

**A Study to Assess Coping Strategies adopted by Adolescents studying in selected
Schools of Distt. Mohali, Punjab.**

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ABSTRACT

The study was conducted by researcher on Coping strategies adopted among adolescents in selected Schools, Distt. Mohali, Punjab. The main aim of this study was to assess on Coping strategies adopted among adolescents, to find out the association between coping strategies adopted among adolescents with their selected socio demographic variables. Descriptive Research design has been used to assess the Coping strategies among 400 adolescents studying in Golden Bell's school ,Sector-77 and Shemrock School, sector 69, in Distt Mohali,Punjab. The sample was selected by Systematic random sampling technique. Pilot study was conducted on 10% of population and sample consists of 40 adolescents. Data on Coping Strategies adopted among adolescents were collected under two sections, Section A- Socio demographic variables and Section B- Coping Strategies Scale of Prof. A.K. Srivastava to assess coping strategies adopted among adolescents. Data was analyzed through Descriptive and inferential statistical methods.

The results showed that majority of adolescents were adopting moderate Coping Strategies. There was significant association between Coping Strategies adopted by adolescents with their selected demographic variable such as Class of study, Occupational Status of Mother and Monthly Family Income. Based on the findings of the study, recommendations were drawn on nursing service, nursing education, nursing administration and nursing research.

Key words: Coping strategies , Adolescents, Descriptive study.

INTRODUCTION

Adolescence is a transitional phase of growth and development between childhood and adulthood. (WHO) defines an adolescent as any person between ages 10 and 19 years. The early teen years are marked by rapid changes like physical, cognitive, and emotional.¹ Young people also face changing relationships with peers, new demands at school, family tensions, and safety issues in their communities. The ways in which teens cope with these stressors can have significant short- and long-term consequences on their physical and emotional health. Difficulties in handling stress can lead to mental health problems, such as depression and anxiety disorders.²

Coping strategies during adolescence is a thoroughly documented phenomenon, and there is a growing understanding of its relationship with adolescent mental health and illnesses. Coping strategies are mediators of stress that may aid or inhibit adolescent adaptation. Some coping strategies are not as helpful as others. For example, negative coping responses (Criticizing yourself, chewing your fingernails, becoming aggressive, eating disturbances, smoking or chewing tobacco, drinking alcohol, yelling at others, taking a recreational drug, or misusing prescription medicine, avoiding friends and family) often make stress worse, because they wear down over time or are temporary distractions. On the other hand, positive coping responses keep in the present moment and give chances to actively work toward solving problems (listening to music, playing with a pet, laughing or crying, going out with a friend, taking shower, doing other creative activities, praying or going to religious places, exercising, discussing situations, gardening, practicing deep breathing, meditation. Not all positive coping responses will work for every person.³

Studies linking perceived stress and coping behaviors to mental health outcomes have found that these variables reciprocally influence each other. Perceived stress is both a predictor and an outcome of depression and anger, coping strategies employed to deal with stress (Galaif et al., 2003). As perceived stress is linked to such negative outcomes as substance abuse and psychopathology (Schmeelk-Cone & Zimmerman, 2003), coping strategies that serve to increase perceived stress may place adolescents at increased risk for experiencing mental health problems.⁴ So, it is very necessary to involve caregivers of adolescents to identify stress level, aggressive tendency and help them to cope up constructively in order to prevent prevalent mental disorders in adulthood.

OBJECTIVES OF THE STUDY

To assess the Coping Strategies adopted by Adolescents studying in selected Schools of Distt. Mohali, Punjab.

MATERIALS & METHODS

A Quantitative research approach was adopted to accomplish the objectives of the study. The research design selected for this study was Descriptive Research design to achieve the objectives of the study. The study was conducted among 400 adolescents studying in Golden Bells Public School, Sector-77 and Shemrock School, sector 69, in Distt Mohali, Punjab selected by systematic random sampling technique. The target population of this study consists of adolescents studying in 7th, 8th, 9th, 10th, 11th and 12th standard of selected schools of Distt Mohali, Punjab.

CRITERIA FOR SAMPLE SELECTION

Adolescents who were:

- Available at the time of data collection.
- Willing to participate
- Age between 12-18 years.

DESCRIPTION OF THE TOOL

Self administered tool consists of two parts :-

Section A: Demographic variables: This section consists of demographic variables to collect personal information of adolescents such as Age, Gender, Class of study, Religion, Type of family, Place of residence, Educational status of father, Educational status of mother, Occupational status of father, Occupational status of mother, Monthly family income .

Section B: Coping Strategies Scale by Prof. A.K. Srivastava. It contains 50 items to be rated on five point scale. Each item has five responses.

