

The Influence of Social Support and Resilience with Coping Strategies among Students

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ABSTRACT

The college experience can be a challenging time for many students as they navigate academic pressures, social relationships, and personal growth. In this context, the interplay between social support, resilience, coping strategies and mental health plays a crucial role in determining the wellbeing of college students. Social support refers to the assistance and resources provided by others in times of need. Resilience is the ability to bounce back from adversity and adapt positively to stressors. Coping strategies are the behavioural or psychological efforts individuals employ to manage stressful situations. Mental health encompasses emotional, psychological, and social well-being. The present study aimed to study the influence of social support and resilience with coping strategies among students. A sample of 200 students (100 Male, 100 Female) was selected. The Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, & Farley, 1988), Brief Resilience Scale (Smith, 2008) and Coping Strategy Indicator (Amirkhan & James H., 1994) were administered. Multiple Regression Analysis was done to find out the contribution of different predictor variables. The results indicated a significant positive relationship between the predictor variables and the criterion variable. Positive correlation was found between Social Support and Resilience with Coping Strategies which were Problem Solving, Seeking Social Support and Avoidance. The contribution of emotional maturity was much more remarkable as compared to the other two predictor variables i.e. self-concept and spirituality in determining academic resilience among undergraduates.

Keywords: *Social Support, Resilience, Coping Strategies*

Mental health, a cornerstone of holistic well-being, encapsulates a myriad of psychological states and processes that shape individuals' experiences, behaviours, and perceptions of the world around them. It stands as a pivotal determinant of one's quality of life, influencing interpersonal relationships, academic and occupational performance, and overall life satisfaction. Yet, mental health remains a multifaceted construct, intricately interwoven with various factors ranging from biological predispositions to socio-environmental influences.

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The World Health Organization (WHO) defines mental health as "a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (WHO, 2014). This definition underscores the holistic nature of mental health, emphasizing not only the absence of mental illness but also the presence of positive psychological functioning and adaptive coping mechanisms.

Understanding Mental Health

Mental health encompasses a continuum of states ranging from optimal functioning and resilience to varying degrees of psychological distress and impairment. At one end of the spectrum lie individuals who experience flourishing mental health, characterized by high levels of well-being, positive emotions, and effective coping strategies. At the other end reside those grappling with mental illness, encompassing a broad array of disorders such as depression, anxiety, schizophrenia, bipolar disorder, and substance abuse disorders, among others.

The prevalence of mental health disorders is staggering, with WHO estimating that approximately one in four individuals worldwide will be affected by mental or neurological disorders at some point in their lives (WHO, 2019). Moreover, mental health disparities persist across demographic groups, with marginalized populations facing disproportionate burdens of mental illness due to structural inequities, discrimination, and lack of access to mental health services.

Correlates of Mental Health

Mental health is influenced by a complex interplay of biological, psychological, social, and environmental factors, collectively known as determinants of health. These correlates encompass a broad spectrum of variables that interact dynamically to shape individuals' mental health trajectories and outcomes. Key correlates of mental health include:

Biological factors

Biological factors, including genetic predispositions, neurochemical imbalances and neurodevelopmental processes, play a significant role in shaping individuals' susceptibility to mental health disorders. Research has elucidated the genetic underpinnings of various mental illnesses, highlighting the heritability of conditions such as schizophrenia, bipolar disorder, and major depressive disorder (Sullivan et al., 2018). Neurobiological studies have also implicated alterations in brain structure, function, and neurotransmitter systems in the pathophysiology of mental health disorders, underscoring the intricate interplay between biological substrates and psychological functioning.

Psychological Factors

Psychological factors encompass cognitive, emotional, and behavioural processes that influence individuals' thoughts, feelings, and actions. Cognitive vulnerabilities, such as maladaptive schemas, cognitive biases, and dysfunctional beliefs, can predispose individuals to negative affective states and perpetuate cycles of rumination and self-criticism (Beck, 1976). Emotion regulation strategies, coping styles, and personality traits also contribute to individuals' resilience and vulnerability to stressors, shaping their capacity to adaptively cope with life challenges (Gross, 1998). Moreover, early childhood experiences, attachment patterns, and interpersonal relationships shape individuals' psychological development and contribute to their mental health trajectories across the lifespan (Bowlby, 1988).

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Social and Environmental Factors

Social determinants of mental health encompass the social, economic, and environmental conditions in which individuals live, work, and interact. Social support networks, familial relationships, peer dynamics, and community resources constitute protective factors that buffer against stress and promote resilience (Thoits, 2011). Conversely, social isolation, poverty, discrimination, and adverse childhood experiences can undermine individuals' mental health and exacerbate the risk of developing psychiatric disorders (Kessler et al., 2010). Environmental stressors, such as trauma, violence, natural disasters, and socioeconomic disparities, also contribute to the burden of mental illness, particularly in vulnerable populations (Galea et al., 2005).

Cultural and Contextual Factors

Cultural beliefs, values, norms, and practices shape individuals' perceptions of mental health, illness, and help-seeking behaviours. Cultural contexts influence the expression and interpretation of symptoms, the stigmatization of mental illness, and the availability and acceptability of mental health services (Kleinman, 1977). Cultural competence, cultural humility, and culturally sensitive interventions are essential for addressing the diverse needs and experiences of individuals from different cultural backgrounds and marginalized communities (Sue et al., 2009).

In summary, mental health is a multidimensional construct influenced by a myriad of biological, psychological, social, and environmental factors. Understanding the correlates of mental health is essential for elucidating the mechanisms underlying mental illness, identifying risk and protective factors, and informing targeted interventions aimed at promoting resilience, fostering social support networks, and enhancing psychological well-being across diverse populations.

