

Research Paper

Coping Strategies and Their Impact on Emotional Resilience in Young Adults: A Correlational Study of Problem-Focused, Emotion-Focused, Adaptive, and Maladaptive Strategies

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ABSTRACT

The study explores coping with the emotions and circumstances of life change among young adults by studying problem-solving and emotion regulation strategies of 100 young adults aged between 18 and 25 years using standardised tools, such as the Connor-Davidson Resilience Scale (CD RISC 10) and BRIEF COPE. The results highlight the role of coping styles in building resilience. Problem-focused and planning strategies were related to resilience by giving a sense of control. Emotion-focused approaches were effective for managing distress but had little if any, long-lasting impact on resilience unless used in conjunction with other positive strategies. Adaptive coping was therefore used as an element and showed how it can reduce the demand for strategy, avoidance, and denial that have been associated with low resilience levels. This study shows that emotional resilience is a product of something well developed; there has to be a merge of problem-solving as well as emotional control methods created in tandem with coping strategies to better overcome challenges and work productively with emotions in different scenarios such as in educational settings as well as mental health interventions that help young adults improve their wellness by growing resilience by becoming aware of coping mechanisms and advocate the right ones and decrying those which are wrong.

Keywords: *Emotional Resilience, Coping Strategies, Young Adults, Problem-Focused Coping, Adaptive and Maladaptive Coping*

Young adulthood is a critical stage in every individual's life that involves the transition from 'adolescence' to 'adult', resulting in more self-reliance. This stage is normally associated with several stressors that contribute to high instances of stress and mental health problems amongst people which are mainly triggered by academic pressure, social interaction, and financial constraints.

At this point of development, the rhythmic rhythm of life and expectations within society create several difficulties that involve changes in interpersonal relationships, career aspirations, and academic expectations (Masten, 2014; Bartley et al., 2010). As of recent studies, more than 60% of students in college report experiencing moderate or extreme

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psychological stress, and most of these students experience chronic stress from both social and academic settings. Thus, it was shown that destructive stress calls for emotional resilience - a resource that may buffer some negative effects of varying life circumstances as well as promoting healthy functioning and development (Masten, 2014; Bartley et al., 2010). This helps to fight stressors and sets them in positive directions that help increase their performances both academically and psychosocially (Smith et al., 2008). Emotional resilience is the ability to work through obstacles in life and maintain the experience is identified as one of the key skills for young people trying to make their way in modern age. Of course, in the case of a broad range of problems, like educational ones that are presented to the youth, it is their propensity to bounce back that matters (Wang et al, 1994; Alva, 1991).

Likewise, this has also been shown to have a major impact on individuals' psychological well-being, school performance, or even the ability to survive in the face of extreme external constraints (Smith et al., 2008; Waxman et al., 2003). The concept of resilience is closely linked with coping resources or strategies, which are ways of managing stress that are either adaptive or maladaptive according to the way they impact mental health (Folkman & Moskowitz, 2004). Because extreme levels of stress are commonly encountered among young adults in academic settings, the importance of teaching them to be resilient has become all the more important.

Resilience has been associated with various advantages, improving mental health, quality of life, and academic performance, hence acting as a protective factor against stress and mental health issues (Wang et al., 1994).

The Role of Coping Mechanisms

Coping mechanisms are especially essential in the building of resilience and its maintenance since they may offer ways to handle distal or distressing situations and emotions. A whole typology of coping strategies has been identified to comprise two categories, namely problem-focused and emotion-focused coping. Both of these elements play different roles in building resilience (Carver, 1997).

According to Zimmer-Gembeck and Skinner (2011), problem-solving appraisal is one of the best methods for boosting resilience that focuses on stress reduction or elimination. However, emotion-focused coping tries to approach the management of emotions rather than the situation itself by providing distraction, positive thinking, and other strategies that reduce the negative impacts of stress and help in mental well-being (Skinner et al., 2003; Folkman & Moskowitz, 2004).

