

# Enhancing coping skills for new management trainees: A programme based on coping effectiveness intervention

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Prior research suggests that new management trainees often experience stress, but few studies have investigated psychological interventions or mind-body therapies for this population. The purpose of this study is to equip new management trainees with practical stress coping techniques and enhance their self-efficacy in stressful work situations. To develop a systematic coping training programme, the study reviewed empirical studies and used Anshel (1990)'s COPE approach and Lazarus and Folkman (1984)'s Goodness-of-fit Model as frameworks for psychological coping techniques and instruments. The study's coping training programme, called Coping Effectiveness Training Intervention, includes specific techniques, timelines, and follow-up actions. The study begins by introducing the programme's design from a pragmatism perspective and then justifies it based on the literature review. The study provides practitioners with a scientific coping training framework for use in real business settings to enhance trainees' self-efficacy, help them adapt to their new working environment, and improve their job performance.

Keywords: coping effectiveness intervention; management trainee; self-efficacy; stress; stress coping

Newly appointed management trainees represent the future leaders of their respective companies. However, these individuals often experience a range of stressors including involuntary relocation due to job transitions, a lack of job satisfaction, excessive testing or evaluations, insufficient training on technological tools, and workplace ostracism or knowledge hiding (Martínez-Líbano & Yeomans, 2023; Melrose, 2019; Riaz et al., 2019; Sareen, 2019). Moreover, research has shown that younger staff members experience more work-related stress than their more experienced counterparts. They are also more likely to suppress their emotions (Joshi et al., 2021; Pilao et al., 2019; Yeung & Wong, 2020). These stressors can impact their performance, limit their ability to adapt to the new working environment, and potentially hinder their future career prospects.

To address these challenges, it is crucial to provide new management trainees with opportunities and courses to help them cope with these stressors. Implementing stress management training can assist in dealing with stressful situations, ultimately leading to improved job performance (Joshi et al., 2021). However, previous research has primarily focused on administrative policies, rather than psychological interventions or mind-body therapies. Studies that focus specifically on psychological interventions for newly appointed management trainees are sparse (Eby et al., 2019; Fusar-Poli et al., 2021; Kinser & Robins, 2013). Therefore, it is imperative to develop a scientifically sound coping training program tailored to newly appointed management trainees. Such a programme would help these individuals navigate the aforementioned stressors, adapt to their new working environment, and enhance their self-efficacy.

The programme should include both individual and group-based interventions, incorporating mindfulness techniques, cognitive behavioural therapy, and relaxation exercises. Additionally, the program should also focus on developing effective communication skills, leadership skills, and problem-solving skills to help new management trainees navigate the challenges of their roles. It is important to note that a comprehensive coping training programme should be an ongoing process, rather than a one-time event. To ensure the long-term success of such a programme, it should be regularly evaluated and updated based on feedback from the trainees. This would enable the company to provide a supportive environment that promotes employee well-being, fosters personal growth, and ultimately, drives business success.

## METHODS

### Coping training design

**Participants.** The proposed coping training programme targets 15 management trainees, consisting of eight men and seven women. The purpose of the programme is to provide support and coping strategies to the trainees who are experiencing intense stress from taking on multifunctional responsibilities and adapting to a new organisation. As Formanoy et al. (2016) suggest, this kind of situation can be particularly challenging for novices, making CET intervention a valuable tool for their personal and professional development. The management trainees in this programme range in age from 21–28. They are assigned to different departments and are responsible for junior managerial tasks. During the programme, they work alongside current departmental managers who act as their mentors, guiding them through their roles and providing support. The trainees are responsible for various tasks, including project analysis, task delegation, supervision, feedback, and resource control.

Through the CET intervention, the trainees will learn various coping techniques that will help them manage their stress levels more effectively. The program will consist of several sessions that cover topics such as time management, mindfulness, and cognitive-behavioural techniques. In addition to these sessions, trainees will have access to one-on-one coaching sessions with experienced professionals who specialize in stress management.

