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WISE FUNCTIONING AND COPING STRATEGIES IN ADOLESCENTS: AGE AS AN INTERVENING VARIABLE

Abstract: As we know relatively little about the development of wisdom in youth, the following study was designed to examine whether and how wise functioning would predict coping strategies in adolescents. As layperson's implicit theories of wisdom suggest that wisdom varies by age, we wanted to see if and how age might correlate with wisdom, and examine the role of age as a mediator between wisdom and coping. Consequently, this article provides some initial evidence indicating that wise thinking, behaving, and age are related to coping strategies. It seems that wise individuals act when confronted with adversity

and obstacles, focusing on the benefits that follow from stressful events. At the same time, they try to avoid using responses that are commonly considered less adaptive or immature: denial or substance use. These choices may be related to the equilibrium between knowledge and doubt that is believed to be the core of wisdom. Therefore, being wise lies not in what is known, but rather in the way in which the knowledge is used in everyday life and experienced as time passes by.

Keywords: wisdom, coping strategies, adolescents.

Wisdom is one of the most prized and highly desirable traits (Ardelt, 2005). Theoretical perspectives and empirical evidence seem to support the view that wisdom has a positive influence on life satisfaction (Ardelt, 2016; Bluck, Glück, 2005; Glück et al., 2013; Krause, Hayward, 2015b; Shi, Ardel, Orwoll, 2016), personality adjustment and generativity (Wink, Staudinger, 2015), hedonic happiness (Bergsma, Ardel, 2012), forgiveness (Taylor, Bates, Webster, 2011), purpose in life (Ardelt, Landes, Gerlach, Fox, 2013), coping strategies (Etezadi, Pushkar, 2012), mental health (Webster, Westerhof, Bohlmeijer, 2012), self-esteem and hope (Krause, Hayward, 2015a), humility (Krause, 2016), and positive relations with others (Grossmann, Na, Varnum, Kitayama, Nisbett, 2013; Helson, Srivastava, 2002). It is also positively associated with personal growth (Helson, Srivastava, 2002; Staudinger, Kunzmann, 2005; Wink, Staudinger, 2015) and negatively related to negative affect (Kunzmann, Baltes, 2005).

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In the context of the above mentioned studies it seems plausible to think that wise thinking and acting might be related to coping strategies as well (Etezadi, Pushkar, 2012; Kanwar, 2013; Ardel, 2005). In fact, Ardel (1998; 2005) states that successful coping with difficult situations or events might be not only one of the ways to wisdom, but also a quality characterizing wise people. Furthermore, Aldwin and Yancura (2011) perceive wisdom as a coping resource that facilitates dealing with stress.

Due to the fact that not much research has been devoted to an empirical analysis of how wise individuals act when confronted with adversity and obstacles (Ardel, 2005), and in accordance with Ardel's remark about possible relationship between wisdom and coping, the following study was designed to examine whether and how wise functioning would predict coping strategies in adolescents as we know relatively little about the development of wisdom in this period (Pasupathi, Staudinger, Baltes, 2001). Moreover, as layperson's implicit theories of wisdom suggest that wisdom varies by age (Glück, Strasser, Bluck, 2009), we wanted to see if and how age might correlate with wisdom, and examine the role of age as a mediator between wisdom and coping.

WISDOM

Across cultures, wisdom has been viewed as the ideal of knowledge and character (Staudinger, 2008), the integration of mind and virtue (Kunzman, Baltes, 2005), the endpoint and pinnacle of human development (Baltes, Staudinger, 2000; Staudinger, Werner, 2003). Historically, it has been the subject of research carried out mainly in philosophy and religion (Kunzman, Baltes, 2005; Walsh, 2015; Tucholska, 2016), allowing to label it "an ancient topic" (Clayton, Birren, 1980, p. 103).

Although, the last thirty years have been considered in the field of psychology of wisdom as a "period of rejuvenation" (Baltes, Staudinger, 2000, p. 122), it is not easy to conceptualize and operationalize this term as a scientific construct (Glück, Strasser, Bluck, 2009). The majority of definitions of wisdom denote its profundity and variety (Walsh, 2015), and even among psychologists there is no unequivocal description of this concept (Glück, Strasser, Bluck, 2009). Clayton (1980, 1982) was one of the first psychologists who undertook systematic analysis of the wisdom construct according to implicit perspective. On the basis of a multidimensional scaling inquiry of twelve wisdom attributes, she identified three dimensions typical of wise people: (1) affective (empathic, understanding, peaceful, gentle, and compassionate), (2) reflective (intuitive and introspective), and (3) cognitive (experienced, knowledgeable, pragmatic, observant, and intelligent). Her research has had a significant impact on later studies of wisdom, especially conducted by Holliday and Chandler (1986), Sternberg (1990), and Ardel (1998).