Understanding Social Support

Social support operates through various mechanisms, including emotional, instrumental, informational, and appraisal support. Emotional support involves expressions of empathy, love, trust, and care, providing individuals with a sense of security and validation in times of distress. Instrumental support entails tangible aid and assistance in the form of resources, services, or practical help, addressing the tangible needs of individuals. Informational support involves the provision of advice, guidance, and information, enabling individuals to make informed decisions and navigate challenging situations effectively.

Lastly, appraisal support encompasses feedback, affirmation, and validation of one's abilities and worth, bolstering individuals' self-esteem and confidence (Cohen & McKay, 1984). According to Cohen and Wills (1985), social support can be defined as "the perception and actuality that one is cared for, has assistance available from other people, and is part of a supportive social network." This definition highlights the subjective perception of support as well as its tangible manifestations within social networks.

Furthermore, House (1981) posits that social support encompasses "information leading the individual to believe that he is cared for and loved, esteemed, and a member of a network of mutual obligations." This perspective underscores the role of social relationships in providing individuals with emotional validation, esteem, and a sense of belonging within their social milieu.

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Additionally, Thoits (1982) conceptualizes social support as "the social resources that persons perceive to be available or that are actually provided to them by noninstitutional sources." This definition emphasizes the instrumental and emotional assistance individuals receive from their social networks, irrespective of whether it is perceived or received.

Relevance of Social Support to the Chosen Population

For college-going students, social support plays a pivotal role in buffering the adverse effects of academic stress, peer pressure, and transitional challenges associated with emerging adulthood. The transition from adolescence to young adulthood is often marked by heightened vulnerability to mental health issues, exacerbated by academic demands, social pressures, and identity exploration (Arnett, 2000). In this context, social support serves as a crucial protective factor, mitigating the deleterious impact of stressors on students' mental health and well-being. Moreover, college environments serve as microcosms of diverse social interactions, offering opportunities for the formation of supportive relationships and social networks. Peer support, familial support, and institutional support are instrumental in fostering a sense of belonging, cohesion, and connectedness among students, thereby enhancing their resilience and adaptive coping strategies (Dunkel-Schetter & Bennett, 1990).

Interaction of Social Support and Mental Health

The relationship between social support and mental health is intricately intertwined, with ample evidence suggesting that social support serves as a buffer against psychological distress and promotes psychological resilience. According to the stress-buffering hypothesis proposed by Cohen and Wills (1985), social support functions as a protective factor that attenuates the adverse effects of stress on mental health outcomes. When individuals perceive themselves as adequately supported within their social networks, they are better equipped to cope with stressors and maintain psychological well-being. Moreover, social support fosters a sense of belongingness and interpersonal connectedness, which are fundamental psychological needs essential for mental health and emotional stability (Baumeister & Leary, 1995). Individuals with robust social support networks exhibit lower levels of anxiety, depression, and psychological distress, highlighting the salutary effects of social connections on mental health outcomes (Thoits, 2011).

Understanding Resilience

Resilience encompasses various cognitive, emotional, and behavioural processes that enable individuals to adapt to adversity and maintain a sense of psychological well-being. These processes may include cognitive reappraisal, problem-solving skills, emotion regulation strategies, and seeking social support.

Resilient individuals demonstrate flexibility in their thinking patterns, a positive outlook on life, and a capacity to bounce back from setbacks. Moreover, resilience is not a fixed trait but a dynamic and malleable construct that can be cultivated and strengthened over time through experiences, social interactions, and coping strategies. Research suggests that individuals with higher levels of resilience exhibit greater psychological adjustment, lower levels of stress, and better overall mental health outcomes.

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Relevance of Resilience to College Students

For college students, resilience plays a pivotal role in navigating the myriad challenges they encounter during this transitional period. From academic pressures to social expectations, students face a host of stressors that can impact their mental well-being and academic performance. The ability to adapt to these challenges and persevere in the face of adversity is essential for students' overall success and well-being. The college years represent a critical developmental stage where individuals undergo significant personal and academic growth. However, this period is also marked by increased stressors such as academic demands, social pressures, and identity exploration. Consequently, college students may experience heightened levels of stress, anxiety, and depression, making resilience a crucial factor in promoting their psychological well-being.

Interaction of Resilience and Mental Health

The relationship between resilience and mental health is complex and bidirectional, with resilience serving as a protective factor against the development of mental health problems and vice versa. Resilient individuals demonstrate adaptive coping strategies, such as seeking social support, problem solving, and positive reframing, which buffer against the negative impact of stressors on mental health. Conversely, individuals with poor mental health may struggle to cope effectively with adversity, leading to a depletion of resilience resources and further exacerbating mental health issues. Research has shown that resilience plays a significant role in mitigating the adverse effects of stress on mental health outcomes, including depression, anxiety, and post-traumatic stress disorder.

Understanding Coping Strategies

Coping strategies serve as adaptive mechanisms that individuals utilize to manage the challenges and demands encountered in various life domains, including academic settings. These strategies play a crucial role in influencing psychological well-being, resilience, and overall adjustment (Carver, Scheier, & Weintraub, 1989). Effective coping strategies facilitate the preservation of psychological equilibrium and enhance individuals' ability to cope with stressors, fostering a sense of mastery and control (Folkman & Moskowitz, 2004). Furthermore, coping strategies encompass a diverse array of cognitive, emotional, and behavioural responses tailored to the specific nature of stressors and individuals' coping resources (Compas et al., 2001). Individuals may employ problem-focused coping strategies such as active problem-solving, seeking social support, or utilizing instrumental resources to address the stressor directly. Alternatively, emotion-focused coping strategies such as cognitive reappraisal, emotional expression, and distraction may be employed to regulate emotional responses and mitigate the impact of stressors (Lazarus & Folkman, 1984).

