, for females such success may paradoxically precipitate even more stress.
Grower, Thomas, and Shoffner (1992). Conducted a longitudinal study of school adolescents to investigate developmental and gender influence on stress and coping. Life stress was measured through Adolescent Life Event Scale (ALCES) and the ways of coping through open-ended questionnaire. Girls reported more life events stress in both tests than boys. Life events stress was greater in a later testing of both girls and boys, but girls scores increased more.

Julian Ford, (1998). Study the gender differences in early adolescent stress and founded that adolescent boys and girls experience equal amounts of stress, but the source and effects may differ. Girls tend to become stressed from interpersonal situations, and stress is more likely to lead to depression in girls than in boys. For boys, however, specific events, such as changing schools or poor grades, appear to the major sources of stress.

Rudolph, Karen et. al., (1999). Examined age and gender differences in the experience and consequences of life stress in clinic references to pre-adolescents and adolescents, and their parents completed the Child Episodic Life Stress Interview. Interviews were coded an a contextual threat rating method to determine events
stressfulness and dependence. Pre-adolescents were defined as 8-12 years old and 13-18 years old we categorized as adolescents. Youngsters also completed the Children's depression Inventory (Kovacs, 1980, 1981) and the Revised Child Manifest Anxieties Scale to assess self-reported symptoms of depression and anxiety. Consistent with predictions, age and gender-related patterns of life stress varied across the type of category of stressors. Adolescent girls experienced the highest levels of interpersonal stress, especially stress and conflict that they generated within parent-child and peer relationships. Preadolescent girls experienced the high levels of independent stress and conflict in the family context, adolescent boys experienced the highest levels of stress associated with self-reported events. Girls demonstrated particular vulnerability to depressive responses to dependent stress.

Dodia, Geeta (2001). Assesses the anxiety level of as a faction of gender and economic status 191 adolescents statistical analysis revealed significant impact of economic status but not of gender on the anxiety level of adolescents.
Children's Coping to Stress

Coping, as a construct or as a descriptor, refers to a special class of individual reactions to stressors. It is a reaction to a stressor that resolves, reduces, or replaces the affect state classified as stressful. The coping reaction chosen to deal with a specific stressor will vary with the affect generalized, as well as with the child's history and temperament. There is extraordinary variation among children in selection of a coping response.

Thus the coping process itself (i.e., what the person does about the stress situation), include individuals attempts directly to alter the threatening conditions themselves, and the attempts of change only their appraisal so that children need not feel threatened i.e., coping must have the dual function of problem-solving and of a regulation of emotional distress. Similarly, the means of meeting these objectives may involve both manipulation of the environment and intrapsychic processes.

Various attempts have been made to classify the different types of coping mechanisms. Hann (1963, 1977), have made a differentiation between coping mechanisms (Which are seen as healthy, reality oriented, and conscious), defense mechanisms (Which are regarded as rigid,
distorting, and involving unconscious elements), and fragmentary processes (which are repetitive, unresponsive to requirements, and determined by affect needs). However, although the Hann (1977), model has some limited empirical support, these distinctions have not proved particularly helpful so far, and they seem to be based on a host of unwarranted assumptions (with respect to the use of terms, the grouping of attributes, and the concept of their constituting a personality dimension). Lazarus and his colleagues (1978, 1980) have proposed a classification based first on whether the function is to alter the troubled person environment transaction, or to regulate emotion (i.e., problem-solving or palliation); and based second on the coping mode used. (The coping modes are subdivided into information-seeking, direct action (either on the self or the environment), inhibition of action, and various intrapsychic modes. These categories are, of course, rather broad, and it remains quite uncertain whether they reflect dimensions which related in any way to outcome. It should be added that coping can be anticipatory (i.e., initiated before an expected stressful encounter) or consequent upon the event (Lazarus, 1975). Thus, in anticipation, people may take on only those tasks they feel they can handle, they may insulate themselves against failure, or they may plan ahead and rehearse various solutions (Mechanic, 1978).
It is evident that some coping processes may increase the risk of maladaptation or disorder, while others may improve adaptation and reduce the risks of a deviant outcome (Lazarus et al., 1980). Hence, a further essential dimension is between effective and ineffective coping. The dilemma here is how to conceptualize, let alone measure, effectiveness. Obviously, the criterion of efficacy cannot be the avoidance of disorder, as that simply forces the tautology of successful coping being the "explanation" of resilience in the face of stress situations. "Solving" the problem cannot be used as the criterion either, as some problems do not admit of a solution. Discovering that you have an incurable cancer is, of course, extremely stressful, but whether that stress leads to depression need not depend on a new medical discovery which brings cure. Resolution of conflict, too, cannot be employed as criterion as, in some circumstances, conflict may be resolved in ways which are profoundly damaging to health or to social functioning. The issues are summarized in the Alcoholics Anonymous prayer: "God grant me the serenity to accept the things I cannot change, courage to change the things I can and the wisdom to know the difference."

