Comparison of Coping Strategies between Volleyball and Kho-Kho Players

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Abstract

**Purpose** - Purpose of this study was to compare of coping strategies between volleyball and kho-kho players. **Method** - In this study 20 volleyball and 20 kho-kho players of Mahatma Gandhi Kashi Vidyapeeth Varanasi were selected as subject. The players age ranged between 18-25 the subjects were participated inter-zonal university tournament. Coping strategies was selected as variable. Coping strategies scale design by Prof. A.K. Srivastva was used. The test consists of set of 50 incomplete statements which were to be completed by choosing never, rarely, most of the times and almost always. The response value ranged from 0-200. **Statistical test** - *-test was used as the statistical technique. From the finding of this study it may be concluded that the volleyball and kho-kho players were found statistically difference with regard to coping strategies in performance. **Conclusion** - there was significance difference between volleyball and kho-kho players in compared to coping strategies.

**Keywords:** Coping strategies.

**INTRODUCTION**

Coping strategies refer to the specific efforts, both behavioral and psychological, that people employ to master, tolerate, reduce, or minimize stressful events. Two general coping strategies have been distinguished: problem-solving strategies are efforts to do something active to alleviate stressful circumstances, whereas emotion-focused coping strategies involve efforts to regulate the emotional consequences of stressful or potentially stressful events. Research indicates that people use both types of strategies to combat most stressful events (Folkman & Lazarus, 1980). The predominance of one type of strategy over another is determined, in part, by personal style (e.g., some people cope more actively than others) and also by the type of stressful event; for example, people typically employ problem-focused coping to deal with potential controllable problems such as work-related problems and family-related problems, whereas stressors perceived as less controllable, such as certain kinds of physical health problems, prompt more emotion-focused coping.

This differs from proactive coping, in which a coping response aims to neutralize a future stressor.

Subconscious or non-conscious strategies (e.g. defense mechanisms) are generally excluded from the area of coping.
The effectiveness of the coping effort depends on the type of stress, the individual, and the circumstances. Coping responses are partly controlled by personality (habitual traits), but also partly by the social environment, particularly the nature of the stressful environment.

The focus of this coping mechanism is to change the meaning of the stressor or transfer attention away from it. For example, reappraising tries to find a more positive meaning of the cause of the stress in order to reduce the emotional component of the stressor. Avoidance of the emotional distress will distract from the negative feelings associated with the stressor. Emotion-focused coping is well suited for stressors that seem uncontrollable (ex. a terminal illness diagnosis, or the loss of a loved one). Some mechanisms of emotion focused coping, such as distancing or avoidance, can have alleviating outcomes for a short period of time, however they can be detrimental when used over an extended period. Positive emotion-focused mechanisms, such as seeking social support, and positive re-appraisal, are associated with beneficial outcomes. Emotional approach coping is one form of emotion-focused coping in which emotional expression and processing is used to adaptively manage a response to a stressor. Typically, people use a mixture of several types of coping strategies, which may change over time. All these methods can prove useful, but some claim that those using problem-focused coping strategies will adjust better to life. Problem-focused coping mechanisms may allow an individual greater perceived control over their problem, whereas emotion-focused coping may sometimes lead to a reduction in perceived control (maladaptive coping).

**METHODOLOGY**

**Selection of Subject** – In this study 20 volleyball and 20 kho-kho players of Mahatma Gandhi Kashi Vidyapeeth Varanasi were selected as subject. The players age ranged between 18-25 the subjects were participated inter-zonal university tournament.

**Selection of Variable**- For the purpose of this study the coping strategies was selected as variable. **Criterion Measure**-coping strategies scale design by Prof.A.K.Srivastva was used. the test consist of set of 50 incomplete statements which were to be completed by choosing never, rarely, most of the times and almost always. the response value ranged from0-200. After the objectives of the test were explained the subjects were asked to answer each statement as quickly as possible and truthfully. On the basis of percentiles points norms as suggested in the test those with score below 25 were categorized as low, within 26-75 were moderate and those with 76 and above score were categorized as high coping strategies.

**Collection of Data**- for the purpose this study the data was collected from M.G.K.V.P Varanasi with the help of questionnaire.

**Statistical Procedure**- to find out the difference of coping strategies between volleyball and kho-kho players, the t-test was used as the statistical technique.

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean</th>
<th>S.d</th>
<th>t-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volleyball Players</td>
<td>135.50</td>
<td>20.11</td>
<td></td>
</tr>
<tr>
<td>Kho-kho Players</td>
<td>105.21</td>
<td>13.12</td>
<td></td>
</tr>
</tbody>
</table>

Level of sig.0.05 (38)2.21
The table shows that the mean and s.d of volleyball players 135.50, 20.11 and mean and s.d of kho-kho players 105.21, 13.12. t-value is higher than the tabulated value.

Graphical Representation of Coping Strategies of Volleyball and Kho-Kho Players

Discussion of Finding
From the finding of this study it may be concluded that the volleyball and kho-kho players were found statistically difference with regard to coping strategies in performance. The volleyball players were better in coping strategies this may be due to the fast rallying system in volleyball that developed there coping strategies more pronouncedly than the kho-kho players.

Conclusion
On the basis of results it may be concluded that there was significance difference between volleyball and kho-kho players in compared to coping strategies.

References