



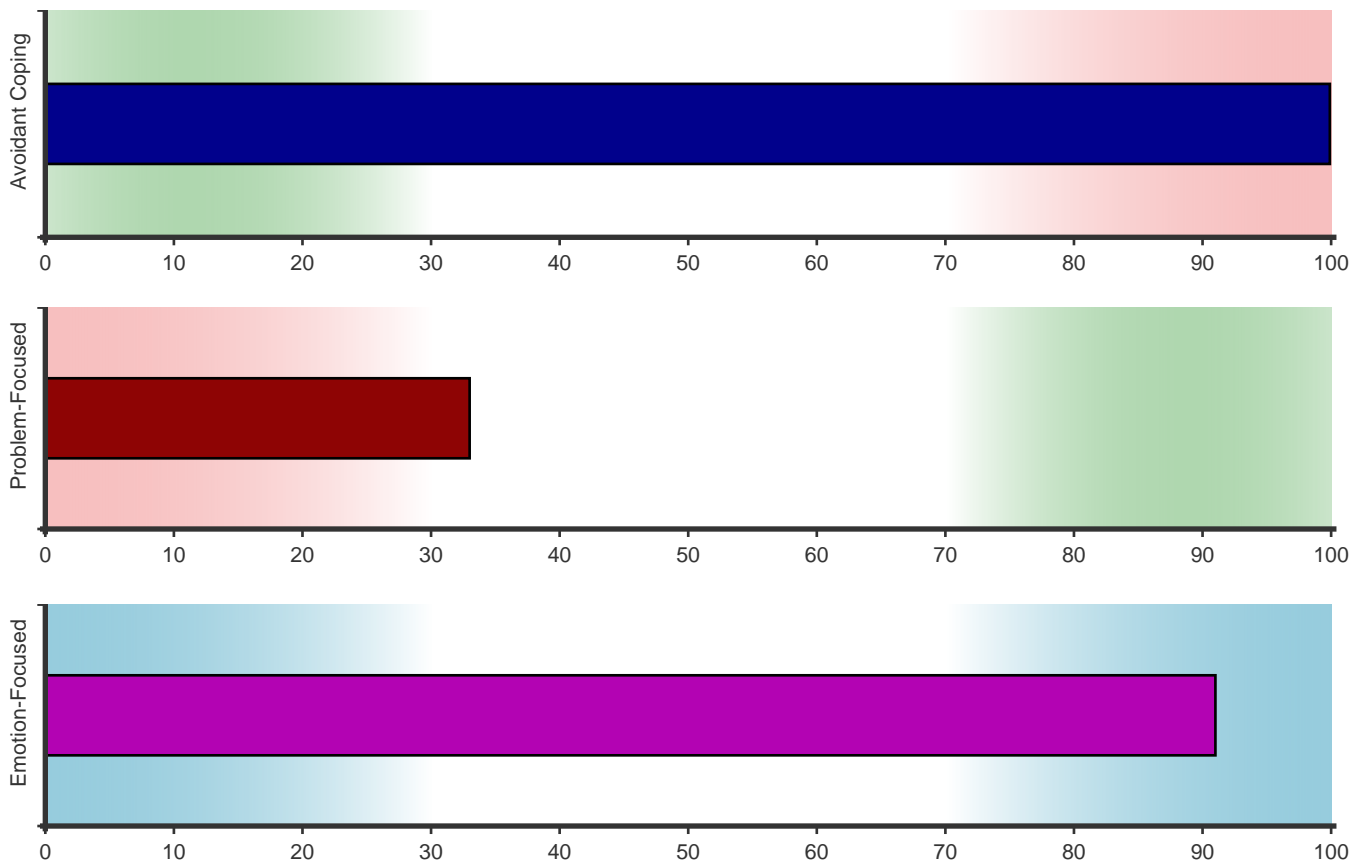
Brief - Coping Orientation to Problems Experienced Inventory (Brief-COPE)

<i>Client Name</i>	New Client	<i>Date administered</i>	5 Nov 2025
<i>Date of birth (age)</i>	1 Jan 1990 (35)	<i>Time taken</i>	31s
<i>Assessor</i>	Dr Emerson Bartholomew		

Results

	Average Score (1 to 4)	Normative Percentile	Clinical Percentile
Avoidant Coping	3.63	99.9	99.9
Problem-Focused	2.38	45	33
Emotion-Focused	2.92	92	91

Brief-COPE Clinical Percentiles



Avoidant

	Average Score (1 to 4)	Clinical Percentile
Self-distraction	4	99
Substance Use	4	99
Denial	3.5	95
Behavioural disengagement	3	87.5



Client Name | New Client

Problem Focussed

	Average Score (1 to 4)	Clinical Percentile
Active coping	1.5	1
Use of informational support	3.5	82.5
Positive reframing	1.5	17.5
Planning	3	52.5

Emotion Focussed

	Average Score (1 to 4)	Clinical Percentile
Emotional Support	1	1
Venting	3	80
Humour	3.5	90
Acceptance	4	99
Self-blame	3	60
Religion	3	85

Interpretation

The Brief Coping Orientation to Problems Experienced Inventory (Brief-COPE) was administered on 1st December 2025.