It is clear that there can be no one (or even several) most successful coping strategy- the mode which is most effective is likely to
vary with the type of stress and with the circumstances. But it may also be the case that some strategies are between suited to one person, whereas others are more appropriate to another person or within a very broad range, does it not matter very much which coping mechanism is used so long as the obviously maladaptive and damaging ones are avoided? As Perlin and Schooler (1978) put it, "having a particular weapon in one's arsenal is less important than having a variety of weapons. The single coping response, regardless of efficacy, may be less effective than bringing to bear a range of response to life strains.

Intuitively, it seems that the coping process ought of play a role in determining the outcome following stress events. But, up to the present, both the concepts and the measures have proved elusive, and there is a lack of evidence that the particular coping mechanism adopted in fact matters at all in terms of the risk of psychiatric disorder (in adults or in children). But it may matter and the possibility should be studied.

Coping can be defined as a response of an individual under stress, individuals adopt different strategies when they encounter difficulties in their daily lives. Hence, coping strategies would vary as per the personality make up of the individual, the family set-up and extra-familial relationships outside the home which an individual develops.
Lazarus and Folkman (1984) defined coping as a purposeful effort undertaken by an individual in an attempt to manage or overcome stressful situations and the negative emotions that are associated with them.

According to Lazarus and Folkman (1984) there are two types of coping responses: problem-focused and emotion focused coping. Problem-focused coping is directed toward the resource of the stress, trying to deal with the problems by acquiring new skills and handling problem directly, which is characteristic of the problem focused coping.

Emotion-focused coping is directed toward a person's own personal reaction to the stressor, allow time to remedy the problem which is characteristic of emotional focused coping.

Appraisal focused coping is one's perception of a stressful situation. Children normally try to overcome their problems by using a similar technique which they have used in their past and accept the reality of the situation, which is characteristic of appraisal focused coping.
An inability to cope with early adolescent years may result in poor academic achievement and poor social relations (Ferrari and Parker, 1992), and feelings of hopelessness that can lead to suicidal thoughts (Dixon, Heppner and Rudd 1994).

Adolescents and children can cope with an event in many ways, such as direct conflict, cognitive reappraisal, withdrawal, emotional defusing, or focusing on positive events. Coping responses that work for the children and adolescent may not work best for another. The effective coping strategies like identifying and appraising the stressful situations, effectively responding and managing one's emotions lead to the development of a balanced personality (Cobb, 1992).

Lee and others (1992) examined the relationship between coping Styles and psychological distress in a non-clinical sample of Hong Kong Chinese adolescents. Results showed violence blaming as a significant and moderately strong predictors of psychological distress in problem areas. Factors analysis suggested that adolescents used relatively similar coping strategies.