For the purpose of this study, we pay heed to Ardel's understanding of wisdom which is based both on Clayton's intuitions and Baltes' research. According to Ardel's (2004) alternative and parsimonious model, as she describes it, wisdom is defined and operationalized as an integration of cognitive, reflective, and affective personality characteristics that are related to each other, but are not theoretically identical. It is suitable to remark that the above-mentioned definition was originally elaborated by Clayton and Birren in 1980 (Ardel, Edwards, 2016). In other words, wisdom cannot be reduced to the intellectual or cognitive sphere, but embraces the

whole person. Nevertheless, the *cognitive* component of wisdom concerns efforts related to a deeper understanding of positive and negative events of life, both in intrapersonal and interpersonal aspects. It also includes the acceptance of existence in its unpredictability and uncertainty. The *reflective* facet of wisdom requires the ability to perceive phenomena from different viewpoints and requires self-observation, self-examination and self-awareness. Self-knowledge enables a person to progressively overcome one's own subjectivity and projections, and gradually become less self-centered. As stated by Ardel (2003), this dimension is crucial because it fosters the development of the two other components. Finally, the *affective* element, often neglected in most definitions of wisdom (Ardelt, 2003), consists in compassionate demeanor towards other people. Cognitive, reflective, and affective factors measured by a wisdom questionnaire should include items that assess all the characteristics described in each wisdom dimension.

COPING STRATEGIES

How people manage in difficult life circumstances has been the subject of a substantial amount of studies over the years. Most investigators working in this area have used, as their theoretical starting point, the stress paradigm developed by Lazarus and collaborators (Carver, Scheier, 1994). According to this model, coping is a dynamic process and coping strategies are the “constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands appraised as taxing or exceeding the resources of the person” (Lazarus, Folkman, 1984, p. 141). A number of psychologists have attempted to identify coping techniques. Among different catalogues, Scheier, Carver, and Bridges (1994) presented a widely-known system of 15 categories of coping tactics (Figure 1). Their dimensionality was further classified by Litman (2006) into self-sufficient problem-focused, avoidant-coping, socially-supported coping, and self-sufficient emotion-focused, as presented in Figure 1 (The Circumplex of Coping Styles).

According to Carver, Scheier, and Weintraub (1989), planning consists in thinking about dealing with a problem in the best way. This strategy is problem-focused and occurs during secondary appraisal. Active coping is the process consisting in increasing one's attempts to eliminate the problem. It includes introducing direct action that finds its expression in trying to execute efforts. Suppression of competing activities regards the intentional focusing only on the problem and trying to avoid distraction by other projects, in order to concentrate more completely on coping with the stressor. As it can be observed, the above-mentioned strategies require engagement in effortful approach to task performance and help to restore a sense of self-efficacy in the individual (Mikulincer, 1994).

Behavioral disengagement opens avoidant-coping strategies and consists in abandoning attempts to deal with the problem and reducing the amount of effort taken to solve it. This strategy has been variously called passivity or effort withdrawal. Carver, Scheier, and Weintraub (1989) claim that trying to attain goals is a rather dysfunctional tendency, since it is reflected in experiences that are related to helplessness, or when people expect modest coping outcomes. Denial consists in refusing to believe that the problem is real, and acting as though it has not even happened. It implies isolating oneself from the stressful situation and involves self-deception. Findings point out that

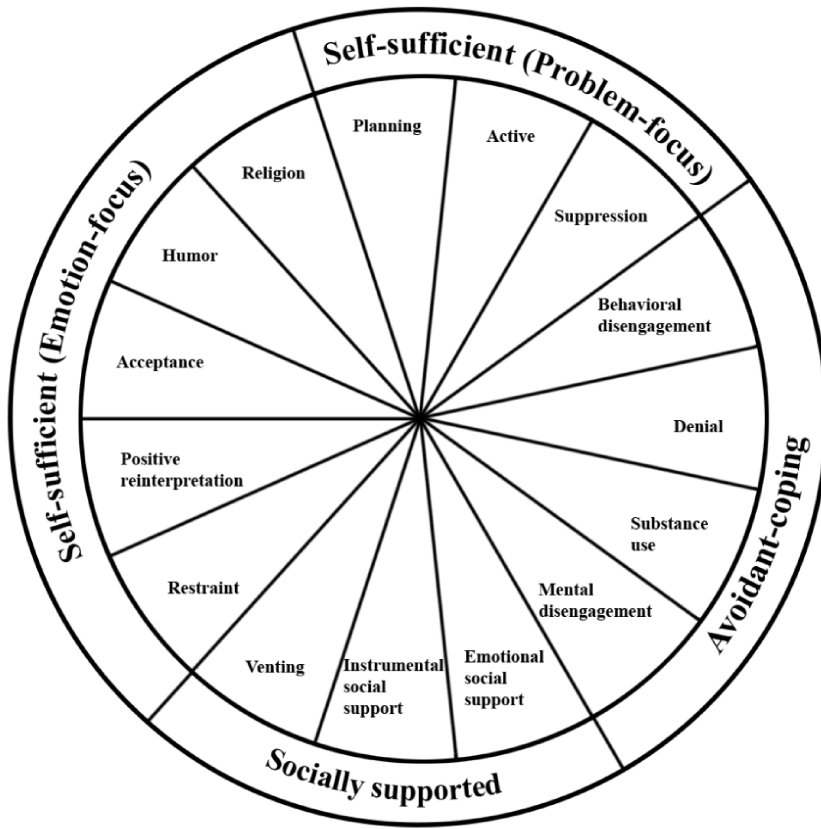


FIGURE 1. The Circumplex of Coping Styles. (own elaboration based on Litman’s assessment)