Problem-solving, seeking social support, and avoidance represent three primary coping strategies frequently utilized by college students to cope with stressors. Problem-solving involves the systematic identification and implementation of solutions to address the underlying causes of stressors (Nezu et al., 2013). This approach emphasizes active problem-solving efforts aimed at resolving the source of stress, thereby mitigating its impact on individuals' well-being. College students often employ problem-solving strategies to

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tackle academic challenges, interpersonal conflicts, and other stressors encountered in the college environment.

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Relevance of Coping Strategies to College Students

For college students, coping strategies assume heightened significance due to the myriad of academic, social, and personal stressors inherent in the college environment. The transition to college entails a myriad of challenges, including academic demands, social adjustments, financial pressures, and identity exploration, which can potentially exacerbate stress and strain students' coping resources (Hirsch & Ellis, 1996). Consequently, effective coping strategies play a crucial role in facilitating students' adaptation, resilience, and academic success (Compas et al., 2001). Moreover, college students' coping strategies are influenced by various contextual factors, including social support networks, individual resilience, and cultural norms (Sinha & Singh, 2019). Social support from peers, family, and academic institutions can serve as a protective buffer against stressors, providing emotional validation, instrumental assistance, and informational resources to bolster students' coping efforts (Huang, 2013). Similarly, individual differences in resilience, characterized by the capacity to bounce back from adversity and maintain psychological well-being, shape students' coping strategies and adaptive responses to stress (Connor & Davidson, 2003).

Interaction of Coping Strategies and Mental Health

The interaction between coping strategies and mental health outcomes underscores the pivotal role of coping mechanisms in shaping individuals' psychological well-being and adjustment. Effective coping strategies have been associated with reduced psychological distress, enhanced psychological resilience, and improved overall mental health outcomes (Carver et al., 1989). Conversely, maladaptive coping strategies characterized by avoidance,

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ruminantion, and self-blame have been linked to heightened levels of anxiety, depression, and psychological dysfunction (Compas et al., 2001).

Moreover, coping strategies mediate the relationship between stressors and mental health outcomes, serving as intermediary mechanisms through which individuals navigate and manage stressors (Folkman & Moskowitz, 2004). The transactional model of stress and coping posits that individuals' appraisal of stressors, coping resources, and coping strategies collectively influence their psychological responses and adaptation to stress (Lazarus & Folkman, 1984). Therefore, understanding the interplay between coping strategies, social support, resilience, and mental health is imperative for developing targeted interventions to enhance students' coping skills and promote their psychological well-being.

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REVIEW OF LITERATURE

Maharani et al. (2024) aimed to determine the relationship between coping mechanisms and mental health after a breakup. By using a cross-sectional approach, a sampling technique

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using purposive sampling and 101 respondents participated. Data collection using a coping mechanism questionnaire and mental health questionnaire. The results showed that some respondents had adaptive coping mechanisms and good mental health. The results of statistical analysis using the chi-square test showed a significant relationship between coping mechanisms and mental health and students with maladaptive coping mechanisms were 10 times more likely to experience poor mental health after they experienced a breakup.

Veerabhadraiah et al. (2023) investigated the relationships between resilience and perceived social and organizational support and coping strategies among nursing students. It was a web-based survey carried out among nursing 1017 undergraduates across the country. Data was collected using self-reported questionnaires in May 2021. Majority of the students had a normal level of resilience, perceived a high level of social and organizational support and used effective coping strategies. Also, the variables of resilience, social support, organization support and coping strategies were positively correlated. While age was positively correlated with resilience, younger and females perceived a higher level of social support than others. The results suggest that strengthening resilience and improving coping skills and social support may promote psychological wellbeing for nursing undergraduates during the coronavirus pandemic.

Sethi (2023) investigated the role of perceived social support in self-esteem and resilience among young adults and whether there is any gender difference in this case or not. The result analysed total of 100 (50 females and 50 males), Indians by nationality and between the age range (18-26) years. For data collection, tools used were Multidimensional Scale of Perceived Social Support, Rosenberg self-esteem scale and Nicholson McBride Resilience Questionnaire (NMRQ). The quantitative analysis was done using t-test and Pearson's product-moment correlation. The result postulated that Perceived Social support plays a positive role and have a positive relationship with Self-esteem and Resilience. The higher the perceived social support, more will be the self-esteem of a person and has much more abilities to cope with problems in faster pace, than in individuals with less perceived social support. 17 There are no significant gender differences found among them. Also, Perceived Social support has a positive correlation with self-esteem and resilience among young adults.

Herbert & Manjula (2022) investigated the cultural adaptation of resilience-based intervention for college students and examine the feasibility, acceptability and effect in enhancing resilience, coping, self-esteem and positive emotions and reducing anxiety, stress and negative emotions. The sample was comprised of 81 students belonging to 2nd year architectural engineering, chosen by random selection of a college. Uncontrolled single group design with pre-test, post-test and 3 months follow-up assessments method was adopted. Thirty-five students attended the minimum desired number of sessions, which is 4 out of 6. The tools used for assessment were Sociodemographic Data Sheet, The Connor-Davidson Resilience Scale, Positive and Negative Affect Schedule, Rosenberg Self-Esteem Scale, The Coping Checklist, Depression Anxiety and Stress Scale, and Psychological Well Being scale and a feedback for assessing the feasibility and acceptability. The results indicate significant improvements in few variables such as resilience, problem solving coping and negative affect. The intervention had a medium magnitude of change on these variables.