Research studies focus on the different coping strategies used by the students to overcome difficult situations, study the responses to
difficulties can be broadly categorised into four different coping styles. The first "cognitive appraisal" is confronting the difficult situation and trying to find out alternative ways and means to solve it. The typical reactions are to analyze the situation and to find a solution to the problem-trying again and again and retrospection which leads to realization of one's wrong aspirations and the difficulties faced which led to better ways of tackling the problem. The Second is "seeking help" and advise from friends, parents, siblings and others. The Third "emotional defusing" is reactivity to the problems emotionally which may be by crying, getting anergy or shouting or becoming sad or nervous and anxious. The fourth "withdrawal" in which the reaction is basically to run away from the problem like resorting to praying and hoping for the better, to forget about the difficulty and do something else, withdrawing and hiding from the situation and trying to forget the problem by taking alcohol or drugs.

Fry Denberg and Lewis (1993) research on early adolescent coping styles resulted in the development of the early Adolescent Coping Scale (ACS). This is divided into three main categories: solving the problem, and reference to others" deemed to be positive or productive coping styles; end "non-productive coping" classed as a negative coping style;
and "non-productive coping" classed as a negative coping style. "Solving the problem" means active problem solving while remaining optimistic, fit, relaxed, and socially connected.

Seiffge-Krenke and Shulman (1990) reviewing work done on coping styles in adolescence and childhood found that adolescent behaviour, when dealing with developmental tasks fields such as peer groups, schools or future can characterized by three main strategies or modes of coping. First, dimension include active undertaking such as information seeking and taking revise, Second, emphasizes the adolescents appraisal of the situation and the search for a compromise; and Third—which may be considered dysfunctional entails a fatalistic attitude to withdrawal.

Bibace et. al., (1987). described an interactive program with which students learn to analyze behaviours of psychological defence. Students satisfaction with the program and their performance in identifying defence mechanisms. Stress is a part of the normal process of growing and developing children. A stress situation is composed of anxiety and stress. Four categories of stress include time, anticipators, situational, and encounter stress. It is important to recognize the unsuccessful
defence mechanisms employed by children to try to deal with anxiety-
provoking situations. These include repression, regression, projection,
displacement, and reaction, formation, rationalization, denial and
identification. It is the child's individual perception that sets the tone
and the amount of stress in response to a particular event. A variety of
techniques have been proven effective in helping children deal with
stress, including yoga, deep muscle relaxation and guided visual imagery.
Adults should be careful of the stress in children's lives, and should assist
in the development of positive coping strategies.

Compas, Malcarne and Fondacaro (1988). Investigated to generate
alternative situations to cope with stressful events and the strategies to
cope with the interpersonal relations of high school children. High school
children have used problem and emotional focused coping and they
adjusted the number of problem focused solutions they generated to
match their appraisals of the controllability of the cause of interpersonal
stressors (interpersonal stressors was related to self-reports and
maternal reports of internalizing and externalizing emotional and
behavioural problems). Self-reported emotional / behavioral problems
varied as a function of the match between perceived control and other
coping strategies.
Fahts (1986) examined inner-city high school students coping process in relation to stressful academic and social events in the school environment. Data on coping styles were collected from approximately 200 (grade 7-8) with the Academic Coping Inventory (ACI), a self report measure with four dimensions (positive coping, projection, denial, and non coping). The coping variables, alone and in interaction with perception of stressor frequency, were found to have very different effects on grade point average by sex and reading level. A sample of 60 students was interviewed for further exam in their coping styles in stressful social as well as academic contents within the school, and to know whether appraisal played a role in determining the nature of coping styles. Preliminary analysis of the interviews indicated that the adolescents appraised stressful academic situations as the ones in which they could take the more denial in social than in academic contents and reported more denials in social contents than boys.