While problem-focused and emotion-focused coping strategies might often prove useful, maladaptive reactions to stress or coping mechanisms like substance abuse, avoidance, and self-blame serve to exacerbate the situation, making it even harder to handle (Aldwin, 2007). Since such patterns of behaviour relate to coping skills that do not address the root tension, they are associated with psychopathology and emotional instability (Mahmud et al., 2020; Bartley et al., 2010). Accordingly, coping mechanisms aimed at reducing stress enhance resilience, especially in extremely stressful settings like educational institutions (Waxman et al., 2003).

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Purpose of the study: This study aims to observe and determine the value of stress reduction coping strategies in the development of emotional resilience in a young adult. In addition, the research study shall measure different techniques used by the young adult for coping, such as Problem-Focused, Emotion-Focused, Adaptive, and Maladaptive, and resilience as exhibited by the young adult. The findings of this study will give an idea regarding the effectiveness of these coping strategies in influencing resilience and to identify which coping styles would promote emotional resilience and which ones would endanger it. This research will yield findings also useful for educational, health, and other policymakers involved or interested in how to encourage emotional resilience among young people. As such, exploring this very complex relationship between coping and resilience underscores the provision of the right skills for young adults to look after their mental well-being to help them get through this transitional phase of life.

LITERATURE REVIEW

1. Perception of Stress in the Youth

Stress, a reaction to adversity, strikes both planes at which it will be felt—physical and mental. The American Psychological Association further reveals that the youth population is more exposed to stress than other populations because the aspect of transition, in most cases, cuts across education and social workplaces. To the youth, stress can take on other faces, especially anxiety, depression, and college burnout. These stressors require the right kind of coping mechanisms toward mental health to shun the adverse outfall of such. (Riley & Masten, 2005).

2. Emotional Resilience in Young Adults

Emotional resilience, defined as the ability to adapt and recover from stress, adversity, or trauma, is a vital psychological asset in navigating life's challenges (Sisto et al., 2019). It means one's capacity to fail and recover from issues such as stress, abuse, and trauma among many others. Resilience serves as a protective factor for young adults, enabling them to cope with stressors such as academic, social, and personal transitions (Masten, 2014). However, at this point, these age groups are typically under stress from a variety of factors, including finding themselves amid their social, professional, and academic lives, which exacerbates the anxiety they already experience in most circumstances (Bartley et al., 2010). Due to their ability to effectively regulate emotions and stress, people with high resilience are linked to higher levels of mental health, a better quality of life, and good academic achievement (Smith et al., 2008; Alva, 1991).

3. Development of Coping Strategies

Coping strategies usually refer to the cognitive and behavioural efforts that individuals use to cope with stress. Folkman and Moskowitz, 2004 expands further by sub-classifying them into problem-focused—that is, intended to modify the source of stressors—and emotion-focused, aiming to control emotional responses. The former includes activities such as planning and finding a solution, while the latter comprises activities such as seeking emotional support or distraction (Folkman & Moskowitz, 2004). This has been very resourceful in explaining how young adults cope with stress.

Elaborating on coping strategies, research by Aldwin in 2009 indicates that the coping mechanisms are dynamic and evolve with age and experience, thus shaping the course of development. Therefore, it requires adaptive coping mechanisms at young ages capable of leading to long-term resilience and healthier stress responses (Aldwin, 2009).

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A study of frontiers in psychology revealed that different coping strategies are complementary in achieving the best psychological adaptation, especially for students with the highest academic competition levels (Freire et al., 2020).

4. Emerging Adulthood and Stress Management

Emerging adulthood is described as a phase of development by Arnett (2000) between adolescence and full-blown adulthood; it has increased exploration and instability. Decisions come at this stage that significantly impact mental health. The literature informs that, at this critical point in life, Arnett (2000) emphasizes coping mechanisms to manage stress. Probable positive results for development and increase in resilience would occur in the use of adaptive strategies.

