Research Paper

A Study on Mood and Coping Strategies Among College and University Students

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ABSTRACT

This study utilized the Coping Mechanism measure and the Trait Meta Mood Scale to measure various aspects of mood and coping mechanisms. Participants were recruited through a non-probability convenient sampling method and were asked to complete the questionnaires online. The study aimed to test the correlation between coping mechanisms and mood using the Pearson r correlation test. Results showed significant correlations between mood scores and emotions focused and problem-focused coping mechanisms. Avoidance coping was significantly correlated with Attention to feeling, and Problem focused coping was significantly correlated with repair of mood. These findings are consistent with previous literature. Future studies may benefit from collecting samples from distressed induced events and controlling for variables such as socio-economic status, age, and employment status.

Keywords: *Mood, Coping Strategies, Problem Focused Coping, Emotion-Focused, Correlation*

Moods are emotional states that are constant and not specifically directed towards something, while emotions are concentrated, phase emotional occurrences. The regulation of moods is crucial for subjective well-being, and a balanced pattern of mood regulation techniques appears to be essential. The text also mentions the dual process theory, which suggests that automatic and controlled mood regulation strategies are not mutually exclusive categories but instead have permeable borders and a vast number of connections. When researching mood regulation, obtaining an accurate measure of mood changes is a crucial methodological problem. Using both direct and indirect mood measures at the same time would allow for a more accurate analysis of automatic and controlled mood shifts. The relationship between personality traits and mood, as well as the effects of mood on cognitive processes. The Big Five personality traits, extraversion and neuroticism, are found to be the best predictors of transient emotions. Neuroticism is associated with negative affect and less positive affect variance, while extraversion is linked to positive affect and more positive affect variance. The study also looks at how different personality traits affect processes that cause mood changes, such as cognitive engagement, rumination, and affect repair. The passage also discusses how mood affects cognitive processes such as memory and attention. Increases in the quantity and variety of knowledge that can be stored in memory are related to mood. The lens through which individuals process information broadens as their

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moods improve, and this affects their sensitivity to relationships among distantly related material in memory and the breadth of attention they use when processing the outside world. The passage also highlights how the scope of information processing may influence mood and how this idea is evident in clinical results.

The act of coping involves constantly shifting cognitive and behavioral efforts to manage specific internal or external demands that are deemed exhausting or beyond an individual's resources. Coping is influenced by various physiological, psychological, social, and cultural factors. Coping involves both normative and personal variations, and adaptation is a process that matures with time. Coping mechanisms and the resources used to support them go through significant changes over the course of a person's lifetime. Coping has been examined from various theoretical perspectives, and scholars believe that it plays a significant role in long-term mental and physical health and wellbeing.

Theories of coping categorize coping techniques into subtypes, such as problem-focused and emotion-focused coping. Some critics argue that these subtypes are too broad and that some coping techniques can serve both functions. Another categorization of coping is approach coping, which involves taking action against a threat, and avoidance coping, which involves avoiding the threat. However, the efficiency of avoidance coping techniques can vary. The Responses to Stress model distinguishes between voluntary coping and involuntary coping, engaged and disengaged coping, and primary and secondary control coping. Coping research has shifted away from mutually exclusive coping subtypes and towards the idea of coping as a diverse and flexible process that adapts to the demands of the circumstance. The coping process approach suggests that coping mechanisms are influenced by both external demands and personal traits like values and beliefs. Coping mechanisms can change over time and can either be reactive or proactive. There are five main categories of coping mechanisms, namely problem-focused coping, emotion-focused coping, social support coping, religious coping, and meaning-making coping. Problem-focused coping involves actions like information-seeking and direct problem-solving, while emotion-focused coping involves controlling one's emotional reaction to a situation. Social support coping requires seeking practical and emotional help from others, while religious coping involves maintaining or changing meaning in the face of hardship. Lastly, meaning-making coping involves trying to find the good or important aspects of a stressful or traumatic experience. The success of these coping mechanisms is dependent on various factors and can result in either positive or negative outcomes.

Need and Significance
The need of the study is to assess the mood and coping strategies of young adults and university students in order to gain a better understanding of their overall mood and coping mechanisms. The study aims to identify the level of mood and coping strategies on an individual level within this specific population. Through the use of a correlation design, the study will explore the relationship between various variables related to mood and coping strategies using statistical analyses. This is a quantitative study that will emphasize the statistical analysis of data collected through standardized questionnaires. Ultimately, the purpose of the study is to contribute to the existing body of knowledge on the topic and potentially inform interventions or strategies that could improve the mental health and well-being of young adults and university students.