**Training design.** The programme consists of a 6-week block CET intervention, a 2-week maintenance session, a mid-term follow-up held during week 4, and an end-term follow-up at the end of week 8. Table 1 provides a detailed overview of the programme's structure. Before the

intervention and after the maintenance session, trainees are required to complete self-evaluations in the form of the Coping Self-Efficacy Scale (CSE) and Coping-Effectiveness Scale (CE) questionnaires. These questionnaires consist of 26 items and are based on the work of Chesney et al. (2006) and Gottlieb and Rooney (2004), respectively.

The CET intervention is designed to help management trainees cope with the stressors that arise from their multifunctional responsibilities and new organisational environment. The programme is specifically tailored to the needs of the trainees, who range in age from 21–28 and are assigned to various departments to undertake junior managerial roles. They work closely with current departmental managers who serve as their mentors during the programme. The trainees' responsibilities include project analysis, task delegation, supervision, feedback, and resource control.

The self-evaluations are a crucial component of the programme, as they provide a baseline measurement of the trainees' coping self-efficacy and effectiveness before the intervention and help track their progress throughout the program. By completing these questionnaires, trainees can identify areas where they need to improve and gain a better understanding of their coping skills and effectiveness.

Table 1  
 Framework of CET intervention sessions and coping exercise

Week	Session Theme	Duration	Coping exercise
Week 1	Understand own stressors and coping ability	60min	Diary
Week 2	Control emotion	60min	Diary
Week 3	Organize input	60min	ABCD Method
Week 4	Plan response	60min	Diary
	Mid-term follow-up (without CSE & CE questionnaires)	2 days	
Week 5	Execute	60min	ABCD Method
Week 6	Seek social support	60min	Diary
Week 7–Week 8	Maintenance	2 weeks	ABCD Method
End of Week 8	End-term follow-up	2 days	
	Self-evaluation with CSE & CE questionnaires	45min	

**Independent variable.** The independent variable is the CET intervention based on Chesney et al. (2006)'s CET framework, which provided a theoretical coping foundation to our intervention and has been successfully adapted in Reeves et al. (2011)'s research. The CET framework involves stressful scenario evaluation, problem- and emotion-focused coping strategies, social support utilisation, and the correlations between stressors and coping strategies.

**Dependent variable.** The dependent variables are CSE and CE. CSE is assessed through the 26-item CSE scale (Chesney et al., 2006), and CE is assessed through the CE scale (Gottlieb & Rooney, 2004). Trainees will complete self-evaluations in the format of 5-score Likert scale. For example, 1-score means “definitely cannot do”, and 5-score means ‘definitely can do’ (Chesney et al., 2006).

**Baseline.** Trainees will complete the questionnaires by person in a quiet environment one day before the intervention is implemented. A formative perspective can be followed to evaluate whether or not the increase of self-efficacy by the CET intervention will be beneficial to trainees' coping effectiveness. Therefore, two measurement time periods (i.e., intervention and post-intervention) are set to conduct the coping training programme.

**Intervention.** The intervention enables trainees to reflect on stressors, learn coping skills, apply coping strategies, and review their practice, then introduce new coping skills progressively (Reeves et al., 2011).

#### *Session 1: Understand own stressors and coping ability*

This session aims to introduce the concept of stress and coping, develop trainees' awareness of stressors and coping responses. First, trainees reflect on their stress and coping experiences in life. The COPE approach and Goodness-of-fit Model are introduced. Meanwhile, mentors disseminate exemplars on how they cope with stressors, so that trainees can anticipate stressful events to remove anxiety. Trainees elaborate their understandings of stressful situations among working scenarios after the session. The home-assignment requests trainees to identify five individuals' strengths that facilitate them to cope effectively.