5. Problem-Focused Coping and Resilience

Problem-focused coping seems to be a direct engagement with the stressors, aiming at reducing the effects of the impact caused by them. Research for World Health Organization by Bartley, Schoon, Mitchell, and Blane (2010) demonstrated that resilience is a protective resource accumulated through the most efficient strategies oriented at problem-solving (Bartley et al., 2010). The same authors, as Carver (1997), elaborated Brief COPE inventory, the tool applied when measuring adaptive coping strategies - planning, problem-focused coping. These tactics enable management, that's an important part of resilience (Carver, 1997).

6. Emotion-Focused Coping and its Outcomes

Emotion-focused coping while it alleviates emotional suffering will lead to harmful habitualized mechanisms if reinforced positively. According to articles from Frontiers in Psychology, proper application of emotion-focused interventions would lessen damaging effects on mental health, and the authors emphasized the role of emotional regulation (Freire et al., 2020). However, overindulgence in avoidance or denial will heighten the stress and therefore a balance between emotional and problem-focused approaches should be insured.

7. Role of Resilience in Coping

As quite important in reducing the effect of stress, resilience is defined as a capacity to bounce back from adversity. Masten (2001) referred to "ordinary magic" when describing resilience as an ordinary capacity built on usual human adaptive systems. Resilience is actually based on perfect exposure to challenges which mostly come through adaptive ways of coping, such as positive reframing and cognitive restructuring.

Smith et al. developed the Brief Resilience Scale which tapped the capacity of an individual to "bounce back" from stress and discovered that high resilience is associated with low psychological distress. This further underscores the necessity to implement resilience training in schools for young adults to enhance coping abilities (Smith et al., 2008).

8. Educational and Contextual Factors Influencing Coping

Learning environments can either maximise or minimise the impact of stressors. This is particularly important for educational resilience in inner-city environments where stressors are maximised. A positive school climate combined with resource readiness enables learners to use adaptive coping strategies and as such is significantly related to both academic and psychological outcomes (Wang, Haertel, and Walberg, 1994).

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The American psychological association recommends that mental health facilities are very basic to a college. College students will always be faced with unique stressors in relation to academic performance and social integration. The outcomes of coping would dramatically be affected by the existence or lack thereof of counselling and training in resilience. As such, universities have to ensure holistic support to every student's mental health.

METHODOLOGY

Research Design

The study features a quantitative, correlational research design to study and understand the relationship between different coping strategies and emotional resilience among young adults. This design was selected because it enables the measurement of the relationships between several variables and interaction between these variables' measurements functions without manipulating any conditions. A correlational approach is appropriate for this study since the research is concerned with identifying patterns and associations between coping strategies and resilience rather than establishing causation (Creswell & Creswell, 2017).

Self-report surveys are used in this study, which include the Connor-Davidson Resilience Scale (CD-RISC 10) and the Brief COPE scale. This way the primary variables of interest, which are emotional resilience and coping styles, will be assessed in a standardised manner thus enabling proper measurement and correlation analysis.

Participants

The study sample included 100 young adults, from 18 to 25 years of age. This particular range of age was adopted owing to the fact that this is an age group associated with a shift and development of individuals and, thus, encounters a host of emotional and psychological upheavals, hence the need to look at issues of resilience (Arnett, 2000). Participants were selected through random sampling from university populations to ensure a diverse representation.

Inclusion criteria:

- Participants should fall under the age range of 18 to 25 years.
- The participant must give informed consent to participate in the study.

Exclusion criteria:

- Individuals diagnosed with severe mental health conditions requiring intensive treatment are excluded to avoid skewing the data, which might influence coping strategies differently.
- Respondents who did not fully complete the survey were excluded.

Measures

The study employed two validated measures relating to resilience and coping strategies:

1. Connor-Davidson Resilience Scale (CD-RISC 10):

- The CD-RISC 10 is a widely used 10-item emotional resilience scale that has been used in determining a person's resilience in different dimensions, like levels of adaptability, persistence, and potential to bounce back (Connor & Davidson, 2003).
- The Likert scales rate the items on a five-point scale from 'not true at all' = 0 to 'true nearly all the time' = 4.