DATA COLLECTION PROCEDURE

Data was collected in selected schools of Distt. Mohali, Punjab in the year 2018. Written permission was taken from Principals of selected schools before data collection. Researcher arranged the class rooms for administering the tool. Verbal consent was taken from adolescents after providing information about the purpose of study. Rapport was developed with the

adolescents before data collection. Tool was administered to collect data. At the end, researcher showed gratitude to adolescents for their cooperation. Data was collected, compiled and analysed.

RESULT

Sample characteristics

Majority of adolescents between the age group of 13-14 years were 37%, 52% adolescents were male, 24% adolescents were studying in 11th standard, 22% were studying in 10th standard, 49% adolescents were Hindu followed by 34% were Sikh, 10% were Muslim, 8% belongs to Christian religion. 64% belongs to Nuclear family, 81% of adolescents belong to Urban area , about father's qualification, 51% were graduate and 63% mothers were graduate, regarding father's occupation, 49% were private. About mother's occupation, 41% were housewife ,40% of adolescents were with family income between 20001-30000Rs. followed by 36% between 10001-20000 Rs. 24% were having more than 30000Rs whereas no one had income less than 10000Rs.

Findings related to Coping Strategies adopted by adolescents.

Table no. 1: Descriptive statistics of Coping Strategies adopted among adolescents.

Descriptive Statistics	Behavioral - Approach	Cognitive - Approach	Cognitive - Behavioral - Approach	Behavioral - Avoidance -Approach	Cognitive - Avoidance Approach	Overall Coping Score
Mean	38.67	14.81	19.81	34.55	17.10	124.94
S.D.	8.112	4.033	5.409	8.336	4.677	16.834
Median	39	16	20	36	18	125
Maximum	58	22	32	54	26	174
Minimum	19	5	8	18	7	71
Range	39	17	24	36	19	103
Mean Percentage%	64.45	61.72	61.91	61.70	61.05	62.47

Table no. 1 depicts that the descriptive statistics of Coping Strategies adopted among adolescents. Regarding Behavioral -Approach Coping Strategies, mean score was 38.67, standard deviation was 8.112, range was 39 and mean percentage 64.45. Regarding Cognitive -Approach Strategies, mean score was 14.81, standard deviation was 4.033, range was 17 and

mean percentage 61.72. Regarding Cognitive Behavioral -Approach Coping Strategies, mean score was 19.81, standard deviation was 5.409, range was 24 and mean percentage 61.91. Regarding Behavioral –Avoidance Approach Coping Strategies, mean score was 34.55, standard deviation was 8.336, range was 36 and mean percentage 61.70. Regarding Cognitive -Avoidance Approach Behavioral –Avoidance Approach Coping Strategies, mean score was 17.10, standard deviation was 4.677. Range was 19 and mean percentage 61.05.

Percentage distribution of overall Coping Strategies adopted by adolescents.

Figure no. 1 Depicts that the overall Coping Strategies adopted by adolescents. Majority of adolescents 89% were adopting moderate overall Coping Strategies followed by 7 % were adopting high whereas only 4 % were adopting low overall Coping Strategies.

