

AGATA CIEŚLAR
University of Social Sciences and Humanities
Faculty of Psychology

DIALOG WITH AN IMAGINARY INTERLOCUTOR AS A FORM OF SUPPORT IN COPING WITH STRESSFUL SITUATIONS

The research described in the article is based on the assumption that support is a function of internal dialogs, but their role in a stressful situation is not known. The subject of the research is dialogs with imaginary interlocutors and their role in coping in stressful situations. The participants in the study ($N = 73$) were asked to imagine a difficult situation. Then, the experimental group ($N = 36$) conducted an imaginary dialog with a person from the previously created map of support. The control group ($N = 37$) generated a list of possible solutions to a difficult situation. The study measured the quality of support obtained as a result of the dialog or as a result of making a list of solutions. The results show that a dialog with an imaginary interlocutor is a more effective form of coping with a stressful situation than generating a list of possible solutions to the problem.

Keywords: imaginary dialog, support, coping.

Current knowledge on internal dialogs encompasses empirical explorations in cognitive psychology, self-esteem and emotions, identity, the self and self-awareness, or development (Oleś, 2011). Dialogicality manifests itself in thinking aloud, talking to oneself, speaking on behalf of various characters, and conducting mental conversations. When looking for solutions to existential dilemmas people choose relationships with imaginary figures, whereas they “discuss” everyday matters between inner I-positions (Puchalska-Wasył, 2006). The study by Baltes and Staudinger (1996) on interactive minds and their influence on wis-

Corresponding address: AGATA CIEŚLAR – Faculty of Psychology, University of Social Sciences and Humanities, ul. Chodakowska 19/31, 03-815 Warszawa; e-mail: agatabarbaracieslar@gmail.com

I wish to thank Professor Piotr K. Oleś for the constructive comments and interesting dialogs that are reflected in this research report.

dom-related performance revealed that an internal dialog can be as effective in generating possible solutions to a problem situation as conducting an actual dialog with a friend concerning that issue. Moreover, support is one of the functions of internal dialogs (Puchalska-Wasył, 2006).

The dialogical self theory (Hermans, Kempen, & Van Loon, 1992) presents an approach to personality in terms of the self consisting of a number of I-positions – internal and external – as well as among between them (Oleś, 2011). The dialogical self is defined as a dynamic multiplicity of relatively autonomous I-positions in the imaginary landscape of the mind (Hermans et al., 1992). The self can move from one I-position to another as the situation and time change, which allows it to interpret the world, itself, and its relationship with the world from many points of view.

Social support is sometimes referred to as: the social support network, perceived support, and received support (Sęk & Cieślak, 2011). The social support network concerns the structure of contacts with other people, the number of people one is in contact with, as well as the frequency and type of these interactions. Received support concerns the help that an individual receives at present or received in the past. Perceived support is the estimated availability of help – that is, the estimation of what kind of help one can expect to obtain. Research shows that perceived support is a better predictor of well-being and coping with stress than the social support network or received social support (Pati & Pietrantonio, 2010).

In the research by Puchalska-Wasył (2006), participants spontaneously enumerated Support and Bond next to Substitution, Exploration, Self-Improvement, Self-Guiding, and Insight as the functions of internal dialogs. However, no research is available on whether or not internal dialog does indeed help to cope with a difficult situation (imaginary or real), thus constituting a kind of social support.

There is a link between social relations and internal dialogicality, which to some extent reflects social bonds (Oleś & Puchalska-Wasył, 2012). Additionally, there is a positive correlation between internal dialogicality and the experience of uncertainty. Internal dilemmas and conflicts can be resolved and processed by means of internal dialogs (Puchalska-Wasył & Oleś, 2013).

Bruner identified narrative thinking as opposed to paradigmatic thinking (Oleś, 2011). The former uses the categories of desires, needs, and goals. It consists in interpreting a sequence of events and investing them with meanings. Paradigmatic thinking uses logical categories, with such cognitive operations as abstracting, categorizing, comparing, as well as seeking general laws and causes in order to minimize cognitive costs (Oleś, 2011).

It seems reasonable to investigate the relations between perceived support and internal dialogicality. I advanced the following research hypotheses:

H 1: Using imaginary dialogs is an effective form of coping with stressful situations.

H 2: Coping with a difficult situation by means of an internal dialog will be evaluated as a more effective form of coping than generating a list of possible solutions.

H 3: Conducting an internal dialog will contribute to reducing the level of anxiety.

I justify advancing the above hypotheses with the fact that the human being is capable of conducting internal dialogs and changing viewpoints, and with the fact that both an actually conducted dialog or an imaginary one lead to greater diversity in the perception of possible solutions and broaden the horizons of thinking. I postulate that using imaginary dialogs is an effective form of support in a difficult situation.

