Abstract
Research has shown that some types of coping are associated with better adjustment than others. However, because adolescents cope with stress in complex ways, focusing on individual coping mechanisms may not accurately represent the manner in which adolescents cope (Aldridge & Roesch, 2008; Skinner & Zimmer-Gembeck, 2007). Both theory and research support the tenet that coping is multidimensional (Skinner, Edge, Altman, & Sherwood, 2003; Skinner & Zimmer-Gembeck, 2007). As such, the goal of this study was to develop adolescent coping profiles. The sample included 982 10th and 11th grade students from public high schools in the Mid-Atlantic U.S. Results supported a four group model which reflected how frequently the adolescents engaged in coping strategies when dealing with a stressful event. Findings from this study suggest that the frequency that adolescents employ coping strategies may be as important as the type of coping strategy used to deal with stressful events.

Sample
- Surveys were administered to 982 10th and 11th grade high school students (51% girls; 66% Caucasian)
- All participants attended a public high school in Delaware, Pennsylvania, or Maryland
- Mean age of the adolescents was 16.04 (SD=.73)

Procedures
During the spring of 2007, adolescents who provided assent, and who had parental consent, completed a self-report survey in school. The survey took approximately 40 minutes to complete. Participants were given a movie pass after turning in the survey.

Measures
Coping
The COPE Inventory (Carter et al., 1989) was used to assess adolescents’ coping strategies. The COPE includes the following scales:
- Mental Disengagement (“I do other activities to take my mind off things”)
- Venting Emotions (“I get upset and let my emotions out”)
- Instrumental Social Support (“I try to get advice from someone about what to do”)
- Active Coping (“I concentrate my efforts on doing something about it”)
- Denial (“I say to myself this isn’t real”)
- Religious Coping (“I put my trust in God”)
- Humor (“I laugh about the situation”)
- Emotional Social Support (“I discuss my feelings with someone”)
- Planning (“I make a plan of action”)

The response scale ranges from 1 = don’t do this at all to 4 = do this a lot. Previous research has supported the validity of this measure (Carter et al., 1989). Cronbach’s alphas for the COPE scales in our sample ranged from 0.75 – 0.90.

Results
Latent profile analysis (LPA), conducted using Mplus Version 6.0 (Muthén & Muthén, 1998-2010), identified distinct groups that accounted for the distribution of subjects across the Cope scales. LPA models with increasing numbers of groups were fitted to the data until comparative fit statistics suggested that the estimated model did not provide statistically significant improvement in fit over a model with one fewer groups. Fit statistics for models in which one to five groups were fitted to the data are displayed in Table 1. The Bayesian Information Criterion (BIC) and the Sample-Size-Adjusted BIC were used to estimate model fit; lower numbers represent better-fitting models (Kline, 2005). The Vuong–Lo–Mendell–Rubin likelihood ratio test and the adjusted Lo–Mendell–Rubin likelihood ratio test were used to compare models. Finally, the Entropy measure was used to indicate how well the models classified individuals into groups. Although the five group model had lower BIC and Adjusted BIC values than the four group model, both likelihood ratio tests supported a four group model; p values indicated that the five group model did not fit the data better than the four group model. Moreover, entropy for the four group model suggested good classification qualities.

Conclusions
As shown in Table 2, the four group model reflected how frequently the adolescents engaged in coping strategies when dealing with a stressful event. Class 1 consistently engaged the least in the use of the coping strategies, whereas Class 4 consistently engaged the most.

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