denial is commonly used by pessimists. Substance consumption is using drugs or alcohol to reduce distress. As Mikulincer (1994) reports, this strategy produces an impediment to adequate functioning and enables people to ascribe their lack of success to a substance rather than to their own lower abilities. Mental disengagement is considered a variation of behavioral disengagement and regards distracting oneself from thinking about the problem through the use of alternative activities, such as: day-dreaming, escaping through sleep, or immersion in TV and the Internet. Given the shortage of time, this strategy can impair performance as a person assumes irrelevant behaviors. Skinner et al. (2003) claim that the aforesaid styles of coping can be labeled as escape and embrace attempts to stay away from a stressful condition. Zeidner and Saklofske (1996) suggest that avoidance coping usually works against the people who are using it rather than to their benefit.

Seeking social support for emotional reasons relates to socially supported strategies and expresses itself through listening, talking, seeking sympathy, moral support, and understanding from others (Carver, Scheier, Weintraub, 1989). This form is an aspect of emotion-focused coping. Instead, seeking social support for instrumental reasons is problem-focused coping and consists in seeking advice, assistance, or information from others. Focusing on and venting of emotions implicates being aware of

one's distress and having the need to express negative feelings through journaling or talking about them to one's friends. Moritsugu and collaborators (2014) mention that while venting may be considered good in the short time, it is not necessarily a beneficial strategy to use since it often makes people feel worse over time. According to Skinner et al. (2003), these three above-mentioned categories appear to be focused more on other people instead of the problem or emotion.

Finally, restraint-coping opens the list of self-sufficient strategies, focused on emotions. It consists in waiting for the right moment to act, holding oneself back, not taking steps prematurely (Carver, Scheier, 1994). In turn, positive reinterpretation and growth is not limited to reduction of distress, but regards reframing the stressor in positive terms. It is connected to adaptive outcomes and includes cognitively reprocessing distressing emotions due to a stressful event into a new outline that involves positive aspects. Acceptance is considered a functional coping response that in primary appraisal manifests itself in learning to accept the problem and in secondary appraisal refers to acknowledging a current absence of active coping strategies. It is believed to be the opposite of denial and, as a positive reinterpretation, it may be crucial in situations where a stressor is basically unchangeable, requiring adaptation. The use of humor makes the problem seem less severe. In a series of studies (Lefcourt, 2002), humor has been found to be related to more active coping styles and negatively associated with avoidance and denial. Turning to religion consists in using faith for support in times of stress and may be quite essential as a coping strategy to many people, especially with major life stressors. A handful of studies show (Floody, 2014), that all these strategies are strongly associated with lesser negative psychological symptoms.

WISDOM, COPING, AND AGE

It is commonly believed that wisdom develops with age (Baltes, Staudinger, 2000) and that age may lead to wisdom which, in turn, allows to make the best choices in life, including dealing with difficult situations (Aldwin, Yancura, 2011). As Skinner et al. (2003) observe, coping with stress and personal growth seem naturally interrelated, and age-graded factors play the central role in shaping an individual's adaptation to complex life circumstances.

Majority of studies regarding wisdom and age or coping and age relate to older adults. On the basis of the results obtained thus far we can assume that people are likely to develop a wider range of coping skills as time goes by (Aldwin, Yancura, 2011). Despite the progressive decline in intellectual abilities that comes with advanced age, growing old also is related to higher levels of wisdom, understood as expert judgment about important issues in life (Franzoi, 2011). Wise individuals seem to distinguish how best to deal with adversity by applying active rather than passive coping strategies and learning from the past (Ardelt, Oh, 2016).

However, as Birren and Fisher (1990, p. 326) point out, wisdom "tends to increase with experience and therefore age but is not exclusively found in old age." Some lifespan studies indicate that wisdom develops in the age between 15 and 25, and age and wisdom-related performance are positively associated in adolescence (Pasupathi, Staudinger, Baltes, 2001). Moreover, Takahashi and Overton (2005) reveal that older adults usually perform better in wisdom measures than their younger counterparts,

regardless of gender or cultural background. Although the authors consider that development of wisdom may be more affected by the quality of life events than the chronological age itself, they are frequently closely connected. It is due to the fact that longer life in general involves experiencing more opportunities for psychosocial maturity through a diversity of experience.