H 4: Perceived support is negatively related to self-esteem – perceived support will be higher in people with low self-esteem and lower in people with high self-esteem.

I justify advancing this hypothesis with the relations between self-esteem and changes in the evaluation of one's own thoughts and with the relations between self-concept certainty and the dynamic characteristics of change in self-related thoughts. What lends strength to this hypothesis is Borawski's research (as reported in Oleś, 2011) on the influence of dialogical thinking activation on situational self-esteem and emotions, showing that people who make use of dialogical thinking score higher on self-esteem and positive affect while scoring lower on negative affect in the case of a complex self-concept (as against network-like self-structure).

It was also checked whether and how perceived support was related to gender. Women use social support as a form of support in difficult situations more often than men; they are more open in revealing their problems externally as well as ready to share them with their environment and to use the help and support of others (Ostrowska, 1997). This prompts an additional hypothesis:

H 5: Men will rate the quality of the obtained dialogical support higher than women.

METHOD

The aim of the study was to check if using support in the form of imaginary dialog is an effective way of coping with a stressful situation compared to listing its possible solutions. The impact of internal dialogs on the level of perceived support was examined at a particular level of anxiety and self-esteem.

The study was carried out in an experimental design in which the way of coping with a stressful situation was the independent variable (manipulation): imaginary dialog vs. generating a list of possible solutions. The dependent variable was the quality of perceived support. The additional variables were self-esteem and state anxiety. Self-esteem was measured using Rosenberg's Self-Esteem Scale (SES; Rosenberg, 1965; Dzwonkowska, Lachowicz-Tabaczek, & Łaguna, 2008) as modified by Piotr K. Oleś and Dominik Borawski (cited in Oleś, 2011). The level of state anxiety was measured using the first part (X-1) of Spielberger's STAI questionnaire (1975; Wrześniewski & Sosnowski, 1996).

The experiment was an online survey carried out by means of LimeSurvey software. Participants were invited via Facebook as well as via the communication platforms of the University of Social Sciences and Humanities and the Polish-Japanese Institute of Information Technology. The study was carried out from November 2012 until January 2013. The participants were 73 individuals (51 women and 22 men) aged from 19 to 58 years ($M = 26.66$, $SD = 0.80$).

At the beginning, the respondents were asked about their sex and age. Next, they filled in the self-esteem and state anxiety scales. Then they proceeded to generate lists of supportive people whom they could rely on in difficult situations. These could be real people providing help directly during a meeting or a conversation ("Please make a list of people you can rely on in situations that are difficult for you. Help is provided to you directly – during a meeting or a conversation.") or ones that the participants were not directly in touch with but whose experience, advice, or thoughts constituted support in difficult situations. If they wished to, the participants could add themselves to the list. Next, the participants imagined any kind of stressful situation and described it in two sentences ("Please imagine a situation that is stressful for you and describe it below in two sentences"). The experimental group ($N = 36$) were asked to conduct an imaginary dialog with a selected person from the support list ("Now that you already have a specific issue in mind, conduct an imaginary dialog that could reduce your stress. Please select a person for the dialog" and "Conduct an imaginary dialog with the person selected. Please carry out this imaginary conversation and write it down as you do so. You do not have to pay special attention to

the form. What is important is that you follow your thoughts without modifying the utterances that arise spontaneously in your dialog.”). The control group ($N = 37$) generated a list of possible solutions to a difficult situation (“Now that you already have a specific issue in mind, think of possible ways to cope with it. Please list the possible solutions”). Participants were assigned to groups on a random basis. After the interventions, they rated the quality of the obtained support on an analogue scale (Funke & Reips, 2012). After the rating, they completed the questionnaire measuring state anxiety.

RESULTS

In order to check whether internal dialog is a form of coping with stress, I performed one-way analysis of variance. The analysis confirmed Hypotheses H 1 and H 2: imaginary dialog was rated as more effective ($M = 6.72$, $SD = 2.31$) than generating a list of possible solutions, ($M = 5.58$, $SD = 3.06$), $F(1, 71) = 4.02$, $p < .05$. The compared means are presented in Figure 1.

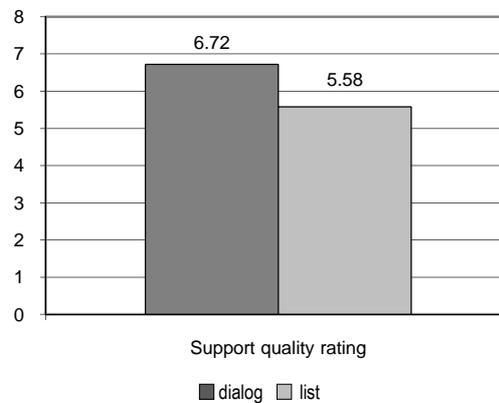


Figure 1. Mean received support quality ratings for the control group (the list) and the experimental group (dialog).