Problem-Focused Coping

The client obtained an average score of 2.38 for Problem-Focused Coping, which falls at the 45th percentile compared to non-clinical individuals and the 33th percentile compared to individuals receiving mental health treatment.

The client's responses indicate some capacity to engage with stressors through practical action. They appear to show variable use of planning, information-seeking, and cognitive reframing, at times taking steps to address problems directly or seeking advice, though perhaps not consistently. This may suggest an existing foundation of problem-solving skills, though the extent to which these are applied across different contexts would benefit from further exploration.

Emotion-Focused Coping

The client obtained an average score of 2.92 for Emotion-Focused Coping, which falls at the 92th percentile compared to non-clinical individuals and the 91th percentile compared to individuals receiving mental health treatment.

The client's responses suggest frequent engagement with strategies aimed at managing the emotional impact of stressors. They report regular use of approaches such as seeking emotional support, expressing feelings, or using acceptance and humour to regulate distress. The adaptiveness of this pattern depends significantly on which specific strategies are employed and the context, therefore it is recommended to examine responses at a facet and item level. Facets with the highest ratings include: Acceptance, Humour, and Religion.



Client Name	New Client
--------------------	------------

Items rated as used 'a lot' include:

- 20. I've been accepting the reality of the fact that it has happened. (*I've been doing this a lot*)
- 24. I've been learning to live with it. (*I've been doing this a lot*)
- 28. I've been making fun of the situation. (*I've been doing this a lot*)

Avoidant Coping

The client obtained an average score of 3.63 for Avoidant Coping, which falls at the 99.9th percentile compared to non-clinical individuals and the 99.9th percentile compared to individuals receiving mental health treatment.

The client's responses suggest substantial reliance on avoidance when facing stressors. They report frequent use of strategies such as distraction, denial, or behavioural disengagement to create distance from difficulties. This pattern is typically associated with poorer psychological outcomes, as avoidance tends to prevent direct engagement with problems and may perpetuate or exacerbate difficulties over time. Understanding what drives this avoidance, whether feeling overwhelmed, lacking confidence in problem-solving, or other factors, would be valuable to explore clinically. Facets with the highest ratings include: Self-distraction, Substance use, and Denial.

Items with the highest scores include:

- 1. I've been turning to work or other activities to take my mind off things. (*I've been doing this a lot*)
- 3. I've been saying to myself "this isn't real". (*I've been doing this a lot*)
- 4. I've been using alcohol or other drugs to make myself feel better. (*I've been doing this a lot*)

Substance Use Flag

Regarding facet-level results, scores indicate reliance on substance use as a coping strategy. The client reports using alcohol or other drugs to feel better or to help get through stressful situations. Substance use as a coping mechanism represents a significant clinical concern, as it may provide temporary relief whilst potentially creating additional problems, interfering with more adaptive coping, and carrying risks for dependence. This pattern warrants further assessment and therapeutic attention.

Scoring and Interpretation Information

Scores are presented for three overarching coping styles as average scores (sum of item scores divided by number of items), indicating the degree to which the respondent has been engaging in that coping style.

- 1 = I haven't been doing this at all
- 2 = A little bit
- 3 = A medium amount
- 4 = I've been doing this a lot

A normative percentile is presented based on data from a non-clinical sample of athletes (Poulus et al., 2020). Interpretation by way of normative percentile helps contextualise results in comparison to typical responses of regular individuals.



Client Name | New Client

In addition, a clinical percentile is presented which compares responses to clients receiving outpatient mental health services. A percentile of 50, for example, represents an average score for a client in psychological therapy, whereas a percentile of 90 indicates that the respondents scored higher than 90 percent of other individuals in treatment.

During interpretation it is most helpful to look at the pattern of responding across the three subscales. Consistently low scores on all subscales may indicate either:

- (A) the respondent does not feel they have many stressors to cope with. For example, that life is stress free.
- (B) a lack of reflective capacity or resistance to disclose personal information.
- (C) the respondent does not have many coping skills.