Because of the gap in studies examining wisdom as a predictor of coping strategies in the context of adolescence, our hypotheses were as follows:

1. An increase in the general wisdom index and its components may increase theoretically adaptive strategies (planning, active coping, suppression of competing activities, restraint coping, emotional and instrumental social support, positive reinterpretation, turning to religion, humor).

A theoretical rationale for why wisdom may be positively related to adaptive coping strategies rather than avoidant is based on the “broaden-and-build” theory, developed by Fredrickson (1998). In this model, the “broadening” function of positive emotions empowers the person to see further than the immediate stressor, and allows to extend behavioral repertoire. The “building” function helps an individual to reconstruct social, intellectual, and physical resources. Even though Fredrickson’s theory was not created explicitly to address positive emotions or wisdom in the context of stress, it seems that the model is important under stressful conditions. In fact, wisdom considered “a repertory of well-practiced strategies, heuristic methods, and behaviors” (Efklides, Moraitou, 2013, p. 213) may prevent a person from feeling overcome by coping efforts.

2. An increase in the general wisdom index and its components will decrease the levels of avoidant-coping strategies (behavioral disengagement, denial, substance use, mental disengagement, venting).

A theoretical justification for why wise behavior may be negatively related to avoidant-coping strategies is grounded in developmental psychology. Aldwin and Yancura (2011) indicate that stress, appraisal, and coping are not static and change constantly over the lifespan. Moreover, wisdom encompasses maturity, discernment, interpersonal abilities, and a deeper understanding of life. It expresses the ability and willingness to understand a situation carefully, to look at phenomena from different perspectives, and communicate positive emotions and behaviors toward others. As individuals age, they may also acquire alternative strategies to improve their competence in coping with stressful situations (Ardelt, 2005).

3. Cognitive, affective, and reflective dimensions of wisdom will be positive predictors of some theoretically adaptive strategies and negative predictors of avoidant-coping strategies.

Gustems-Carnicer and Calderón (2016) provide a theoretical rationale for the predictive capacity of wisdom as they underline that wisdom could be related to cognitive approach coping in terms of the subject’s attempts to comprehend and reorganize a difficult situation. Moreover, Ardel (2005) emphasizes that wise people tend to develop an integrated personality, remarkable maturity, higher judgment skills in difficult events, and the ability to cope with challenging life changes.

4. Age will mediate the relationship between wisdom and specific coping strategies.

A theoretical rationale for why age may be a mediator between wisdom and coping strategies is based on laypeople’s implicit theories that portray wise individuals as able to reflect on and regulate their behavior, thoughts, and emotions in the face of stressful events (Bluck, Glück, 2005). Although cross-sectional studies are unable to

address whether being wise is likely to increase with age, longitudinal research shows that practical wisdom tends to grow from young to middle age in both women and men (Wink, Helson, 1997).

Participants

The sample consisted of 262 Polish respondents. Their ages ranged from 16 to 25 ($M = 18.77$, $SD = 2.54$). The group of participants was predominantly female (67%). Asymmetrical ratio of female to male respondents was related to the fact that the research was performed mainly in humanistic classes of high schools and among university students specializing in Pedagogy as well as in Psychology, where a vast majority of students are women. In gathering data we used non-probability sampling, selecting respondents who were available to participate in a study. The choice of convenience sampling does not allow us to generalize the results obtained in the research.

Procedure

All the participants below 18 years old were asked to deliver and return the parental consent forms in which they were broadly informed about: the goal of the study, without any specific reference to assessed variables; expected duration, and confidentiality of the study. Other adult respondents, after clarification and directions were given, freely expressed a participation agreement. All the participants were reassured that the content of the questionnaires used during the measurement would pose no risk to them and they were allowed to decline if they were not interested in the research. The project was approved by the Ethics committee.

Instruments

In order to calculate coping strategies and wisdom, data was collected through a following series of questionnaires: The COPE Inventory, developed by Carver, Scheier, and Weintraub (1989) and Three-Dimensional Wisdom Scale (3D-WS; Ardel, 2003). All the respondents were given the same set of scales.

The COPE Inventory is a 60-item multidimensional self-report questionnaire that is used to measure the various ways in which people react to stressful situations. The fifteen strategies (4 items each) can be rationally grouped into four major categories: 1) problem-focused (planning, active-coping, suppression of competing activities); 2) avoidant-coping (behavioral disengagement, denial, substance use, mental disengagement); 3) socially supported (emotional social support, instrumental social support, focus on and venting emotions); 4) emotion-focused (restraint, positive reinterpretation, acceptance, humor, religion). Each of the items refers to a 4-point frequency scale (1 – *I usually don't do this at all*, 4 – *I usually do this a lot*). The Cronbach's Alpha for the entire Inventory was high ($\alpha = 0.85$).