Saddique et al. (2021) aimed the study to delve into the influencing factors of psychological distress perceived social support, subjective well-being, and resilience. Additionally, gender

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difference has created immense ambition, enthusiasm drivers of psychological distress. Methodologically, this research is developing an approach of quantitative method. Accordingly, this research contributes to use a survey method to address the psychological distress among university students. Data were obtained from 389 university students. the results confirm an overall positive effect of perceived social support, subjective well-being, and resilience on psychological distress.

Mai Y, Wu YJ and Huang Y (2021) conducted a survey on 3,454 students (aged 15–25 years) to understand students perceived social support-coping modes while investigating the demographic characteristics and mental health status of subclasses of different modes. It was found that high levels of emotional support from family and friends can increase students' tendency of adopting positive strategies to cope with difficulties, while problems related to the dependability of friends and communication with family decrease students' tendency of adopting positive coping strategies.

Shabnam et al. (2021) aimed to evaluate the feasibility of brief resilience interventions in a sample of college students. Randomized controlled study was conducted among 220 college students. The participants were randomly allocated to two groups: (i) A brief resilience intervention program group 18 and (ii) a resilience self-help pamphlet group. The outcome measures were changes in the scores of the Brief Resilient Coping Scale (BRCS), Perceived Stress Scale, and Patient Health Questionnaire-4. The results suggested that Brief resilience interventions have the potential to promote resilience and coping skills among college-going students in this setting. The integration of brief resilience interventions among college-based cohorts would appear to be an appropriate strategy for building protective factors to bolster resilience.

Stanley & Buvanewari (2022) used a longitudinal design to assess stress, resilience and coping in undergraduate social work students in India and a comparative cohort of non-social work undergraduates. Standardised instruments were administered at three time points: the first on course entry, then in the second year of study and finally on the verge of course completion at the end of three years. Moderate levels of stress and resilience were seen in the social work cohort, but no incremental progression in their manifestation was observed as students progressed through their degree. Stress, problem-focused and emotion-focused coping strategies emerged as significant predictors of resilience. The findings indicate a need to develop resilience in social work students to enable them deal more effectively with various stressors.

Ranjan et al. (2019) aimed to assess and compare the perceived social support and ego-resilience among the school going adolescents. Sample was of 240 adolescents who were the students of the class 10th, 11th, and 12th grade of Delhi public school Rajnand Goan, Chhattisgarh, India. Male and female students were selected randomly from each grade. The sample included 120 female adolescents and 120 male adolescents. Multidimensional Scale of Perceived Social Support and Ego- Resilience Scale were used for the assessment of socio-demographic and clinical details of all the adolescents. The results suggest that female has more perceived social support and ego-resilience as compare to male and has positive correlation with school going adolescents which means the perceived social support is directly proportional to ego resilience. In female social support is better than male as a result of this ego resilience is also better in female as compare to male.

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Parikh et al. (2019) researched the specific factors that influence stress and coping among school-going adolescents across two urban sites in India and discussed potential targets for preventing mental health difficulties. Focus group discussions were undertaken with a large sample of 191 school-going adolescent boys and girls aged 11–17, recruited from low- and middle-income communities in the predominantly urban states of Goa and Delhi. Framework analysis was used to identify themes related to causes of stress, stress reactions, impacts and coping strategies. Proximal social environments (home, school, peers and neighbourhood) played a major role in causing stress in adolescents' daily lives. Salient social stressors included academic pressure, difficulties in romantic relationships, negotiating parental and peer influences, and exposure to violence and other threats to personal safety. Additionally, girls highlighted stress from having to conform to normative gender roles and in managing the risk of sexual harassment, especially in Delhi. Anger, rumination and loss of concentration were commonly experienced stress reactions. Adolescents primarily used emotion focused coping strategies (e.g., distraction, escape-avoidance, emotional support seeking). Problem focused coping (e.g., instrumental support seeking) was less common.

Janina (2019) aimed to teach college student-athletes coping skills to improve both performance and mental health and increase their social support from coaches and captains. Participants were 88 college student-athletes who played 5 sports at a National Collegiate Athletic Association Division I university. Participants were divided into intervention and waitlist control groups and completed the Demographic, Athletic Coping Skills Inventory, Beck Anxiety Inventory, Beck Depression Inventory, and the World Health Organization Quality of Life questionnaires before and after the 8-week intervention period. The intervention included 5 sessions of mental skills training for performance and coping with life stressors, 2 sessions with coaches for social support, and 4 sessions with captains for social support. Analyses of covariance for each dependent variable were used to compare means between intervention and control groups, using their preintervention values as covariates. Athletic coping skills, $F(1, 70) = 9.069$, $p = .004$, and anxiety, $F(1, 79) = 5.017$, $p = .028$, significantly improved for the intervention group, compared to the control group.

Davarniya et al. (2019) investigated the variables of resilience, coping strategies, and social support as predictors of vulnerability to stress among students. The participants consisted of 375 university students who were selected by multistage cluster sampling method. The stress syndrome scale, checklist of coping skills, adult resilience inventory, and social support Appraisal scale were used to collect data. Data analysis was performed in SPSS-18 using simultaneous multiple regression analysis. Results suggested that the variables of resilience, social support, and coping strategies could predict vulnerability to stress. The variables of resilience, social support, and coping strategies can predict vulnerability to stress, and making changes in these factors can be effective in reducing vulnerability of people in face of stress.

