Assignment Three

**Daily Hassles as a Source of Stress in People's Lives**

by

Alan Hubbard

S326012

for

Dr Michelle Hilder-Achurch

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Abstract

“Stress is the result from a transaction between the individual and the environment.” (Mason, J. 1976) Stress can be divided between Life Events; the most major stressors, including the death of a spouse or child, Chronic stress; ongoing demands through situation and can include chronic illness, and Daily Hassles; the minor of the former stressors, including arguments, misplaced items, etc. When daily hassles occur, they produce negative emotions such as annoyance, irritation or worry, and/or induce an awareness that your goals or plans will be more difficult or impossible to achieve. These daily hassles can have an effect on an individual’s physical and psychological health.

Daily stressors are ‘irritating, frustrating, distressing demands that to some degree characterise everyday transactions with the environment’. (Kanner et al., 1981) Examples of daily stressors are losing or misplacing items, such as keys or a phone, missing the bus or being stuck in traffic, et cetera. Although they are defined separately from other stressors they are naturally linked to one another. As a result of a major or chronic stressor, a daily hassle may also occur, or vice versa. Further the impact of daily hassles and major stressors are compounded when experienced in conjunction with one another.

The effect of daily hassle on the health and well-being of individuals, is directly related. These relationships can be seen through the reported energy levels of individuals and the frequency and intensity of stressors experienced and reported by them. That is, people that had higher frequency and intensity of hassles, reported lower energy levels, which was further identified to have significant effects on somatic health. Alternatively, uplifts, positive experiences through daily life, had no correlation to energy levels of individuals. People’s reaction to daily hassles, can result in a reduced ability to self-motivate, due to reduced energy levels; however the physical illnesses that can result from these hassles further develops and compounds these issues. (DeLongis et al,. 1982)

When people, subjectively, interpret an uplift or stressor, this perception is due to the individual’s background or experiences. The identification of uplifts from older people, seemed to be of a lower threshold than by middle aged or younger adults. (DeLongis et al,. 1982). Like daily hassles, this is likely from experiences, however, unlike them, the inverse is true. That is, the more seemingly minor uplifts were reported more regularly, which could be attributed to their current state. Whereas, the reporting of daily hassles was at a higher threshold, either due to more effective coping methods or less acknowledgement or those occurrences as significant enough to warrant reporting.

The effect of daily hassles on eating habits, type of food chosen and quantity of food eaten, is to increase the consumption of high fat and high sugar foods between meals. These hassles interrupt regular healthy eating habits. The ‘self-medicating’ behaviour of individuals to consume high fat, high sugar foods, rather than nutrient rich foods, can induce more alarming health risks, such as an increased risk of cardiovascular disease and cancer. The result of daily hassles on eating varies by type. “Ego-threatening, interpersonal and work related hassles were found to elicit a hyperphagic response, whereas, physical hassles were found to elicit a hypophagic response.” (O'Connor et al., 2008)

These effects of daily hassles on an individual's eating habits are a direct impact on the health of individuals. The hyperphagic response, or increased motivation to consume food, if chronic, can develop into becoming overweight or obesity. This result causes a number of physical health complications, such as high blood pressure, high cholesterol and cardiovascular disease. The hypophagic response, or decreased motivation to consume food. This reaction can have negative effects if the lack of caloric intake become sufficient to reduce nutrients and become calorie deficient.

The stress indicated by women with bulimia, rated significantly higher stress levels, prior to binge eating episodes, than those reported by women without bulimia. (Crowther, J. 2001). Although the subjects included in this study did not report experiencing a significantly greater number of daily hassles, they did report them to be more impactful on them. This supports DeLongis et al, (1982) in the report that stressors are unavoidably linked.

Daily hassles also affect mental health of individuals and possibly groups of people. “Daily hassles are a significant predictor in psychological symptoms.” Daily hassles can be a more accurate predictor of mental health or illness than major life-events. However, the link between life-events and daily hassles cannot be ignored. Usually minor daily hassles that can be dealt with in an ordinary situation, may become an insurmountable task when coupled with a major life-event; the major life-event may even be the cause of the daily hassle. The effect of perceived stress, through daily hassles, can be a strong indicator of mental health symptoms. (Lu, 1991)

There are five basic types of stress coping strategies: problem solving, support seeking, avoidance, distraction and positive cognitive restructuring. Problem-solving is where the stress causing situation is reduced or eliminated through an active means. Support seeking is where another individual or group is sought out to help mitigate or deal with the stressor through other available means; this includes emotional support. Avoidance is the deliberate behaviour to deny the presence of the stressor. Distraction, whilst similar, is the behavior to minimise the stress. Finally, positive cognitive restructuring seeks to reframe the stressor and identify more positive potentials. (Folkman, 2011)

Direct coping, as described by Lu (1991), or problem-solving, resulted in less symptoms or promoted mental health in subjects. Suppression, in contrast, resulted in poorer mental health. The method of coping that is undertaken by an individual has a direct relationship with the impact that stress has on them. That is, individuals that use more direct coping methods have better mental health than those that use more avoidance methods. Furthermore, those that have dealt with a more significant number of hassles in the past were less likely to adopt problem-solving techniques or be delayed in their adoption of those beneficial techniques. Therefore, the impact of those stressors could be more impactful, as they are not dealt with as effectively, as well as the individual experiencing a greater number of daily stressors, further reducing mental health. (Lu, 1991)

Training to control one’s heart rate and cerebral blood flow may be a mechanism that can reduce the stress perceived. In a 2014 study of 30 Japanese working males, 15 were trained to control and reduce their heart rate and 15 men remained in the control group. The groups were tested with MRI, questionnaires and measuring a stress marker through salivary cortisol levels. The results of the training showed marked improvements in test scores by the intervention group in comparison to the control group. This demonstrates that by manipulating biofeedback, through deliberate, albeit unaware, training, individuals can reduce stress conditions in a conscious method. (Kotozaki et al., 2014)

Social Support or community bonds can help to mitigate stress on individuals. The ability of a person to consult friends and family in times of stress or simply have the knowledge that the support is available provides some comfort. For people that cannot adapt to stress as well, will more regularly rely on these social support structures. (Montpetit et al., 2010) However, this reliance is due to a reduced ability to mitigate the stress within one’s self. Further, this social support may not be as supportive as the person thinks. Dependance on social support, is likely, through necessity rather than strictly positive social interaction. (Rook, 1984)

The simplest method to deal with daily hassles, may just be through ageing. There are a number of possibilities as to why this is, one being that older people have greater perspective through experience therefore do not perceive the stress as significant enough to warrant recognition. This may also be due to more effective coping mechanisms, again due to experience. Older people are reported to have less breadth of techniques to deal with stressors, that is, they use fewer methods. Typically, the most favoured method is proactive coping. This information is quite counter intuitive; older people tend to have as many life events occurring as younger people and yet the number of daily hassles decline, which could be due to perception. Additionally, younger adults use more avoidant and other negative strategies that prove to be ineffective. (Folkman, 2011)

The way in which daily hassles affects people is a varied as the stressor experienced. Daily hassles, and other stressor groups, are studied in isolation, their effects on individuals is in conjunction with other stressors in their lives. The daily hassles, both in frequency and intensity, and coping methods to counter stress tend to show a direct correlation of psychological and physical health. Further, coping methods, by type, can also be a predictor of quality of mental health. In a limited study, the ability of an individual to cope can be trained, which may prove to be a successful model to deal with stress.

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