Three-Dimensional Wisdom Scale (3D-WS; Ardel, 2003) is a 39-item self-report questionnaire (consists of 15 statements in the first and 24 items in the second part of the scale) which measures three dimensions of wisdom: cognitive, reflective, and affective. Although, in the Polish version, adapted by Steuden, Brudka, and Izdebski (2016), reflective dimension was split into two independent factors (self-awareness and empathic), in the current study the original reflective factor was assumed, with the

consent of the authors of adaptation. Answers were given on a 5-point response scale, ranging from 1 – *yes* to 5 – *no*. The Cronbach's alpha for the whole scale was 0.77. Correspondingly, the internal consistency for the three factors were: cognitive ($\alpha = 0.71$), affective ($\alpha = 0.54$), and reflective ($\alpha = 0.60$).

All the data collected from the questionnaires were analysed using the SPSS Statistical Package for the Social Sciences (Version IBM SPSS Statistics 20).

RESULTS

Firstly, descriptive statistics were performed and a Shapiro-Wilk's test was carried out to verify whether the variables under consideration were normally distributed. Normal distribution (Table 1) was confirmed for the following variables: wisdom, affective wisdom, and reflective wisdom. In all other factors the value p was significant, meaning that the distribution was not perfectly symmetrical. However, due to the fact that the values of skewness did not exceed the contractual absolute value of -1.5 and $+1.5$ (Tabachnick, Fidell, 2013), it was assumed that these distributions could be considered acceptable and, consequently, parametric tests and analyzes were used.

TABLE 1. Descriptive statistics of wisdom and the coping strategies ($N = 262$)

	<i>M</i>	<i>Mdn</i>	<i>SD</i>	<i>SK</i>	<i>CK</i>	Min.	Max.	S-W	<i>p</i>
Wisdom	123.19	123	17.47	.08	-.12	79	176	.99	.642
Cognitive wisdom	44.78	45	7.81	-.30	.18	18	62	.99	.017
Affective wisdom	39.58	40	7.56	-.14	-.09	21	61	.99	.110
Reflective wisdom	38.82	39	7.15	-.17	-.26	21	57	.99	.124
Planning	10.38	10	3.03	-.03	-.77	4	16	.97	< .000
Active coping	10.65	11	1.96	-.16	.13	5	16	.97	< .000
Suppression	9.66	10	2.58	-.05	-.24	4	16	.98	.001
B. disengagement	7.54	7	2.63	.70	.59	4	16	.93	< .000
Denial	7.62	7	2.88	.84	.28	4	17	.92	< .000
Substance use	6.46	4.5	3.24	1.27	.83	4	17	.77	< .000
M. disengagement	9.39	9	2.52	.12	-.53	4	16	.97	< .000
E. social support	10.66	11	3.44	-.09	-1.04	4	16	.95	< .000
I. social support	10.73	11	3.04	-.14	-.69	4	16	.96	< .000
Venting	10.78	10.5	3.02	.08	-.78	4	16	.96	< .000
Restraint	10.23	10	2.34	.33	.34	4	16	.96	< .000
P. reinterpretation	11.01	11	2.51	-.28	-.33	5	16	.97	< .000
Acceptance	10.16	10	2.46	.04	-.24	4	16	.98	.003
Humor	7.83	8	3.22	.47	-.82	4	16	.92	< .000
Religion	7.94	7	4.07	.64	-.93	4	18	.85	< .000

In order to measure the degree of linear relationship between wisdom together with its dimensions and coping strategies (Hypothesis 1 and 2), the standard Pearson correla-

tion formula was applied. The results presented in Table 2 demonstrate positive correlations between the global wisdom index and positive reinterpretation, planning, instrumental social support, emotional social support, and active coping. The inverse kind of relationship emerges in the case of wisdom that decreased denial, behavioral disengagement, substance use, and mental disengagement. The analyses of the three components of wisdom remain consistent with the baseline assumptions. The growth of the cognitive factor of wisdom was related to the growth of positive reinterpretation, planning, and instrumental social support. Conversely, its growth was accompanied by behavioral disengagement, denial, substance use, mental disengagement, and acceptance. Affective component of wisdom correlated positively with positive reinterpretation, emotional social support, instrumental social support, planning, turning to religion, and active coping. Negative correlation was found regarding humor, substance use, and denial. Finally, reflective dimension showed positive correlations with positive reinterpretation, planning, active coping, instrumental social support, restraint, and suppression. However, negative correlations were found with the following coping strategies: denial, behavioural disengagement, substance use, mental disengagement, and venting. Age correlated positively with wisdom ($r = .22^{**}$), affective wisdom ($r = .21^{**}$), and reflective ($r = .21^{**}$). The tendency was noticed for cognitive wisdom ($r = .11, p = .07$).