METHODOLOGY

Statement of Problem

Managing emotions and coping with negative moods is crucial for the mental well-being of college students, but there are several gaps in research on this topic. Previous studies have not focused on the coping strategies that college students use, and it is important to explore how demographic and cultural factors such as gender, age, and culture impact the relationship between mood and coping strategies (Kuo & Ho, 2019). Conducting longitudinal studies could provide insights into how coping strategies evolve over time to improve the mental health of college students, additional research is needed to create effective interventions that address these research gaps (Skorikov & Vondracek, 2018). To assess the mood and coping strategies among young adults so as to understand their psychological factors when it comes to academics which would further facilities in construction of intervention techniques.

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Research Objectives

To measure if there is a significant relationship between attention of feeling and problem focused coping,

1. To measure if there is a significant relationship between attention of feeling and emotional focused coping.
2. To measure if there is a significant relationship between attention of feeling and avoidant coping.
3. To measure if there is a significant relationship between clarity of feeling and problem focused coping.
4. To measure if there is a significant relationship between clarity of feeling and emotional focused coping.
5. To measure if there is a significant relationship between clarity of feeling and avoidant coping.
6. To measure if there is significant relationship between repair of mood and problem focused coping.
7. To measure if there is significant relationship between repair of mood and emotional focused coping.
8. To measure if there is significant relationship between repair of mood and avoidant coping.

Hypotheses

- H_{o1} : there is no significant relationship between attention to feeling and problem focused coping
- H_{o2} : there is no significant relationship between attention to feeling and emotional focused   coping
- H_{o3} : there is no significant relationship between attention to feeling and avoidant coping
- H_{o4} : there is no significant relationship between clarity of feeling and problem focused coping
- H_{o5} : there is no significant relationship between clarity of feeling and emotional focused coping
- H_{o6} : there is no significant relationship between clarity of feeling and avoidant coping

- H_{o7} : there is no significant relationship between repair of mood and problem focused coping
- H_{o8} : there is no significant relationship between repair of mood and emotional focused coping
- H_{o9} : there is no is significant relationship between repair of mood and avoidant coping

Research Design

The objective of the study is to assess the mood and coping strategies among young adults and university students so as to understand their mood and coping strategies.

This could identify the level of mood and coping strategies on an individual in young adults and University students. The study correlation design which explores the relationship between variables using statistical analyses. This is a quantitative study which emphasize the statistical analysis of data collected through standardized questionnaires.

Operational Definition

- **Mood:** subset of social intelligence that involves the ability to monitor one's own emotions and others' emotions, to discriminate among them, and to use this information to guide one's own thinking and actions". (Salovey & Mayer, 1990)
- **Coping:** is defined broadly as an effort used to minimise distress associated with negative life experiences. Carver et al. (1989).

Variables

The study consists of two variables:

- Independent variable: Mood
- Dependent variable: Coping strategies

Demographic Variables

The socio-demographic variables in this research were used to describe the characteristics of a population, such as age, place of residence,

Geographical Area

The study included participants between the ages 18 – 25 from Bengaluru, Karnataka, India.

Sample and Technique

The participants for this study were taken from Bengaluru, Karnataka. Prior to participation, informed consent be obtained from each participant who participated in the study. Basic demographic details were also collected for this study. The individuals who were between the age group of 18-25 mostly taken for the survey. The questionnaires were passed randomly to college and university students. The samples were selected using convenient sampling method from different parts of Bangalore. Google forms are distributed, after which the participant was given to fill in the two questionnaires it takes about 10- 15minutes. The results would be kept confidential.

Sample Distribution

- **Inclusion criteria:** students who are not currently employed
- **Exclusion criteria:** people who do not understand English

Universe of the Study
The participants for this study were young adults. The data was collected through an online method.

Informed consent was obtained from all the participants in this study and their anonymity was maintained with respect to their responses and voluntary participation. The participant was informed in the guidelines that they can terminate from the study at any point they wish to. All the ethical guidelines by APA were considered in this study following the research protocol.

Tools for the study
    i.   Coping Orientation to Problems Experienced Inventory (Brief-COPE)
The Coping Orientation to Problems Experienced Inventory (Brief-COPE) is a self-report questionnaire consisting of 28 items that assess both successful and ineffective coping mechanisms for stressful life events. It is commonly used in medical contexts to gauge emotional reactions to serious situations, such as cancer diagnosis or mental illness. The scale helps identify a person's main coping mechanisms and coping styles, including solution-focused coping, coping with emotions, and avoidant adjustment. It also reports on aspects of managing such as self-distraction, denial, substance abuse, emotional support, venting, humor, acceptance, self-blame, religion, active coping, use of instrumental support, positive reframing, and planning.

    ii.   Trait Meta Mood - Scale (TMMS)
The Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT) is a measure with 48 items that uses a 5-point Likert style scale to evaluate emotional intelligence. The test includes three subscales: Attention to Feelings, Clarity of Feelings, and Repair of Mood, with Cronbach's alpha values of 0.88, 0.89, and 0.86 respectively. These subscales are considered reliable and distinct from similar constructs such as neuroticism and repression. The TMMS subscales are related to other measures of mood and mood management and can predict how mood is regulated and controlled.