Bhatia (2018) focused on how parents experience their child's disability and how, in their opinion, it has affected both themselves and the functioning of the family. Selected Families as sample have expressed strongly the emotional, social and economic cost in caring for a child with a disability. The distress could be alleviated by more aware and responsive support from informal and culturally sensitive formal sources. The goals of a responsive community should be to enhance coping resources that maximize the daily achievement of personal and family goals. Therefore, there should be a focus on community-based strategies that facilitate the inclusion of children with disabilities, as well as direct family support

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strategies to facilitate positive attitudes to inclusion of children with disabilities to contribute to family coping.

Togas et al. (2018) examined the association between coping strategies, perceived social support and mental health in psychosocial and environmental problems in the general population. A cross-sectional study was conducted with a sample of 482 individuals from Greece's general population. The Coping Strategy Indicator (CSI), the Multidimensional Scale of Perceived Social Support (MSPSS) and the General Health Questionnaire-28 was used. Results indicated younger participants had higher score in Seeking Social Support and lower score in Avoidance-withdrawal scales. There were no significant differences between the type of stressors in the CSI scales score. Concerning the GHQ-28, women had higher score than men in Somatic symptoms and in Anxiety/Insomnia subscales. Age correlated significantly only with Seeking Social Support, while a positive correlation was found between Avoidance-Withdrawal and GHQ-28 and a negative one between MSPSS and GHQ-28.

Prabhu et al. (2017) aimed to assess the resilience and PSS among school-going adolescents. The objectives of the study were to assess the Perceived Stress, PSS, to understand the gender differences in level of PSS and resilience among school going adolescents in Mangaluru city of Southern India. A 21 cross-sectional descriptive research design was used. 206 School-going adolescents from grades 8–10th of the four schools of Mangaluru city were selected through convenient sampling. Data were collected through self-administered scales. Descriptive statistics and t-test were applied. Results indicate adolescents had mild level of perceived stress, high PSS, and moderate resilience. Significant difference was noted between boys and girls in the global PSS and PSS from friends and significant others and resilience.

Thompson et al. (2016) investigated associations among approach-oriented coping strategies, social support, and resiliency to mental health issues among medical students. The use of approach coping strategies and social support has been shown in other populations to be related to mental health resiliency. Validated measures of depression and burnout along with items pertaining to diagnosis and treatment of mental health issues, specific coping strategies used during stressful times, and perceptions of social support were used in a cross-sectional study of students at the University of North Dakota School of Medicine and Health Sciences (UND SMHS). Results: The overall survey response rate was 64%. Seventeen percent had moderate to severe depression, and 49% had burnout. Of depressed respondents, 81% were undiagnosed. When asked why depression develops, 23% responded that it was due to an inability to cope. A significantly greater risk of depression was associated with inadequate support from family and friends and fellow medical students. Greater use of approach oriented coping strategies than avoidant-oriented strategies was associated with significantly decreased risk of burnout and was inversely correlated with depression.

Chahal, Rana & Singh (2016) aimed to explore the differences in coping strategies of convicts with or without psychiatric morbidity. The sample size was 200 and by the use of GHQ 12 followed by diagnostic evaluation using MINI, convicts were divided into two groups being with and without psychiatric morbidity. Then these groups scores were compared using Coping Strategies Checklist. The results indicated that Convicts without psychiatric morbidity used Denial and Externalisation as their coping Strategy in comparison with prisoners having mental illness. Convicts who were diagnosed with

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psychiatric disorders significantly used higher number of coping strategies in comparison with prisoners having no psychiatric morbidity and mainly relied on Internalization and Anger as Coping Mechanisms.

Ungar et al. (2015) aimed to assess how coping strategies, social supports and formal services combine in children to promote well-being. A multi-phase analysis of a qualitative dataset method of 608 interviews of young people from 5 countries was recorded using grounded theory strategies to build a substantive theory of young people's service and support use patterns. Analysis of ten interviews (two from each country) was done and then comparison of these findings resulted in patterns found in each country's full dataset. It resulted in the substantive theory that emerged explains young people's transience between individual coping strategies (cognitive and behavioural), reliance on social supports (family members, peers and teachers), and engagement with formal service providers whose roles are to provide interventions and case management. Young people's patterns of navigation were shown to be contingent upon the individual's risk exposure, his or her individual capacity to cope, and the quality of the formal and informal supports and services that are available and accessible.

Kumar and Dhanalakota (2015) conducted a study assessing mental health and coping styles among rural secondary school adolescents in Karimnagar district of Andhra Pradesh, India among eleven 23 selected secondary schools (5 residential, 5 non-residential schools and one private school) for students of classes 8, 9 and 10 (574 students). Four-point Likert scale was used to assess the status of mental health of the school adolescents. It was found that students coming from disadvantaged sections of the society suffered from psychosomatic disorders, inability to cope up with situation and impulsiveness in behaviour. Apart from that it was found that students suffered from depression as well, and also the study reveals that type of school management has significant influence on the mental health status of school adolescents because of the rigidity in time table and lack of recreation.