Trueba (1993) examined 16 distinct characteristics of Mexican and Mexican-American children's adjustment problems. The coping mechanisms tended to be 1. under participation, 2. over participation, and 3. selective participation in academic takes under protest. Recommendations included closer home-school ties, more effective teacher training and increased availability of aids.
Coping and Cultural Influence

Mc Carty, Carolyn, Weisz; John et. al., (1999). To address the question of whether cultural values and traditions influence the development of coping styles, the authors compared self-reports of coping by 6-14 year old in Thailand and the US. 141 children were interviewed about 6 common stressors: separation from a friend, injection in a doctor's office, adult anger, peer animosity, school failure, and physical injury. Children's self-reported coping methods were coded as overt or covert. Coping goals were coded as reflecting primary control (attempts to influence objective conditions), secondary control (attempts to adjust oneself to objective conditions), or relinquished control. Although findings revealed numerous cross-national similarities, there were also multiple main and interaction effects involving culture, suggesting that socio-cultural context may be critical to understanding child coping. Consistent with literature on Thai culture, Thai children reported more than twice as much covert coping as American children for stressors involving adult authority figures. Thai children also reported more secondary control goals than Americans when coping with separation, but American children were 5 times as likely as Thais to adopt secondary control goals for coping with injury.
Radford, Mark, Mann, Leon et. al., (1997). Examined the effect of culture on decisional self-esteem, decisional stress, and self-reported decision coping styles. Results of a questionnaire study of 743 Japanese and 309 Australian university students showed that for both cultural groups decisional self-esteem was positively correlated with the "choice" style of decision making, but was negatively correlated with decisional stress and the "complacency," "avoidance," and "hypervigilance" coping styles in personal decision making. Cultural differences were found, with Japanese students scoring lower than Australian students on decisional self-esteem, higher on decisional, stress, and higher on complacency, avoidance, and hypervigilance coping styles. These findings are related to cross-cultural differences between Australia (an individualistic culture) and Japan (a collectivist or group-oriented culture).

Hoffner, Cynthia (1997). Examined children's suggestions for coping with uncontrollable stress, from the perspective of the monitoring/ blunting distinction proposed by Miller. 60 1st-6th graders heard stories depicting 4 stressful situations that afforded little opportunity for control. Children's coping suggestions were classified as blunting (including reappraisal, cognitive distraction, and behavioral distraction), monitoring, and seeking support. Blunting strategies were mentioned most often, followed by monitoring, and seeking support. A
grade-level increase in blunting suggestions was found, and this developmental pattern was identical for reappraisal, cognitive distraction, and behavioral distractions. No grade-level differences were observed for monitoring or support. Situational differences in coping suggestions were explored, and there was mixed evidence of cross-situational consistency in coping style.

Hardy, Denise et. al., (1997). Investigated the relation between parenting and the coping styles of children in response to everyday stress. 60 children (aged 9-20 years) and their mothers participated. Children and mothers described how they responded to stressful episodes the child had experienced within the past 2 months. Mothers completed questionnaires that assessed a variety of parenting dimensions (e.g., nurturance, directiveness, organization). Results indicate that (1) the aspects of child coping studied (e.g., perceived effectiveness, variety of coping strategies) were relatively independent, (2) children from families with high levels of maternal support and relatively low levels of family structure used the greatest variety of coping strategies, (3) children of supportive mothers used the greatest number of avoidant strategies (but only in uncontrollable situations), and (4) children from families with high levels parental structure used fewer aggressive coping strategies.
Liang, Peijung (1997). Used the developmental model to study children's stress (positive and negative influences of stress on development). Ss were 6,432 male and female 1st-6th graders. Ss concepts of stress, ideas of well-being, life events, daily hassles, coping styles, and social and parental supports were assessed through a questionnaire. Ss data were classified into 3 categories-stimulus, response, and interaction, and each category was subdivided by multiple coding. The fit of the adult stress model to children and changes in the content of children's stress with increasing age are discussed.

Endler, Norman et. al., (1994). Studied anxiety in an academic examination situation, focusing on multidimensional trait anxiety and coping styles and their relationship with situation-specific coping responses, state anxiety, and academic performance. It was expected that social evaluation trait anxiety and emotion-oriented coping would be significant positive predictors of state anxiety in a stressful exam situation; it was also expected that these variables would be negative predictors of academic performance. Task-oriented coping was expected to be a positive predictor of grades in the stress situation. 272 undergraduates served as Ss. Results show that state anxiety is predicted by social evaluation trait anxiety, emotion-oriented coping
response, and avoidance-oriented coping response; a relatively strong relationship was found between specific coping styles and situation-specific coping responses.