TABLE 2. Value of correlation coefficients between wisdom and dimensions of coping ($N = 262$)

	Wisdom	Cognitive	Affective	Reflective	Age
Planning	.32**	.20**	.21**	.35**	.16**
Active coping	.17**	.07	.17**	.18**	.24**
Suppression	.07	-.03	.08	.13*	.15*
Behavioral disengagement	-.37**	-.42**	-.11	-.34**	-.12*
Denial	-.39**	-.38**	-.16*	-.38**	-.16**
Substance use	-.25**	-.22**	-.12*	-.27**	-.07
Mental disengagement	-.17**	-.18**	-.01	-.20**	-.09
Emotional social support	.20**	.09	.29**	.08	.04
Instrumental social support	.27**	.18**	.25**	.18**	.08
Venting	-.04	-.01	.06	-.17**	.09
Restraint	.04	-.09	.06	.15*	.02
Positive reinterpretation	.43**	.25**	.31**	.45**	.12*
Acceptance	-.05	-.13*	-.03	.05	.10
Humor	-.07	-.09	-.11	.04	-.12*
Religion	.07	-.03	.19**	.01	.07

In the next stage of the research, stepwise regression analyses were conducted to establish the wisdom factors that predict coping strategies (Hypothesis 3). We chose planning, denial, substance use, instrumental support, and positive reinterpretation as they correlate with all three dimensions of wisdom (cognitive, affective, and reflective). The β -indices of regression analysis demonstrate that one of the three factors proved to be a determinant of planning: reflective wisdom (.372; $p < .000$). The value of the adjusted coefficient of determination $R^2_{adj} = .136$ indicates that the aforemen-

tioned variable can account for almost 14% of the variance in planning [$R = .372$, $F(301,1) = 48.25$, $p < .001$]. The results of the regression analysis suggest that participants who perceive phenomena from different viewpoints are inclined to think about dealing with a problem in the best way.

In the case of denial, two wisdom dimensions were its predictors: reflective wisdom ($\beta = -.276$; $p < .000$) and cognitive wisdom ($\beta = -.241$; $p < .000$). The value of adjusted $R^2_{adj} = .192$ indicates that the abovementioned variables can account for 19% of the variance in denial [$R = .444$, $F(301,2) = 36.76$, $p < .001$]. Those respondents who do not accept existence in its unpredictability and uncertainty, and who have lower capacity for self-observation, self-examination, and self-awareness tend to refuse to believe that the problem is real and act as though it has not even happened.

When substance use is the dependent variable, reflective wisdom is the only predictor: ($\beta = -.212$; $p < .000$). The value of adjusted $R^2_{adj} = .042$ indicates that the aforesaid variable can account for 4% of the variance in substance use [$R = .212$, $F(301,2) = 14.07$, $p < .001$]. Individuals who are more self-centered may be more disposed to use stimulants to reduce distress.

Analyzing instrumental support as the dependent variable, affective wisdom ($\beta = .220$; $p < .000$) and cognitive wisdom ($\beta = .133$; $p < .000$) were found to be the predictors. The value of adjusted $R^2_{adj} = .080$ indicates that those variables can account for 8% of the variance in instrumental support [$R = .294$, $F(301,2) = 14.14$, $p < .001$]. Individuals who are more compassionate toward others and have a deeper understanding of positive and negative events of life seek advice, assistance, or information from others.

Finally, when positive reinterpretation is the dependent variable, reflective wisdom ($\beta = .375$; $p < .000$) and affective wisdom ($\beta = .149$; $p < .000$) are its predictors. The value of adjusted $R^2_{adj} = .207$ indicates that the aforementioned factors can account for almost 21% of the variance in positive reinterpretation [$R = .461$, $F(301,2) = 40.25$, $p < .001$]. Respondents who progressively overcome own subjectivity and projections, and are benevolent towards others are likely to reframe the stressors in positive terms.

In order to verify the last hypothesis, we investigated the mediating role of age in the relationship between wisdom general index and the coping strategies that correlate with wisdom and age: planning, active coping, behavioral disengagement, denial, and positive reinterpretation. The choice was motivated by the conditions that are the basis for establishing mediation according to the Baron and Kenny approach (MacKinnon, Fairchild, Fritz, 2007): 1) a significant relation of the independent variable to the dependent variable is required (c) (Figure 2); 2) a significant relation of the independent variable to the mediator is required (a); 3) the mediator must be significantly related to the dependent variable (b); 4) the coefficient connecting the independent variable with the dependent variable (c) must be larger than the coefficient relating these variables after including the mediator (c').

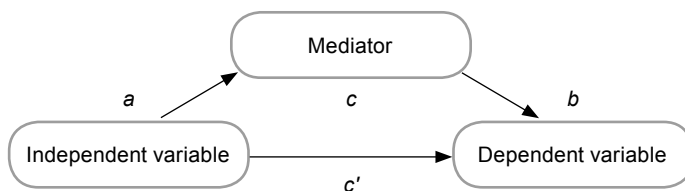


FIGURE 2. Mediation model.

Investigation of the mediating role of correlating dimensions of age in the relationship between wisdom and planning revealed that total effect of wisdom on planning ($\beta = 0.349 \rightarrow \beta = .312$; $z = 6.786$; $p = .00$) was significantly reduced upon the inclusion of age. Therefore, testing mediation confirmed that age acts as a mediator.