Mansi et al. (2015) designed this study identify the mechanisms of coping, resilience and quality of life (QoL) and their correlations in medical undergraduates, so as to find some factors which can help to make some positive changes in medical curriculum. 250 medical students representing all academic years of medical college were provided with questionnaires investigating their sociodemographic profile, coping skills, resilience, and QoL. Using appropriate statistical tests. A comparison of all these factors was also done among the students of all the academic years of medical school. Problem-solving and fatalism was more in immigrant students than native students of Mumbai. Problem-oriented mechanisms of coping, resilience, and QoL were higher in students doing internship. However, students of 3rd year part 2 were less resilient, used emotion-focused ways of coping and had a lower QoL. There was a good shift of positive ways of handling stress with an increase in the academic year. Problem-oriented mechanisms of coping positively correlated with resilience and QoL. High resilience was also found as a positive factor for good QoL. Along with the clinical component, an equal emphasis should be given to improve the social and personal life of a medical student helping them to cultivate more problem-based coping and increasing their resilience so as to ultimately improve their QoL.

Srivastava et al. (2014) aimed to assess the nature of stress, and coping styles among rural and urban adolescents. 200 students in 10+2 and graduation first year of both genders in the age range of 16-19 years were assessed with the Adolescent Stress Scale, and a self-report coping scale. The Result of present study reveals that in both environmental settings, male

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reported more stress than their counterparts' girls, however, to utilize coping strategies female adolescents are in higher in number than male adolescents.

Rationale of the Study

The study aims to investigate the influence of social support and resilience on coping strategies among students. This topic holds significant importance due to the well-documented challenges that students encounter in their academic and personal lives, including academic pressure, social stressors, and transitional periods. Social support and resilience are two key factors that have been identified as crucial for individuals' ability to effectively cope with stress and adversity. However, despite the recognition of their importance, there is a need for further research to better understand how social support and resilience interact and contribute to coping strategies specifically among students. By exploring these relationships, the study seeks to provide valuable insights into the mechanisms through which social support and resilience influence students' coping strategies. Understanding these dynamics is essential for informing the development of targeted interventions and support programs aimed at enhancing students' well-being and academic success.

METHODOLOGY

Aim

To study the influence of social support and resilience with coping strategies among students.

Objectives

1. To study the relationship between social support and resilience with coping strategies among students.
2. To study the relationship between social support and resilience among students.

Hypothesis

- **H1:** There will be a significant relationship between social support, Resilience and Coping Strategies.
- **H2:** Coping Strategies will influence social support and resilience among students.

Variables

1. **Independent Variable-** Social Support; Resilience
2. **Dependent Variable-** Coping Strategy

Sampling Design

The sample consists of 200 college-going students (100 males, 100 females). The age range of the participants was between 18 to 26 years old. The study was conducted in the Delhi NCR region using convenience sampling methods from various colleges within the region. Inclusion criteria: College-going students aged 18 to 26 years (100 males, 100 females) from the Delhi NCR region. Exclusion criteria: Individuals outside the specified age range or not enrolled in college within the Delhi-NCR region.

Research Design

This study will adopt a correlational design to examine the relationship between social support, resilience, with coping strategies among college-going students. The research aims to investigate the influence of social support and resilience on coping strategies among students. Utilizing a quantitative approach, the study will involve administering validated

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scales, including the Multidimensional Scale of Perceived Social Support and the Brief Resilience Scale and Coping Strategy Indicator, to a convenience sample of 200 college going students (100 male, 100 female) students from Delhi NCR. 27

Tools

- **Multidimensional Scale of Perceived Social Support (MPSS):** Multidimensional Scale of Perceived Social Support by Zimet, Dahlem, Zimet, and Farley (1988) was used to assess how much Social Support college going students perceive. The test has a 12-item measure of perceived adequacy of social support from three sources: family, friends, & significant other. The test-retest reliability was 0.95 and the internal consistency ranging from scores 0.85 to 0.95. Validity ranging from 0.92 to 0.94. The responses were evaluated on the five-point Likert scale ranging from strongly disagree to strongly agree.
- **Brief Resilience Scale (BRS):** Brief Resilience Scale by Smith et al. (2008) was used to measure selected sample's ability to bounce back from adversity. It is a 6-item scale 5 point Likert scale ranging from strongly disagree to strongly agree. The reliability is alpha coefficients ranging from 0.80 to 0.91. and the validity ranging from 0.40 to 0.70, indicating strong convergent validity.
- **The Coping Strategy Indicator:** The Coping Strategy Indicator by James & Amirkhan (1988) was used to assess how the sample uses three coping strategies i.e Problem Solving, Avoidance and Seeking Social Support. It is 33 item scale which has 3 subscales pertaining to Problem Solving, Avoidance and Seeking Social Support. Test-Retest Reliability for the subscales is Problem Solving scale were 0.83 and .77, respectively; for Seeking Support, 0.80 and 0.86; and for Avoidance, 0.82 and 0.79. Averaging across scales yielded mean coefficients of .82 and .81, indicating good overall reliability. Validity ranging from 0.30 to 0.60, demonstrating good criterion validity.

Statistical Design

A multiple regression analysis will be employed to analyse the quantitative data collected from the surveys. The data will include responses from validated the Multidimensional Scale of Perceived Social Support and the Brief Resilience Scale will assess social support and resilience, respectively, while the Coping Strategy Indicator will measure various coping strategies, namely Problem Solving, Seeking Social Support and Avoidance as coping strategies employed by students.

RESULT

The correlation matrix shows the correlation coefficients between a set of variables, and allows seeing which pair of variables have highest correlation. Table 1 shows the correlation between the criterion variable (Coping Strategies) and the predictor variables (Social Support and Resilience). It also shows the inter-correlation among Social Support and Resilience with Coping Strategies.