Bowker, Bukowski, Hymel and Sippola (2000) found that withdrawn adolescents, particularly girls, were more likely to use coping strategies aimed at minimizing the emotional impact of the event (e.g., avoidance) versus active/problem-focused (e.g., negotiation to reach agreement) or negative coping (i.e., negative actions towards others). Aggressive and unpopular adolescents were also more likely to use negative coping strategies. Interestingly, for girls, higher levels of aggression were associated with greater use of active/problem-focused coping, and this relationship was stronger at high levels of popularity. Greater perceived control in aggressive subjects was related to more frequent use of negative coping. Overall, this study attempts to combine elements of the social problem-solving literature and the stress-coping literature, and suggests that adolescents with different behaviour profiles cope differently in response to peer stress. Although the study is somewhat limited in that it pertains only to coping with peer stressors, findings such as these may ultimately aid practitioners in identifying and intervening with children who may be at-risk for maladaptive coping.
Printz, Shermis, and Webb (1999) study was to test a conceptual model of adolescent of stress and coping and determine the relationships between the key components of the model. Four factors were investigated: (a) students' perceptions of stress (both major life events and daily hassles), (b) students' self-reported problem-solving, (c) perceptions of social support and (d) psychological adjustment (student self-report and teacher report). A total of 122 high school students participated in the study. The data did not support the model's supposition that poor adjustment increases the amount of stress the adolescent experiences. However, the data did support the notion that an accumulation of stressful experiences significantly increases and adolescent's vulnerability to negative outcome. The results also indicated that available coping resources, including social support and problem-solving, significantly buffer the effects of stress on maladjustment.

Lengua, Sandler and Curran (1999). The authors of this study were interested in the direct and indirect effects of temperament (emotionality, impulsivity and attention-focusing) on the threat appraisals (individual's evaluation of an event in respect to implications for his or her well-being), coping (active/problem-focused coping vs. avoidance) and psychological symptoms of 9 to 12-year-old children of
divorce. Two hundred twenty-three mothers and their children participated in the study. According to the results, negative emotionality (intense negative arousal and affective response to stimuli) was found to have direct effects on children's threat perceptions. Negative emotionality was not directly related to coping, although significant indirect effects were found indicating that negative emotionality influenced active/problem-focused and avoidance coping through perceived threat. Positive emotionality and impulsivity were found to have direct effects on active/problem-focused coping. In respect to psychological symptoms, positive emotionality was directly related to lower levels of depression and conduct problems. Impulsivity was directly related to higher levels of conduct problems and, likewise, negative emotionality was related to higher levels of both conduct problems and depression.

Thus, it appears that children who have intense negative arousal and affective response to stimuli may perceive stressful events more negatively, and subsequently may cope less adaptively. Furthermore, children with negative emotionality and/or impulsivity may demonstrate higher levels of depression and/or conduct problems. Children who respond more positively to stress and are less impulsive, on the other
hand, may cope more adaptively. The results indicated that these children may experience lower levels of depression and conduct problems. Overall, the findings suggest that temperament is a predictor of children's appraisal and coping, and moreover that temperament, gender, intelligence and threat appraisals are good predictors of the psychological adjustment of children who have experience stress.

Coping Gender Difference

There is a good deal of evidence in favour of the general proposition that an individual's attributional style influences how he responds to life events, Dweck and her colleagues (1976, 1978) have shown that boys tend to respond with greater efforts when they receive feedback from adults that they are failing, girls tend to give up and attribute their failing to their own lack of ability. One of the reasons for girls being more likely to give up seems to be in the sex differentiated pattern of feedback from adults. The pattern seems to be one likely to increase girl's tendency to feel that they cannot succeed whatever they do, whereas boys are given the message that their failure is a consequence of they cannot trying hard enough and hence that they could cope if they chose to do so. It has been suggested that the
increasing experience of feedback may make girls more likely to adopt an attributional style of learned helplessness. Which could perhaps explain in part why depression is more prevalent in women (Rutter, 1980).