Statistical Analysis
Data was analyzed using SPSS 21 package. Descriptive and Correlation statistical analysis was used for the study.

RESULT AND DISCUSSION
Results
The research was conducted on 140 individuals. The individuals who were between the age group of 18-25 mostly taken for the survey. The questionnaires were passed randomly to college and university students. The samples were selected using convenient sampling method from different parts of Bangalore. Google forms are distributed, after which the participant was given to fill in the two questionnaires it takes about 10- 15minutes. The results would be kept confidential.

Table 1 showing descriptive measures for age

Age	Frequency	%
20-25	85	60.71%
18-20	55	39.29%
Total	140	100%

The above table 1 shows the descriptive measures for age, based on a sample of 140 individuals.

The age ranges included in the table are 18-20 and 20-25. There were 55 individuals (39.29% of the sample) in the 18-20 age range and 85 individuals (60.71% of the sample) in the 20-25 age range.

The total number of individuals in the sample was 140, representing 100% of the sample.

Objective 1: To measure if there is a significant relationship between attention of feeling and problem focused coping.

H$_{01}$: There is no significant relationship between attention to feeling and problem focused coping.

Table 2 – showing the correlation between attention to feeling and problem-focused, emotion-focused and avoidant coping.

Variable		PF	EF	AC
Attention feeling	Correlation coefficient	-.031	-.403[**]	-.476[**]
	Sig (2 tailed)	.717	.000	.000

[**]. Correlation is significant at the 0.01 level (2-tailed).

The above Table 2 shows the correlation coefficient (r) of attention feeling subscale of TMMS with problem-focused is (r = -.031), (p>0.01), we can see that attention feeling and problem focused had a negative relationship. Hence the hypotheses is accepted which states that there no significant relationship between attention to feeling and problem focused coping.

Objective 2: To measure if there is a significant relationship between attention of feeling and problem focused coping.

H$_{02}$: There is no significant relationship between attention to feeling and emotional focused coping. The above Table 2 shows the correlation coefficient (r) of attention feeling subscale of TMMS with problem-focused is (r = -.403**), (p>0.01), we can see that attention feeling and emotional focused coping had a negative relationship. Hence the hypotheses is accepted which states that there no significant relationship between attention to feeling and emotional focused coping.

Objective 3: To measure if there is a significant relationship between attention of feeling and problem focused coping.

H$_{03}$: There is no significant relationship between attention to feeling and avoidant coping. The above Table 2 shows the correlation coefficient (r) of attention feeling subscale of TMMS with problem-focused is (r = -.476**), (p>0.01), we can see that attention feeling and avoidant coping had a negative relationship. Hence the hypotheses is accepted which states that there no significant relationship between attention to feeling and avoidant coping.

Objective 4: To measure if there is a significant relationship between clarity of feeling and problem focused coping.

H₀₄: There is no significant relationship between clarity of feeling and problem focused coping.

Objective 5: To measure if there is a significant relationship between clarity of feeling and emotional focused coping.

H₀₅: There is no significant relationship between clarity of feeling and problem focused coping.

Objective 6: To measure if there is significant relationship between clarity of feeling and avoidant coping.

H06: There is no significant relationship between clarity of feeling and avoidant coping.

Table 3–showing the correlation between clarity of feeling and problem-focused, emotion-focused and avoidant coping

Variable		PF	EF	AC
Clarity of Feeling	Correlation coefficient	378**	.067	-.099
	Sig(2 tailed)	.000	.435	.248

**. Correlation is significant at the 0.01 level (2-tailed).

The above Table 3 shows the correlation coefficient (r) of attention feeling subscale of TMMS with problem-focused is (r = 378**), (p<0.01), we can see that attention feeling and problem focused had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between clarity of feeling and problem focused coping.

The above Table 3 shows the correlation coefficient (r) of clarity of feeling subscale of TMMS with emotional-focused coping is (r = .067), (p<0.01), we can see that clarity of feeling and emotional-focused coping had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between clarity of feeling and emotional-focused coping

The above Table 3 shows the correlation coefficient (r) of clarity of feeling subscale of TMMS with repair of mood is (r = -099), (p<0.01), we can see that clarity of feeling and avoidant coping had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between clarity of feeling and problem focused coping.

Objective 7: To measure if there is a significant relationship between repair of mood and problem focused coping.