Hypothesis H 3, postulating a decrease in the anxiety level after the study, was not confirmed. The one-way analysis of variance with repeated measurement for the experimental group (conducting a dialog) revealed no differences between the levels of anxiety before ($M = 46.72$, $SD = 2.18$) and after ($M = 49.97$, $SD = 2.59$) the dialogical intervention, $F(1, 35) = 2.43$, $p > .05$.

In order to check how the level of self-esteem influences the evaluation of the quality of received support, I performed a one-way ANOVA. The results confirmed Hypothesis H 4: individuals with high self-esteem rated the quality of support lower ($M = 5.28$, $SD = 2.65$) than those with low self-esteem ($M = 6.86$, $SD = 2.65$), $F(1, 71) = 6.56$, $p < .05$. The compared means are presented in Figure 2.

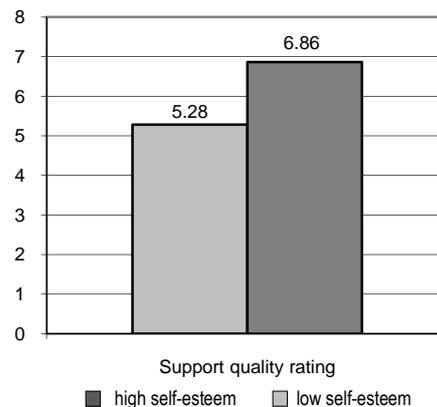


Figure 2. Mean received support quality ratings for people with low and high self-esteem.

In order to check which of the methods – dialog or a list of solutions – was rated higher in terms of support effectiveness, one-way analyses of variance were performed for individuals with high and low self-esteem, respectively. The analyses showed that individuals with high self-esteem rated the quality of support received as a result of dialog higher ($M = 6.10$, $SD = 2.32$) than the quality of support obtained through the list of possible solutions ($M = 4.25$, $SD = 2.745$), $F(1, 71) = 4.81$, $p < .05$.

ANOVA revealed no differences between genders in support quality rating, $F(1, 72) = 2.11$; $p > .05$. A statistically significant difference occurred only in the group of men, who rated the quality of support obtained as a result of dialog higher ($M = 8.00$, $SD = 2.17$) than the quality of support obtained through the list of possible solutions ($M = 5.50$, $SD = 3.50$). Hypothesis H 5 was not confirmed.

DISCUSSION

The results obtained in the study confirm that internal dialogs provide support and can serve as help in coping with stressful situations.

Received support rating differs depending on self-esteem: for people with high self-esteem, using support was a less attractive form of coping with stress than for people with low self-esteem. This is confirmed by research on internal dialogical activity, which correlates with low self-esteem and low self-worth (Oleś, 2010) as well as with shyness (Chmielnicka-Kuter, 2011).

Negative reaction to support is usually displayed by people treating it as a threat to their self-worth. Accepting help from others may cause a sense of inferiority or evoke a fear of entering into relationships involving dependence on others (Turska, 2008). Wills (1991) suggests, however, that supportive relations are helpful for people faced with a difficult situation, since they usually maintain a certain level of self-esteem.

What is interesting, individuals with high self-esteem from the experimental group – that is, those who engaged in dialogs – rated the quality of support higher than individuals from the control group. It is mainly close interpersonal relations, including those with internal interlocutors, that can perform this function – for example, by enabling an individual to speak and talk about his/her weaknesses or mistakes without being afraid of punishment or condemnation (Wills, 1991). This is because it is easier to reveal such things and thoughts to someone whom you trust and who accepts you – for instance, your “internal family” (I-positions). However, it is also worth bearing in mind one other context in which the concept of internal family systems functions: the clinical context. In this context, by no means all the “parts of the internal family” represent forces that are favorable to the individual, just like the figures found in actual (external) family systems sometimes include double-faced aunts, malicious cousins, or envious brothers (Schwartz, 2008).

The level of state anxiety after the study did not differ to a statistically significant extent from the anxiety level at the very beginning of the study. This argues for modifying the research method to measure anxiety in the crucial moments of the experiment – namely, after imagining a stressful situation and after the intervention (e.g., dialog).

Analyses showed that men engaging in a dialog rated the quality of support higher than men generating a list of solutions. The result was significant only in the group of men – as opposed to the group of women, where no differences were observed. Compared to women, men are oriented towards external rather than domestic or family goals (Ostrowska, 1997). Perhaps internal dialog as a way of coping with stress is more convenient and more consistent with the nature of men, who are more reluctant to reveal their problems than women and use the help of others to a smaller degree.