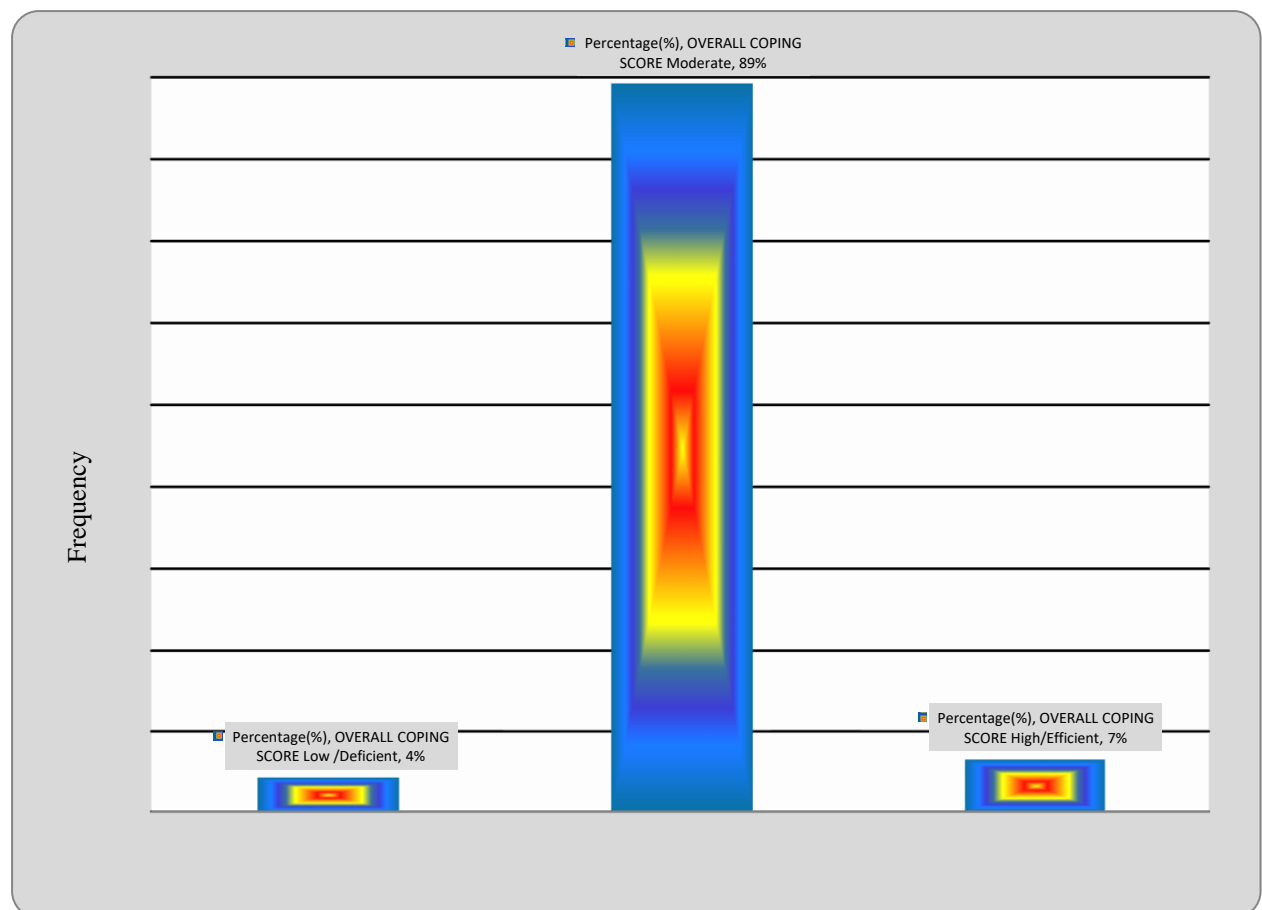


Figure No. 1: Percentage distribution of Overall Coping Strategies adopted by adolescents.

Findings related to Association between Coping Strategies adopted by adolescents with Selected Socio- demographic variables.

Table no. 2 Association between Coping Strategies adopted by adolescents with Selected Socio- demographic variables. N=400

Demographic Variables		Levels			Association with Coping Strategies				
		Low /Deficient	Moderate	High/ Efficient	Chi Test	P Value	df	Table Value	Result
Age	13-14	6	126	16	7.232	0.124	4	9.488	*NS
	15-16	6	130	6					
	17-18	5	101	4					
Gender	Male	17	187	4	29.679	0.000	2	5.991	*S
	Female	0	170	22					
Class Of Study	8th	5	64	7	17.496	0.025	8	15.507	*S
	9th	1	62	9					
	10th	4	78	5					
	11th	7	86	1					
	12th	0	67	4					
Religion	Hindu	7	177	10	5.876	0.437	6	12.592	*NS
	Muslim	2	33	5					
	Sikh	7	120	7					
	Christian	1	27	4					
	Others	0	0	0					
Type Of Family	Nuclear	11	225	18	0.520	0.971	4	9.488	*NS
	Joint	5	116	7					
	Extended	1	16	1					
Place Of Residence	Urban	12	289	21	4.291	0.368	4	9.488	*NS
	Rural	2	10	1					
	Semi urban	3	58	4					
Educational Status Of Father	Illiterate	0	0	0	1.255	0.869	4	9.488	*NS
	Undergraduate	1	18	1					
	Graduate	10	177	15					

	Post Graduate or above	6	162	10					
Educational Status Of Mother	Illiterate	0	0	0	5.794	0.215	4	9.488	*NS
	Undergraduate	2	33	2					
	Graduate	8	223	21					
	Post Graduate or above	7	101	3					
Occupational Status Of Father	Private	11	176	10	5.034	0.284	4	9.488	*NS
	Government	5	95	7					
	Self Employed	1	86	9					
	Unemployed	0	0	0					
	Any Other	0	0	0					
Occupational Status Of Mother	Private	9	99	7	12.961	0.044	6	12.592	*S
	Government	5	44	3					
	Self Employed	0	65	4					
	Unemployed	0	0	0					
	Any Other	3	149	12					
Monthly Family Income	Up to 10,000	0	0	0	9.549	0.049	4	9.488	*S
	10,001 – 20,000	3	136	7					
	20,001-30,000	6	138	15					
	More than 30,001	8	83	4					