H₀₇: There is no significant relationship between Repair of mood ty of feeling and problem focused coping.

Objective 8: To measure if there is a significant relationship between repair of mood and emotional focused coping.

H₀₈: There is no significant relationship between repair of mood and emotional focused coping.

Objective 9: To measure if there is significant relationship between repair of mood and avoidant coping.

H$_{09}$: There is no significant relationship between repair of mood and avoidant coping.

Table 4 showing the correlation between repair of mood and problem-focused, emotion-focused and avoidant coping

Variable		PF	EF	AC
Repair of mood	Correlation coefficient	.294**	.142	-.015
	Sig(2 tailed)	.000	.098	.863

**. Correlation is significant at the 0.01 level (2-tailed).

The above Table 4 shows the correlation coefficient (r) of repair of mood subscale of TMMS with problem-focused is (r = .294**), (p<0.01), we can see that repair of mood and problem focused had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between repair of mood and problem focused coping.

The above Table 4 shows the correlation coefficient (r) of repair of mood subscale of TMMS with emotional focused coping is (r = .142), (p<0.01), we can see that repair of mood and emotional focused coping had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between repair of mood and emotional focused coping.

Table 4 shows the correlation coefficient (r) of repair of mood subscale of TMMS with Avoidant coping is (r = .142), (p<0.01), we can see that repair of mood and Avoidant coping had significant positive relationship. Hence the hypotheses is rejected which states that there no significant relationship between repair of mood and Avoidant coping.

SUMMARY AND CONCLUSION

Summary

To assess the mood and coping strategies among young adults so as to understand their psychological factors when it comes to academics which would further facilities in construction of intervention techniques. the data was collected through Google form between the age group of 18-25. there were 140 samples. Pearson r correlation was conducted to see the relationship between mood and coping strategies and its subscales. the mood has a have a negative relationship with coping strategies. Problem focused have a negative relationship with attention feeling whereas Emotional-focused coping and avoidant coping have a significant negative relationship with attention feeling. problem focused have a negative relationship with attention feeling. Problem focused have a significant positive relationship with clarity of feeling whereas Emotional-focused coping has significant positive correlation with clarity of feeling and avoidant coping have a negative relationship with clarity feeling. Problem focused have a significant positive relationship with repair of mood, whereas Emotional-focused coping has positive correlation with repair of mood and avoidant coping have a negative relationship with clarity feeling.

Conclusion

The statistical study used Coping Mechanism measure and the Trait Meta Mood Scale for measurement of the mood on different subscales. The questionnaires were circulated using an online data collection platform. Non-probability convenient sampling was used to reach out

to the participants of the study The hypothesis were constructed to test the correlation between subscales of coping and mood. The studies align with findings of existing literature and future studies should engage in collecting sample from distressed induced events. More control variable like socio-economic status, age and work employment could also be taken. the mood has a have a negative relationship with coping strategies. Problem focused have a negative relationship with attention feeling (p>0.01), whereas Emotional-focused coping and avoidant coping have a significant negative relationship with attention feeling (p<0.01). problem focused have a negative relationship with attention feeling (p>0.01). Problem focused have a significant positive relationship with clarity of feeling (p<0.01), whereas Emotional-focused coping has significant positive correlation with clarity of feeling (p<0.01). and avoidant coping have a negative relationship with clarity feeling (p>0.01). Problem focused have a significant positive relationship with repair of mood (p<0.05), whereas Emotional-focused coping has positive correlation with repair of mood (p<0.01) and avoidant coping have a negative relationship with clarity feeling (p>0.01).

Implications
After understanding the kind of methods people resort to at a small scale, the study can be expanded to a larger group to effectively suggest better methods. The results of the study were complimenting the existing literature as the studies conducted recently also establish significant correlation.

Limitations
- The sample of study was fairly small and no control variables were used while collecting the data.
- The Trait Meta Mood Scale has not been previously tested on Indian population. More relevant measures adapted on Indian population.
- The sample of study was between the age groups of 18 - 25 years of age. The small age range of the sample limits the generalizability of the results.

Scope for Future Research
Firstly, the study could explore additional control variables such as socio-economic status, type of work modality, and occupation, which are significantly correlated with mood and productivity. Conducting a systematic literature review could provide insights into other control variables that could be considered in future studies.

Secondly, the sample size could be increased to improve the study's generalizability or focus on a specific population, such as patients with certain disorders, as found in studies during the literature review. This could help to explore the relationship between mood and productivity in different populations and settings.

Finally, future research could also explore other factors that may influence mood and productivity, such as environmental factors or individual differences in personality traits or cognitive abilities. By considering these factors, future studies can provide a more comprehensive understanding of the relationship between mood and productivity and provide insights into how to improve productivity in different contexts.

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