The participants imagined any stressful situation that came to their mind. The findings of research on temporal dialogs (Oleś, Brygoła, & Sibińska, 2010) showed that confrontation with inner voices representing the past and the present has a positive impact on well-being and meaning in life. Drawing on Markus and Nurius (1986), one may say that the future self is closer to the possible self – more flexible, more filled with hopes and fears, as well as more creative and ingenious. The future self brings back memories of important life events and reevaluates their influence on the present and the future.

In order to check whether a similar effect of positive influence on the evaluation of the quality of life occurs for coping with a difficult situation in different temporal conditions, I plan to expand the experiment by adding an independent variable that will be a method of activating memories concerning problem situations differing in terms of the time when the stressful situation occurs (the past, the present, or the future).

REFERENCES

- Baltes, P., & Staudinger, U. (1996). Interactive minds: A facilitative setting for wisdom-related performance. *Journal of Personality and Social Psychology*, 71(4), 746-762.
- Chmielnicka-Kuter, E. (2011). Wewnętrzna aktywność dialogowa osób nieśmiałych. In E. Dryll & A. Cierpka (Eds.), *Psychologia narracyjna. Tożsamość, dialogowość, pogranicza* (pp. 99-107). Warsaw: ENETEIA Wydawnictwo Psychologii i Kultury.
- Dzwonkowska, I., Lachowicz-Tabaczek, K., & Łaguna, M. (2008). *Samoocena i jej pomiar. Skala samooceny SES M. Rosenberga*. Warsaw: Psychological Test Laboratory of the Polish Psychological Association.
- Funke, F., & Reips, U. D. (2012). Why semantic differentials in Web-based research should be made from visual analogue scales and not from 5-point scales. *Field Methods*, 24, 310-327.
- Hermans, H. J. M., Kempen, H. J. G., & Van Loon, R. J. P. (1992). The dialogical self: Beyond individualism and rationalism. *American Psychologist*, 47, 23-33.
- Markus, H. R., & Nurius, P. (1986). Possible selves. *American Psychologist*, 41, 954-969.
- Oleś, P., Brygoła, E., & Sibińska, M. (2010). Temporal dialogues and their influence on affective states and the meaning of life. *International Journal for Dialogical Science*, 4, 23-43.
- Oleś, P. K. (Ed.) (2011). *Dialog z samym sobą*. Warsaw: Wydawnictwo Naukowe PWN.
- Oleś, P., & Puchalska-Wasył, M. (2012). Dialogicality and personality traits. In T. Hermans & T. Gieser (Eds.), *Handbook of dialogical self theory* (pp. 241-252). New York: Cambridge University Press.
- Ostrowska, A. (1997). Prozdrowotne style życia. *Promocja Zdrowia, Nauki Społeczne i Medycyna*, 10-11, 7-25.
- Puchalska-Wasył M. (2006). *Nasze wewnętrzne dialogi: O dialogowości jako sposobie funkcjonowania człowieka*. Wrocław: Wydawnictwo Uniwersytetu Wrocławskiego.
- Puchalska-Wasył, M., & Oleś, P. (2013). Doubtfulness – A dialogical perspective. *Psychology of Language and Communication*, 17(2), 101-113.

- Prati, G., & Pietrantonio, L. (2010). The relation of perceived and received social support to mental health among first responders: A meta-analytic review. *Journal of Community Psychology*, 38(3), 403-417.
- Rosenberg, M. (1965). *Society and adolescent self-image*. Princeton, NJ: Princeton University Press.
- Sęk, H., & Cieślak, R. (Eds.) (2011). *Wsparcie społeczne, stres, zdrowie*. Warsaw: Wydawnictwo Naukowe PWN.
- Schwartz, R. C. (2008). Model systemu rodziny wewnętrznej. In J. Rowan & M. Cooper (Eds.), *Jekyll i Hyde. Wielorakie Ja we współczesnym świecie* (pp. 243-257). Gdańsk: Gdańskie Wydawnictwo Psychologiczne.
- Spielberger, C. D. (1975). The measurement of state and trait anxiety: Conceptual and methodological issues. In L. Levi (Ed.) *Emotions – Their parameters and measurement* (pp. 713-725). New York: Razaen Press.
- Turska, E. (2008). Rola wsparcia społecznego w sytuacji długotrwałego bezrobocia. In Z. Ratajczak (Ed.), *Przedsiębiorczość społeczna a walka z bezrobociem. Problemy społeczne*. Warsaw: Wydawnictwo Akademickie Żak.
- Wills, T. A. (1991). Social support and interpersonal relationship. In M. S. Clark (Ed.), *Prosocial behavior: Review of personality and social psychology*, 12 (pp. 265-289). Newbury Park, California: Sage Publications.
- Wrześniewski, K., & Sosnowski, T. (1996). *Inwentarz Stanu i Cechy Lęku (ISCL). Polska adaptacja STAI. Podręcznik*. Warsaw: Psychological Test Laboratory of the Polish Psychological Association.