***S- Significant**

***NS- Not Significant**

Table no. 2 shows association between Coping Strategies adopted by adolescents with their selected demographic variables. There was significant association between Gender, Class of study, Occupational Status of Mother and Monthly Family Income at 0.05% level of significance. However, there was no significant association between other variables such Age ,Religion, Type of family, Place of residence, Educational status of father, Educational status of mother and Occupational status of father at 0.05% level of significance.

DISCUSSION

Assess the Coping Strategies adopted among adolescents.

The present study showed that Majority of adolescents 89% were adopting moderate overall Coping Strategies followed by 7 % were adopting high whereas only 4 % were adopting low

overall Coping Strategies. These findings are supported by a study conducted by **Hafsa Raheel (2014)** to find out the coping strategies survey among 1028 adolescent girls ages 15 – 19 years studying in secondary schools in Riyadh city, Kingdom of Saudi Arabia. The results showed that 25% cry, 19% listen to music, 15% start eating a lot, 12% sit alone/isolate themselves, 11% pray/read the Quran, 10% get into a verbal argument or a fight. Only a few, 3% exercise, and 2% stated that they find someone to discuss and talk to. Majority of the adolescent girls in survey, rely on emotion related coping mechanisms rather than problem solving mechanisms.

Find out the association between coping strategies adopted by adolescents with their selected Socio-Demographic Variables.

The present study showed that there was significant association between Coping Strategies adopted by adolescents with their selected demographic variable such as Class of study, Occupational Status of Mother and Monthly Family Income whereas there was no significant association with other demographic variables. The findings of a study conducted by **Chandrashekhar T et al(2007)** to assess the prevalence of psychological morbidity, sources and severity of stress and coping strategies among undergraduate students of Manipal College of Medical Sciences, Pokhara. The psychological morbidity was assessed using General Health Questionnaire, 24-item questionnaire was used to assess sources of stress and their severity and coping strategies adopted was assessed using brief COPE inventory. The results revealed that overall prevalence of psychological morbidity was 20.9% and the most important and severe sources of stress were staying in hostel, high parental expectations, vastness of syllabus, tests/exams, lack of time and facilities for entertainment. The coping strategies commonly used by students in our institution were positive reframing, planning, acceptance, active coping, self-distraction and emotional support. The coping strategies showed variation by year of study, gender and parents' occupation.

CONCLUSION

Among 400 adolescents, Coping Strategies, 89% adolescents were adopting moderate Coping Strategies followed by adoption of high (7%) coping strategies and then low (4%) Coping Strategies. There was massive affiliation among Level of Stress with their demographic variables such as Gender of adolescents. There was significant association between Aggressive Behavior among adolescents with their demographic variables such as Age, Class of study and Occupational Status of Mother. There was significant association between Coping Strategies

adopted by adolescents with their selected demographic variable such as Class of study, Occupational Status of Mother and Monthly Family Income.

NURSING IMPLICATIONS

The findings of the study have numerous implications, which can be discussed in four areas:

1. NURSING EDUCATION

As Stress and Aggressive behavior have serious impact on every aspect of adolescent's life. It is important to educate stress and aggression management among adolescents. Nurse educator should strongly emphasize on this topic and create awareness regarding coping strategies for stress and aggressive behaviour which provide guidance to adolescents for future life.

2. NURSING ADMINISTRATION

Nurse administrator can utilize the outcomes of the research and guidelines for imparting the information regarding stress and aggressive behavior among adolescents to develop coping strategies among them.

3. NURSING SERVICE

Nursing professionals should render services according to the changing needs of the society. There is need for the health personals to take active part in providing health education to people regarding stress and aggression management among adolescents. School health nurse should organize and conduct teaching programme for the teachers and parents regarding stress, aggressive behavior, its effects and coping techniques amongst adolescents.

RECOMMENDATIONS

Based on the outcomes of research study following recommendations were made:

- The study can be replicated on the large sample to validate and generalize its findings
- Similar study can be carried out to compare the extent of stress, aggressive behaviour and coping strategies adopted by teens of Govt. and private schools.
- A Comparative study can be performed to evaluate the level of stress, aggressive behaviour and coping strategies followed among youngsters between rural and urban region.

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Conflict of Interest : None

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Ethical Approval : Ethical clearance was obtained from concerned authorities before conducting research studies.

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