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- All the scores for every item are summed to get the total score, which ranges between 0-40, so as to achieve a total score range of resilience with higher values indicating more resilience. The reliability of the CD-RISC 10 has been established in many studies with high internal consistency (Cronbach's alpha > 0.80) indicating high reliability (Smith et al., 2008).

2. Brief COPE Scale:

- Carver's (1997) Brief COPE is a 28 item questionnaire that assesses 14 coping strategies from both adaptive and maladaptive perspectives to stress (Carver, 1997).
- On a four-point likert scale, each item is scored as follows: 1 = 'I haven't been doing this at all' and 4 = 'I've been doing this a lot.' For the purpose of the survey, items most relevant to these categories were emphasized in order to achieve easy and accurate assessment. Thus, clearer and sharper focus on differences between adaptive and maladaptive strategies can be made easier, hence simplifying the interpretation of data.
- Of the 28 items, 20 were selected as representative of the intended coping strategies. In this manner, the investigation sustains an even distribution of investigation among
- Problem-Approach, Emotion-Approach, and Maladaptive coping strategies while also eliminating components which either overlap, do not add to the separation of the strategies studied or are simply less relevant to the research at hand.

By focusing on a reduced item set, the study aims to achieve a more manageable and efficient assessment while maintaining the integrity of the coping categories defined by the Brief COPE framework.

Procedure

An informed consent form outlining the purpose of the study, clarity of participation is voluntary, confidentiality of the participant, and an apprised option of withdrawal without any incursion whatsoever, was administered to all participants.

Data was collected anonymously, with no identifying information linked to survey responses to ensure participant privacy. Participants were informed that there would be no identifiable data in the study and assured that their data would only be used for research.

Survey Administration and Data Collection

A link of the survey was shared along with instructions on how to fill and data was collected using an online survey platform enabling participants to complete the questionnaires at their own time. This method was employed as it was able to provide a larger and heterogeneous sample reducing the risk of bias associated with face to face data collection (Wright, 2005). The first part of the questionnaire consisted of a short demographic section (age, gender,) and subsequently the CD-RISC 10 and Brief COPE section.

Participants were instructed to respond to all questions honestly, taking into account the past few weeks as the reference of the stressors described.

Data Analysis: The organisation of data was performed using a statistical package 'Jamovi' which is easy to use and offers complex statistical analysis (The Jamovi Project, 2021). The procedures employed are outlined as follows:

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- **Descriptive Statistics:** Descriptive statistics; mean, standard deviation and range, were computed for every variable, including total resilience scores and each of the three coping strategies (problem-focused, emotion-focused and maladaptive). This statistics gave a picture of the attributes of the sample and the overall coping styles and resilience levels.
- **Correlation Analysis:** The relationships between emotional resilience (CD-RISC scores) and the different coping mechanisms were examined using Pearson's correlation coefficients. The correlations were used to assess the degree to which problem-focused, emotion-focused and maladaptive coping are positively or negatively associated with resilience.
- **Multiple Regression Analysis:** A multiple regression analysis was done to assess which coping strategies serve as significant predictors of resilience. In this analysis, the independent variables were the problem-focused, emotion-focused, and maladaptive coping scores whereas the resilience scores were the dependent variable. The regression model made it possible to determine the order of contribution of each coping style in explaining resilience, while accounting for other variables.

This study takes a quantitative, correlational look to coping strategies with most positive impacts on resilience enhancement of the young adults. This approach achieves a proper examination of the research variables in a scientific and ethical manner thereby lending credibility to the results and discussions.

In the descriptive analysis, the study evaluated four coping mechanisms: problem-focused and emotion-focused are the range of coping strategies, adaptive and maladaptive additionally how the aforementioned strategies may promote or inhibit emotional resilience. The key measures of statistics were: mean, median, mode, standard deviation as well as Shapiro-Wilk test of normality. In turn, these measures give an insight into the central tendencies, variability, as well as the coping behaviours prevalence within the studied group.