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Table 1: Correlational Matrix

	Perceived Social Support	Resilience	Problem Solving	Seeking Social Support	Avoidance
Perceived Social Support	1	-.078	.203**	.275**	.389**
Resilience	-.078	1	.083	.049	.084
Problem Solving	.203**	.083	1	.977**	.174*
Seeking Social Support	.275**	.049	.977**	1	.290**
Avoidance	.389**	.084	.174*	.290**	1

a. Correlation is significant at the 0.01 level (2-tailed).
 b. Correlation is significant at the 0.05 level (2-tailed).

The Table shows that Perceived social support exhibits positive and significant correlations with problem-solving ($r = .203, p < .01$), seeking social support ($r = .275, p < .01$), and avoidance ($r = .389, p < .01$) coping strategies. This shows that Social Support from family, friends and significant others lead to an increase coping strategy. Resilience demonstrates weaker positive correlations with problem-solving ($r = .083$) and avoidance ($r = .084$) coping strategies, although these correlations are non-significant. Notably, seeking social support coping strategy is highly correlated with problem solving ($r = .977, p < .01$) and avoidance ($r = .290, p < .01$) strategies.

Hypothesis no. 1 stating a significant relationship between social support, resilience, and coping strategies among college students was accepted. The table shows Perceived social support demonstrates positive and significant correlations with problem-solving, seeking social support, and avoidance coping strategies.

Hypothesis no. 2 stating that coping strategies will influence social support and resilience among students was accepted. Additionally, seeking social support shows significant correlations with problem-solving and avoidance coping strategies. These findings highlight the interconnectedness of social support, resilience, and coping strategies in the context of college students' experiences.

Table 2: Regression Analysis for Problem-Solving Coping Strategy

Model	R	R Square	Adjusted R Square	F	Significance
1	.226 ^a	.051	.041	5.294	.006 ^b

a. Predictors: (Constant), Perceived Social Support, Resilience
 b. Dependent Variable- Problem Solving Coping Strategy

The table shows the regression score between Problem Solving as a Coping Strategy and Social Support and Resilience among college-going students. The R value was .226 which represents the correlation between the two variables along with R Square to be 51%. The Table accounted for a significant proportion of the variance in problem-solving coping strategy scores, $R^2 = .051, F(2, N = 200) = 5.294, p = .006$. Both perceived social support and resilience were included as predictors in the model, and the overall model fit was statistically significant. Specifically, perceived social support and resilience collectively explained 5.1% of the variance in problem-solving coping strategy scores. These findings suggest that perceived social support and resilience may contribute to college students' engagement in problem-solving coping strategies.

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Table 3: Regression Analysis for Seeking Social Support Coping Strategy

Model	R	R Square	Adjusted R Square	F	Significance
1	.284 ^a	.080	.071	8.613	<.001 ^b

a. Predictors: (Constant), Perceived Social Support, Resilience
 b. Dependent Variable- Seeking Social Support Coping Strategy

The table illustrates the regression score between Seeking Social Support as a Coping Strategy and Social Support and Resilience among college-going students. The R value was .284 which represents the correlation between the two variables. The finding also shows that the R-square value is 80%. The table demonstrated a significant relationship, accounting for a statistically significant proportion of the variance in seeking social support coping strategy scores, $R^2 = .080$, $F(2, N = \text{Sample Size}) = 8.613$, $p < .001$. The predictors included in the model were perceived social support and resilience. Perceived social support and resilience collectively explained 8.0% of the variance in seeking social support coping strategy scores. These results suggest that both perceived social support and resilience may play a role in influencing college students' engagement in seeking social support coping strategies.

Table 4: Regression Analysis for Avoidance Coping Strategy

Model	R	R Square	Adjusted R Square	F	Significance
1	.405 ^a	.164	.156	19.354	<.001 ^b

Predictors: (Constant), Perceived Social Support, Resilience
 Dependent Variable- Avoidance Coping Strategy

The table shows that the regression score between Avoidance as a Coping Strategy and Social Support and Resilience among college-going students. The R value was .405 which represents the correlation between the two variables. The finding also shows that the R-square value is 16.4%. The table demonstrated a significant relationship, explaining a statistically significant proportion of the variance in avoidance coping strategy scores, $R^2 = .164$, $F(2, N = \text{Sample Size}) = 19.354$, $p < .001$. The predictors included in the model were perceived social support and resilience. Perceived social support and resilience collectively accounted for 16.4% of the variance in avoidance coping strategy scores. These findings suggest that perceived social support and resilience may influence college students' engagement in avoidance coping strategies.

DISCUSSION

The aim of the study was to examine the influence of social support and resilience on coping strategies among college students. The findings supported both hypotheses, Hypothesis 1 stated- There will be a significant relationship between social support, Resilience and Coping Strategies. **H1 was accepted.** Hypothesis 2 stating that Coping Strategies will influence social support and resilience among students. **H2 was accepted.** Through linear regression analysis affirming the influence of coping strategies, namely problem solving, seeking social support and avoidance on resilience and social support.

Hypothesis 2 states that will be a significant relationship between social support, Resilience and Coping Strategies was accepted.

From Table: 1 we can see that the correlation coefficient (r) value between sleep quality and anxiety is 0.612 which shows a moderate association between both variables. The p-value is

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0.00 i.e. <0.01 which means the relationship is statistically significant. So, it implies that an increase in the level of sleep quality results in an increase in the level of anxiety among college-going students. Hence, the null hypothesis, i.e. there is no significant relationship between sleep quality and anxiety among college-going students is rejected suggesting a complex interplay between these variables.