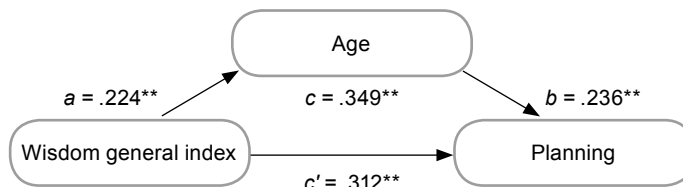


FIGURE 3. Relationships between wisdom, age, and planning.

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

We obtained similar mediating effect in the case of: acting coping ($\beta = 0.218 \rightarrow \beta = .195$; $z = 6.918$; $p = .00$), behavioral disengagement ($\beta = -0.382 \rightarrow \beta = -.374$; $z = 5.116$; $p = .00$), denial ($\beta = -0.398 \rightarrow \beta = -.380$; $z = 5.928$; $p = .00$), and positive reinterpretation ($\beta = 0.430 \rightarrow \beta = .425$; $z = 5.502$; $p = .00$).

DISCUSSION

The overall aim of this study was to examine if and how wise functioning correlates with and predicts coping strategies. The hypothetical assumptions found its partial support as in the majority of cases the hypothesized relationships were confirmed. The general wisdom index and its components correlated positively with some theoretically adaptive strategies and negatively with some avoidant-coping strategies. Moreover, wisdom dimensions predicted positively planning, instrumental support, and positive reinterpretation, and negatively – denial and substance use. Such results, although they cannot be generalized to the adolescents population, give an insight to understand the potential dynamics existing between wisdom and coping strategies in this particular stage of life.

Firstly, we consider reflective wisdom as it correlates with eleven coping strategies and predicts planning, denial, substance use, and positive reinterpretation. Reflective wisdom includes intuitive thinking and is expressed in a the capacity to perceive phenomena and events from multiple perspectives (Ardelt, Edwards, 2016). Therefore, it may help an individual in dealing with a problem in the best way (planning), thinking about how to confront the stressor, and addressing the problem through making a plan of action or focusing on the next step (Chronister, Chang, 2007).

Reflective wisdom is also an important capacity to positively reinterpret difficult situations that one is experiencing. It may result from the fact that personal resources and individual potentials are considered optimal to facilitate adaptive responses to stressful and challenging situations (Feiser et al., 2016). Because wisdom is a human strength (Peterson, Seligman, 2004), consequently wise choices may consist in adopting positive coping strategies such as reframing the stressor in positive terms in times of stress. Moreover, positive reframing belongs to a group of action-oriented strategies and, according to Whitehead, Dorstone, and Ward (2015), characterizes the process

of perseverance when faced with adversity and life difficulties. Joseph and Linley (Linley, 2003) consider an individual's ability to alternate their personal view on a stressful event and negative emotions as a sign of growth, wisdom, and strength. Wise individuals self-reflectively process different life challenges (meaning-making or positive reframing) and believe that they are able to cope with them, being aware of events' uncontrollability (Glück, Bluck, 2013; Westrate, Glück, 2017). Thus, reflective dimension of wisdom helps to consider unpleasant circumstances not from one avoiding perspective, but from many different angles (Ardelt, 2003).

Lower levels of reflective wisdom also predict refusing to believe that the problem is real (denial). On the contrary, being wise includes acceptance of life in its unpredictability and ambiguity. Erikson (1959/1980, p. 104) suggests that integrity and wisdom mean the acceptance of "one's own and only life cycle and of the people who have become significant to it" and Staudinger, Smith, and Baltes (1992, p. 272) consider wisdom as "good judgment and advice on important but uncertain matters of life." While accepting things as they are implies recognition of the problem as a part of human existence, denial consists in acting as though it has not even happened.

People perceived as reflective and wise are also less likely to be involved in substance use. It may be related to having inner strength that means being open to life events, dealing with its challenges and adversities, engaging in meaningful decisions and worthy actions (Viglund, Jonsén, Lundman, Strandberg, Nygren, 2013), without using strategies that are proven less effective and lead only to temporarily forgetting about the problems or alleviation of anxiety. Indeed, American studies completed with the participation of high school seniors show that Adolescent Wisdom Scale and Subscales were significantly connected to lower alcohol and cigarette consumption (Perry, Komro, Jones, Munson, Williams, Jason, 2002).

Secondly, an affective dimension of wisdom that consists in being empathetic, peaceful, and gentle (Bluck, Glück, 2005), correlates with eight coping strategies and predicts instrumental support and positive reinterpretation. Affectively wise people are inclined to display a greater compassionate understanding of the self and others (Clayton, Birren, 1980) and this capacity may lead them to seek advice, assistance, or information from others (looking for instrumental support). In fact, Strachan and collaborators (2001) underline that self-awareness plays a central role in the constant self-regulation and allows for consideration of innumerable alternatives to make a life more worthwhile and fulfilling. Self-understanding allows people to recognize that they need assistance and ask those around them for help. Moreover, being affectively wise may be expressed in a positive reinterpretation of the stressor. In fact, Gohm and Clore (2002) report that the ability to deal with one's emotions was associated with adaptive coping styles, specifically with positive reinterpretation and seeking instrumental social support.