#### *Session 2: Control emotion*

In this session, trainees' emotion control skill will be grasped. It is to cultivate trainees' emotion-focused coping with uncontrollable stressors (e.g., peer pressure from different individual backgrounds). Trainees are instructed to focus on situations' appraisals and identify which stressors can be changed, and which cannot be. They are taught how their appraisals may affect physiological, emotional and behavioural status. For instance, trainees should understand their thinking errors and utilise thought stopping technique (e.g., closing eyes, changing visual field) (Ruddell et al., 2018). Furthermore, trainees should practice these techniques at work. In the homework assignment, trainees sort out their emotions and review how to better cope in similar situations.

#### *Session 3: Organise Input*

This session enables trainees to evaluate the accuracy and feasibility of the perceived information to set attainable and measurable objectives (e.g., efficient data-analysis). First, trainees review the actions of Session two. Second, as work goes deepened, more uncontrollable stressors (e.g., peer interruptions, colleagues' inappropriate suggestions) may occur. Therefore, it is important to solidify emotion-focused coping strategies, particularly the relaxation skill (Reeves et al., 2011). Specifically, two relaxation techniques are cultivated: rhythmic breathing and centring. Trainees need to match specific stressors with their emotion-focused strategies, then create a realistic coping plan when these stressors occur. Third, trainees should employ these skills in their coping plan. In the home-assignment, trainees use the ABCD method (short for Activating event-Beliefs-Consequences-Disputation) to identify positive elements from their coping plan to self-recognise their progressive coping ability.

#### *Session 4: Plan response*

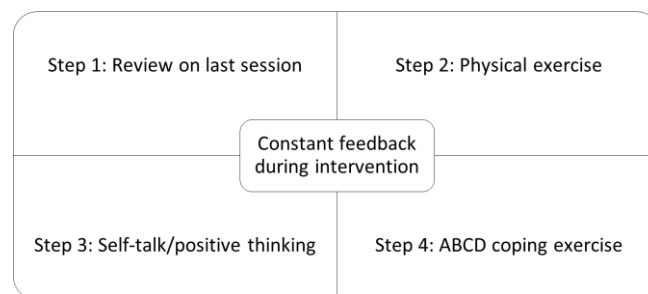
This session helps trainees to learn to make planning and preparations for potential errors and anticipated stressful situations. Some problem-focused coping strategies are introduced to manage controllable stressors such as project demonstration. First, trainees reflect on above emotion-focused sessions, home-assignments and emotion-focused coping skills in detailed business scenarios. Second, trainees are taught to use the practice simulation technique with mentor's prior demonstration, so that they can rehearse a stressful situation to reduce stress and strengthen coping ability, especially when they set a primary plan and a contingency plan. In this approach, trainees can identify controllable stressors and the pros and cons of their coping responses, then connect these stressors with the learned coping techniques. Third, trainees review some business cases with mistakes, and discuss how they will cope with such mistakes with the problem-focused coping skills learned in this session, and then transfer the learned at work. Fourth, trainees are assigned to write a positive case of themselves with their problem-focused coping strategies as home-assignment (Seligman et al., 2005).

#### *Session 5: Executive*

This session aims to extend trainees' problem-focused coping repertoire to cope with controllable stressors (e.g., low assertiveness). It advocates trainees' behavioural coping skills, self-talk and

positive-thinking. First, trainees reflect on Session4, including the learned coping techniques and their applications at work, and summarize home-assignments. Second, they are asked to sort out different coping strategies and fit them into respective stressors. They should elaborate on why the coping strategy is suitable for the relevant stressor. Based on the learned practice simulation technique, trainees start to adopt physical exercise to realize on-site stress coping. Third, trainees are encouraged to use self-talk and positive-thinking so that optimistic emotion can be reinforced. Some scenarios are designed to scrutinize their comprehension in the utilization of self-talk and positive-thinking. They need to employ these learned coping skills at work ultimately. Fourth, in the home-assignment, ABCD method is used to mark their positive thinking, and reappraise their stress coping strategies at work. During all the above sessions of intervention, continuous feedback is vital as it enables trainees to realize their strengths and weaknesses in coping with stress. Meanwhile, the practice time will be gradually reduced for more feedback opportunities. The training flow of the executive session can be seen in below figure.