Gender differences in coping styles were reported by Frydenberg and Lewi's (1993) with males more likely to engage in more risk-taking activities and more physical recreation than females. Females were more likely to engage in talking to friends, day dream, and tension reducing activities. They found that males use the problem-solving coping style more than females, while females use reference to others more as the way of solving their problem, this difference was not significant.

A process-oriented, integrative frame works of race and gender-related influences on adjustment in early adolescence requires considerations of linkages between stressful experiences and process of identity and self esteem. Racial and gender group affiliations as "ego-extensions". Rosenberg (1996) may make young susceptible to feelings of shame and hence disidentification when they have negative experiences relating to group membership, stress process leading to stronger sense of identity.
The gender difference in co-rumination is expected to be stronger among early adolescents than children. Girls may co-ruminate more at adolescence as their social worlds become increasingly complex and their social world become increasingly complex and perhaps, stressful (e.g., when dating begins). Age differences are not expected among boys though, because their, interactions remain activity focused and extensively discussing problems likely remains inconsistent with male norms. (Buhrmester, 1996).

Coping Personality

Some factors which may strongly influence on individuals ability to cope include family life; relationship with peers and significant others as well as his/her own unique personality. Basic personality factors which may contribute to the individuals' development are self-esteem locus of control and coping styles.

Different types of problems faced by adolescents stem from pubescent development, their emotional life, the social groups with which the individuals interacts and other biological cultural changes. In addition to this, one important aspect of an individual influencing
adolescent behaviour is self-esteem. Self-esteem is a fundamental human motive and it is also identified as one of the more potent human needs (Maslow, 1970). It is also noted that low-self esteem is related to poor psychological adjustment and internality or failures (Schweitzer, 1996).

Self-esteem appears to serve as an 'anxiety-buffer' in one's daily life with research findings indicating that those with high self-esteem cope significantly better with stressful situations than those with a low self-esteem Elton-Burrows and Stanely et al., (1980) Lyon and Pinel, (1992). Low self-esteem in early adolescents has been linked to depression (Bachman, Kohn, Mednick, Davidson and Johnson, 1967) and Stress.

Carver, Scheier and Weintraub (1989) correlated subjects reliance on various coping strategies with various personality measures such as self-esteem, they found that some productive coping patterns, involving active problem solving, were associated with relatively high self-esteem Carver et al., (1987) who found significant positive correlation between self-esteem and coping strategies which involved active problem solving and increases in self-esteem coincided with increased internal locus of control and greater use of the problem solving coping style.
Reviewers of the evidence for goal-setting theory Loke, Shaw, Saqri and Latham (1981) have suggested that those with high self-esteem are more likely to accept challenging goals, perform better on complex tasks and have greater job satisfaction. Because school academic requirements involve the learning of new and more complex skills and abilities it may be possible to extrapolate from these studies to adolescents enjoyment of school and perception of their academic performance.

Some study findings revealed no significant relationship of locus of causality with adjustment, behaviour problems and self esteem. Locus of causality is the extent to which one believes either that reinforcement occurs as result of one's own behaviour (internal control) or due to (external control) external forces such as luck, chance, powerful others (Rotter, 1996).

In sum, the fore going brief review broadly presents some of the few relevant studies in the area of stress and coping in children. These studies show that interest in studying the concept of stress and its effects on children is of currents concern. Many of the changes (physical, psychological and social) have been proved to be stress producing in
various ways. This also led the researchers to examine the role of several mediating factors which influence the stress and strain relationship among children, e.g. personality, social support and some situational determinants.

This interest is stress in children has logically extended to studies on how children cope to stress. There is increasing work on this aspect as it is evident from growing number of studies. Yet the field is very open.

Research on children stress and coping has not been extensive. It is only in the recent years we find an increasing interest in academic stress. But as the Indian ethos are apparently in flux and it is in process of social change due to globalization. Thus it remains to be seen what the nature of stress and its effects on the Indian children and how they over come them.