Thirdly, cognitive wisdom that consists in the desire to comprehend the deeper meaning of events, correlates negatively with denial and positively with seeking social support. There is some theoretical and empirical evidence to support such results. Halama (2014) reports a negative association between the dimension of meaningfulness of Antonovsky's sense of coherence and denial among Slovak adolescents. When individuals feel that life has meaning to them, they do not reject the notion that a difficult event is real and instead they act to face a problematic situation. Other studies reveal a positive relationship between individual dimensions of meaning in life (cognitive, motivational, and affective) and coping strategies in older age. Individuals with a strong feeling of self-realization declared less frequent use of maladaptive coping strategies. Cognitive

wisdom also includes acceptance of the inherent limits of knowledge, unpredictability and uncertainty (Ardelt, Oh, 2010), and is a predictor of instrumental support seeking. According to Skinner and Zimmer-Gembeck (2016), support-seeking is a particularly popular strategy used by adolescents to cope with stress. Therefore, asking the close ones for assistance may indicate wise approach to life as an individual desires to comprehend the deeper meaning of events with the help of people who have more life experience.

The last hypothesis regarded the possible mediating role of age between wisdom and specific coping strategies. The results confirmed our assumptions in the case of wisdom and planning, acting coping, behavioral disengagement, denial, and positive reinterpretation, showing that the process through which wisdom affects chosen coping strategies includes an important variable of age. On the one hand, our results may mean that not all adolescents who are considered wise will use more adaptive strategies or less maladaptive tactics of coping. For example, young people who appear to be wise indeed act wisely in some situations, and in others they do not. In the same circumstances wise adolescents may behave differently because of their age. On the other hand, our outcomes may also indicate that we would expect adolescents who are older to employ more constructive ways of dealing with problems, regardless of the level of wisdom they display. Such a conclusion finds its support in studies by Pasupathi, Staudinger, and Baltes (2001). Their outcomes point to adolescence and very early adulthood (in the early 20s) as the time period in which individuals' wisdom-related knowledge and judgment develops to adult levels.

CONCLUSIONS

Our research provides some initial evidence indicating that wise thinking, behaving, and age are related to coping strategies. It seems that wise individuals act when confronted with adversity and obstacles, focusing on the benefits that follow from stressful events (Pargament, 1997). Inversely, they try to avoid using responses that are commonly considered less adaptive or immature: denial or substance use. These choices may be related to the equilibrium between knowledge and doubt that is believed to be the core of wisdom. Therefore, being wise lies not in what is known, but rather in the way in which the knowledge is used in everyday life and experienced as time passes by (Meacham, 1990).

LIMITATION AND FUTURE DIRECTION

A major limitation of this analysis is its cross-sectional character that does not allow to determine cause and effect relationship. Therefore, next studies could have longitudinal design in order to follow respondents over a course of time and explain hypothesized changes that may have arose over the period of data collection. Moreover, because our study is of purely quantitative nature, we think that qualitative research should follow to complement received outcomes. Additionally, the results obtained should be interpreted with caution given the lower than desirable value of alpha for affective and reflective wisdom.

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MĄDRE FUNKCJONOWANIE A STRATEGIE RADZENIA SOBIE ZE STRESEM U NASTOLATKÓW: WIEK JAKO ZMIENNA INTERWENIUJĄCA

Streszczenie: Z uwagi na to, że niewiele wiemy o rozwoju mądrości w okresie adolescencji, badanie zostało zaprojektowane w celu przeprowadzenia analizy, czy i jak mądre funkcjonowanie może być predyktorem strategii radzenia sobie ze stresem u nastolatków. Ponieważ „laickie” teorie mądrości sugerują, że mądrość przychodzi z wiekiem, chciano zweryfikować, czy i jak wiek może korelować z mądrością oraz zbadać rolę wieku jako mediatora pomiędzy mądrością a radzeniem sobie. W konsekwencji artykuł dostarcza pewnych wstępnych dowodów wskazujących, że mądre myślenie, zachowanie i wiek są powiązane ze strategiami radzenia sobie. Wydaje się, że

osoby charakteryzujące się mądrością działają w obliczu przeciwności i przeszkód, koncentrując się na korzyściach wynikających z wydarzeń stresogennych. Równocześnie osoby takie starają się unikać reakcji, które są powszechnie uważane za mniej adaptacyjne lub niedojrzałe: zachowania unikowe lub stosowanie substancji uzależniających. Takie wybory mogą być związane z równowagą pomiędzy wiedzą a wątpliwościami, która jest uważana za rdzeń mądrości. Dlatego bycie mądrym nie polega na posiadanej wiedzy, ale raczej na sposobie, w jaki wiedza ta jest wykorzystywana w życiu codziennym i doświadczana w miarę upływu czasu.