Perceived social support exhibited positive and significant correlations with all three coping strategies: problem-solving ($r = .203, p < .01$), seeking social support ($r = .275, p < .01$), and avoidance ($r = .389, p < .01$) [see Table 1]. This aligns with previous research demonstrating that social support networks act as a buffer against stress, promoting the use of adaptive coping strategies (Uchino et al., 2011). Students with strong social support may feel more confident and resourceful when facing challenges, leading them to engage in problem-solving or seek support from others. Additionally, social support might provide a sense of security, potentially contributing to the use of avoidance as a coping mechanism (Compas et al., 2001).

The regression analyses further supported the link between social support and coping strategies. Perceived social support, along with resilience, explained a significant portion of the variance in problem-solving (5.1%) and seeking social support (8.0%) coping strategies (Tables 2 & 3). These findings suggest that social support networks play a crucial role in promoting students' engagement in these adaptive coping mechanisms.

Resilience demonstrated weaker, non-significant correlations with problem-solving ($r = .083$) and avoidance ($r = .084$) coping strategies (Table 1). However, the regression analysis for avoidance coping revealed that perceived social support and resilience together explained a significant 16.4% of the variance (Table 4). This suggests that resilience might have a moderating effect on the relationship between social support and avoidance. For instance, students with high resilience might utilize social support more effectively to manage stress, potentially reducing their reliance on avoidance as a coping strategy.

Interestingly, seeking social support itself emerged as a strong predictor of both problem-solving ($r = .977, p < .01$) and avoidance ($r = .290, p < .01$) coping strategies (Table 1). This finding suggests that students who actively seek social support might also be more inclined to engage in problem-solving strategies. Social support networks can provide valuable resources and different perspectives, potentially aiding in problem-solving efforts. However, seeking social support might also be associated with avoidance tendencies, particularly for complex or overwhelming situations.

CONCLUSION

The present study investigated the influence of social support and resilience on coping strategies among college students. Through a correlational research design and multiple regression analysis, the study aimed to explore the relationship between social support, resilience, and coping strategies, as well as their implications for students' mental health and well-being. The findings revealed significant positive correlations between perceived social support and various coping strategies, including problem-solving, seeking social support, and avoidance.

Additionally, resilience showed weaker positive correlations with coping strategies, albeit non-significant in some cases. The regression analyses further elucidated the contributions of social support and resilience to students' engagement in different coping strategies,

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highlighting their interconnectedness and importance in navigating the challenges of college life. Overall, the results supported the hypotheses, indicating that social support and resilience play crucial roles in shaping college students' coping mechanisms and, consequently, their mental health outcomes.

In conclusion, this research underscores the significance of social support and resilience in promoting adaptive coping strategies among college students. By fostering supportive social networks and enhancing individual resilience, universities and policymakers can create conducive environments that facilitate students' psychological well-being and academic success. Moreover, interventions aimed at bolstering coping skills and promoting mental health literacy can empower students to effectively manage stressors and cultivate resilience in the face of adversity.

Moving forward, longitudinal studies and intervention research are warranted to further elucidate the dynamic interplay between social support, resilience, coping strategies, and mental health outcomes among college students, thus informing targeted interventions and support services tailored to their unique needs and challenges.

Implications of the Study

The findings of this study have several implications for research, practice, and policy in the field of mental health and student support services. Firstly, the identification of social support and resilience as significant predictors of coping strategies highlights the importance of incorporating these factors into interventions aimed at promoting students' mental well-being. Mental health programs and support services on college campuses could integrate strategies for fostering social support networks, resilience-building exercises, and coping skills training to enhance students' ability to navigate academic and personal challenges effectively.

Secondly, the results underscore the need for targeted interventions tailored to address the unique stressors and coping needs of college students. Interventions could focus on strengthening students' social support networks, providing psychoeducation on resilience-building strategies, and offering resources for developing adaptive coping skills. By addressing these factors holistically, colleges and universities can create a supportive environment that promotes students' mental health and academic success. Furthermore, the findings suggest the importance of promoting a campus culture that values mental health and well-being.

Colleges and universities could implement policies and initiatives aimed at reducing stigma surrounding mental illness, increasing access to mental health resources, and fostering a supportive campus climate that prioritizes students' emotional and psychological needs. By creating an environment where students feel supported and empowered to seek help when needed, institutions can contribute to the overall well-being and success of their student body. Overall, this study underscores the importance of understanding the role of social support, resilience, and coping strategies in college students' mental health and well-being. By addressing these factors proactively through research, practice, and policy, colleges and universities can create a nurturing and supportive environment that fosters students' holistic development and success.

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Limitations

Several limitations should be acknowledged in interpreting the findings of this study. Firstly, the use of self-report measures introduces the possibility of response bias and social desirability, potentially influencing participants' responses and affecting the validity of the data. Additionally, the reliance on a convenience sample of college students from a specific geographical region may limit the generalizability of the findings to broader populations, thus reducing the external validity of the study. Moreover, the cross-sectional nature of the research design precludes the establishment of causal relationships between variables, highlighting the need for longitudinal studies to ascertain temporal sequences and causal pathways.

Furthermore, the exclusive focus on social support, resilience, and coping strategies neglects other potentially relevant factors that may contribute to students' mental health outcomes, such as personality traits, environmental stressors, and cultural influences. Finally, the omission of qualitative data collection methods limits the depth and richness of understanding, as qualitative approaches could provide nuanced insights into students' subjective experiences and perceptions. Overall, while the present study offers valuable insights into the relationships between social support, resilience, and coping strategies among college students, these limitations underscore the need for caution in interpreting the findings and highlight avenues for future research to address these methodological constraints.

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Conflict of Interest

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