Figure 1  
 Summary of Session 5 Training flow



### *Session 6: Seek social support*

This session aims to strengthen trainees’ understandings and utilisation of social support. First, trainees reflect on their problem-focused coping skills, home-assignments and application of coping techniques at work. Second, trainees are taught that social support categorizes into problem-focused and emotion-focused support. Problem-focused support mainly comes from organisational support, leader-member exchange and supervisor consideration. Emotion-focused support mainly comes from friends, family and peers (Denton et al., 2014). Third, after identifying their support network and rate how often they engage with each other (Baruch-Feldman et al., 2002; Dey & Relojo-Howell, 2021), trainees classify their social support members into the above two categories. Fourth, trainees map the stressors into relevant social support members, and develop an action plan and communicate with them to obtain real support. The home-assignment asks trainees to record effective utilisation of social support to manage their stressors.

### *Session 7: Maintenance session*

With reference to Chesney et al. (2006), a maintenance session is reserved for trainees after the intervention. It assists trainees to improve their learned coping skills and transfer them into work. In addition, it offers trainees opportunities to review whether any clarification or support is needed.

### *Session 8: Follow-up (Week 4 and 8)*

First, trainees are debriefed by mentors, and join monthly 2-day workshops, complete online module evaluations to track their execution of coping strategies. They also join a half-day “live review” organized by mentors and two human resources staff to discuss their progress and feedback from subordinates and mentors. The role of human resources staff is to ensure the objective and justice of

the interview outcome. Second, trainees finish the CSE and CE questionnaires after the programme to measure the intervention effectiveness and their changes. Third, manipulation check is conducted to evaluate the practical significance of the intervention for participants. According to Hrycaiko and Martin (1996), this assessment includes three questions: (1) How important is the ability to cope with stressors? (2) Is the intervention process acceptable? (3) Are you satisfied with the progression of coping-skill mastery?

## DISCUSSION

**CET intervention** is a cognitive-behavioural theory-based intervention that emphasizes the matching of performers' coping strategies and stressors (Reeves et al., 2011). It is underpinned by the cognitive behavioural therapy aiming at changing cognition and reinforcing effective coping skills subsequently (Van der Klink et al., 2001). It is deemed to be appropriate to generalize in some highly competitive, changing or acute environments such as sports, military and business (Nahlén Bose et al., 2016). Self-efficacy acts as the dependent variable of CET intervention (Lamb et al., 2016) and is an important mediator in the relationship between individuals' coping effectiveness and job performance (Ebner et al., 2018).

**The COPE approach**, which reflects progressive 'control emotion, organize input, plan responses and execute actions', incorporates cognitive and behavioural forms of coping that mirror real-life settings, and is presented on account of serial utilization of cognitive and behavioural strategies chosen to cope with stressful situations in sport, military, business environments (Anshel, 2001; Wurst, 2016). The CET intervention designed is in conformity with the progressive steps of Anshel (1990)'s COPE approach. Moreover, Lazarus and Folkman (1984)'s Goodness-of-fit Model was adopted as the instrumental model to direct the utilisation of the coping techniques. The model proposes that when individuals perceive they can control over a stressor, problem-focused coping strategies will be primarily adopted. By contrast, when stressors are uncontrollable, emotion-focused coping strategies will be better choices (Ebner et al., 2018).

**Attentional control** is useful to control performers' emotions especially at the beginning of work and predict better performances. Grillon et al. (2016) used the sustained attention to response task (SART) and questionnaire survey to attest that lower attention control would bring in lower performance without threat perception, but individuals' performance could improve under threats with higher attention control, especially when threats were from uncontrollable stressors. Diehl et al. (2006) employed the psychometric properties of the Self-Regulation Scale (SRS) to test 443 students divided into self-administered individuals and group participants. Research results revealed that attention control was the only significant predictor for students' final grades in addition to self-efficacy.