The three overarching coping styles are outlined below.

- Problem-Focused Coping (Items 2, 7, 10, 12, 14, 17, 23, 25)

Characterised by the facets of active coping, use of informational support, planning, and positive reframing. A high score indicates coping strategies that are aimed at changing the stressful situation. High scores are indicative of psychological strength, grit, a practical approach to problem solving and is predictive of positive outcomes.

- Emotion-Focused Coping (Items 5, 9, 13, 15, 18, 20, 21, 22, 24, 26, 27, 28)

Characterised by the facets of venting, use of emotional support, humour, acceptance, self-blame, and religion. A high score indicates coping strategies that are aiming to regulate emotions associated with the stressful situation. High or low scores are not uniformly associated with psychological health or ill health, but can be used to inform a wider formulation of the respondent's coping styles.

- Avoidant Coping (Items 1, 3, 4, 6, 8, 11, 16, 19)

Characterised by the facets of self-distraction, denial, substance use, and behavioural disengagement. A high score indicate physical or cognitive efforts to disengage from the stressor. Low scores are typically indicative of adaptive coping.

In addition to the three overarching subscales, scores are presented for the below 14 facets. Individual examination of the questions can pinpoint adaptive or maladaptive styles of coping and be useful for eliciting a discussion with the respondent.

Scores are also presented for each of the following facets:

- Active coping, items 2 & 7 (Problem-Focused)
- Use of informational support, items 10 & 23 (Problem-Focussed)
- Positive reframing, items 12 & 17 (Problem-Focused)
- Planning, items 14 & 25 (Problem-Focused)
- Emotional support, items 5 & 15 (Emotion-Focused)
- Venting, items 9 & 21 (Emotion-Focused)
- Humor, items 18 & 28 (Emotion-Focused)
- Acceptance, items 20 & 24 (Emotion-Focused)
- Religion, items 22 & 27 (Emotion-Focused)
- Self-blame, items 13 & 26 (Emotion-Focused)
- Self-distraction, items 1 & 19 (Avoidant)
- Denial, items 3 & 8 (Avoidant)



Client Name	New Client
--------------------	------------

	<ul style="list-style-type: none"> - Substance use, items 4 & 11 (Avoidant) - Behavioral disengagement, items 6 & 16 (Avoidant) <p>If the scale is administered more than once results will be graphed over time, indicating the degree to which coping strategies have changed.</p>
--	--

Client Responses

		I haven't been doing this at all	A little bit	A medium amount	I've been doing this a lot
1	I've been turning to work or other activities to take my mind off things.	1	2	3	4
2	I've been concentrating my efforts on doing something about the situation I'm in.	1	2	3	4
3	I've been saying to myself "this isn't real".	1	2	3	4
4	I've been using alcohol or other drugs to make myself feel better	1	2	3	4
5	I've been getting emotional support from others.	1	2	3	4
6	I've been giving up trying to deal with it.	1	2	3	4
7	I've been taking action to try to make the situation better.	1	2	3	4
8	I've been refusing to believe that it has happened.	1	2	3	4
9	I've been saying things to let my unpleasant feelings escape.	1	2	3	4
10	I've been getting help and advice from other people.	1	2	3	4
11	I've been using alcohol or other drugs to help me get through it.	1	2	3	4
12	I've been trying to see it in a different light, to make it seem more positive.	1	2	3	4
13	I've been criticizing myself.	1	2	3	4
14	I've been trying to come up with a strategy about what to do.	1	2	3	4
15	I've been getting comfort and understanding from someone.	1	2	3	4



Client Name | New Client

Client Responses (cont.)

		I haven't been doing this at all	A little bit	A medium amount	I've been doing this a lot
16	I've been giving up the attempt to cope.	1	2	3	4
17	I've been looking for something good in what is happening.	1	2	3	4
18	I've been making jokes about it.	1	2	3	4
19	I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.	1	2	3	4
20	I've been accepting the reality of the fact that it has happened.	1	2	3	4
21	I've been expressing my negative feelings.	1	2	3	4
22	I've been trying to find comfort in my religion or spiritual beliefs.	1	2	3	4
23	I've been trying to get advice or help from other people about what to do.	1	2	3	4
24	I've been learning to live with it.	1	2	3	4
25	I've been thinking hard about what steps to take.	1	2	3	4
26	I've been blaming myself for things that happened	1	2	3	4
27	I've been praying or meditating	1	2	3	4
28	I've been making fun of the situation.	1	2	3	4