**Thought stopping** is a practical and effective coping technique in controlling trainees' emotion and can be applied at work and coping exercises for them to abandon what cannot be controlled and avoid negative thoughts (Bakker, 2009). This technique is introduced at the early stage of trainees' enrolment to forge their emotional control ability for them to better cope with prospective situations in future work (Laela et al., 2018). Additionally, Calder Calisi (2017) conducted a randomised-control quantitative study to assess the effects of relaxation response on nurses' stress at work. Formanoy et al. (2016) implemented a 'Be Active and Relax' health plan for over 300 office workers. Results show that mental relaxation skill is effective for new enrolled staff when they are motivated by mentors.

**Practice simulation** is a well-timed technique to be employed in the Plan Response phase before practitioners' execution of work. Fauquet-Alekhine and Pehuet (2016) employed interdisciplinary case studies in five different fields to elaborate on the fundamental of practice simulation to enhance performance of professional activities with high risks. The research results showed that simulation facilitated professional practices when large-scale real examples were employed, and assisted performers in developing their own simulation technique and improving their skills and performance. Paravlic et al. (2020) conducted a meta-analysis review (n=8) on the effect of practice

simulation intervention. Results showed that practice simulation had a positive effect on both the single and dual-task conditions during self-selected and brisk walking speed.

**Positive-thinking** is implicated to be cultivated to cope with stress and to enhance job performance during their utilisation and reappraisal of coping strategies (Thomaes et al., 2020). Hatzigeorgiadis et al. (2011) conducted a meta-analysis of self-talk on task performance, and Thomaes et al. (2020) conducted a randomised field experiment of self-talk on the maths performance of children with inborn low assertiveness (n=212). Results showed that self-talk was more effective for fine and creative tasks than gross and conventional tasks.

**Social support** is recognized as a key mediator of job performance by the study among 211 traffic workers (Baruch-Feldman et al., 2002). Their results showed that their perceived quality of social support at work was correlated with some core performance outcomes such as performance ratings and occupational satisfaction. Social support enhanced self-efficacy, which in turn promoted performers to employ more adaptive coping skills (Denton et al., 2014). It suggests that seeking social support during the intervention is of vital importance to enhance trainees' coping ability with different stressors.

**Appraisal** is an important component in how an individual perceives, reacts and behaves within the transactional approach of coping and stress (Lipshits-Braziler et al., 2017). The CSE-scale questionnaire provides a measurement of an individual's perceived ability to cope with life challenges and to evaluate changes in CSE during the CET intervention (Chesney et al., 2006). Furthermore, interview debrief or diary can be adapted to use according to different training program situations. The ABCD method can be used to track a consistent reflection on the stressors, comb performers' emotional elements and help them self-appraise and reappraise for improvement (Selva, 2021).

## CONCLUSION

In conclusion, this study designed a coping training programme using CET intervention for new management trainees with supporting literature and critical rationales. It is important to iterate that, from the cognitive-behavioural perspectives, this study adopted the COPE approach to incorporate cognitive and behavioural forms of coping measures that mirror the real business setting and proposed a series of cognitive and behavioural coping techniques (i.e., problem- and emotion-focused) to cope with the stressful situations for them. It is implicated that through the progressive steps of 'control emotion, organise input, plan responses and execute actions', the CET intervention facilitates in mitigating new management trainees' stress and helps them accommodate to the new working environment more easily. There are limitations of this study. For example, some coping techniques (e.g., practice simulation) are applied more maturely in other fields than business, so the effects of the techniques need to be further examined. In addition, the CET intervention is at the hypothetical level. Therefore, future research may consider implementing the program and conducting a longitudinal study to follow up its effectiveness.

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