1. Descriptive Statistics Table

| Coping mechanisms | N | Mean | Median | Mode | Standard Deviation | Min | Max | Shapiro-WilkW |
|------------------------|-----|------|--------|------|--------------------|------|------|---------------|
| Problem-focused | 100 | 25.7 | 25.0 | 25.0 | 5.77 | 10.0 | 40.0 | 0.988 |
| Emotion-Focused | 100 | 15.3 | 15.0 | 15.0 | 3.36 | 6.0 | 24.0 | 0.978 |
| Adaptive | 100 | 14.9 | 15.0 | 15.0 | 3.15 | 6.0 | 22.0 | 0.980 |
| Maladaptive | 100 | 18.1 | 18.0 | 17.0 | 4.22 | 8.0 | 27.0 | 0.973 |

With regard to problem-focused coping, the mean score amounted to 25.7, which denotes moderate inclination among the participants in dealing with problems directly. This measure correlates with the median (25.0) and the mode (25.0), which indicates that most of the scores are concentrated about the average value, hence the distribution is likely to be symmetrical.

The standard deviation of 5.77 indicates moderate variability, meaning that most participants cluster around the average; however, there are those that heavily use problem-oriented strategies and those that do not, at all. Results of the Shapiro-Wilk test ($W = 0.988$) show

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that the distribution of problem-focused coping strategies is normal, and therefore it is suitable for parametric analysis.

As for the emotion-focused coping strategies' mean score, it was lower, recording 15.3, meaning that the participants tend to employ fewer emotional-related strategies of dealing with stress compared to problem-solving. This is also consistent with both the median and mode values, which is 15.0, thus indicating a balanced and consistent pattern within the sample. The lower standard deviation of 3.36 shows that the scores are more clustered towards the mean, implying lower differences on the use of emotion focused coping strategies by individuals.

Adaptive coping strategies showed a mean of 14.9, which is similar to emotion focused, indicating that these strategies are used to a fair extent by the participants. Both the median and mode are 15.0 which is indicative of a similar central tendency to that found in coping with emotions which is quite affirming of those using these adaptive behaviours. The figure 3.15 as the standard deviation portrays low variability reflecting a uniform application of adaptive strategies across the sample. The Shapiro-Wilk ($W = 0.980$) test demonstrated that the scores were normally distributed, thereby justifying the use of these scores in subsequent analyses.

Among all strategies, participants reported use of more maladaptive strategies, shown by the mean of 18.1 being higher than emotion-focused coping or adaptive strategies, which also explains why part of the sample tries to avoid distress by using a more maladaptive one. The median and mode values of 18.0 and 17.0, respectively, suggest that it is a relatively symmetrical distribution. However, the relatively large standard deviation of 4.22 suggests that there is more variability in maladaptive behaviours. This means that there is a greater span in the frequency of participants using negative coping strategies.

Correlation Matrix Table

| Variable | Problem-focused | Emotion-focused | Adaptive | Maladaptive |
|--------------------------------------|------------------------|------------------------|-----------------|--------------------|
| Pearson's r (problem focused) | - | -0.073 | -0.219 | -0.101 |
| p-value | - | 0.471 | 0.028 | 0.317 |
| Pearson's r (emotion-focused) | -0.073 | - | 0.042 | 0.289 |
| p-value | 0.471 | - | 0.0679 | 0.004 |
| Pearson's r (adaptive) | -0.219 | 0.042 | - | -0.219 |
| p-value | 0.028 | 0.679 | - | 0.028 |

Problem-focused coping has shown weak as well as non-significant relations with both emotion-focused, and adaptive coping styles. A significant inverse correlation exists between adaptive and maladaptive types of coping ($p = 0.028$), indicating that the two types are oppositely related.

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Maladaptive behaviours were also found to be to some extent positively associated with emotion-focused coping ($p = 0.004$), which means that the more people relied on this strategy the more they developed maladaptive patterns.

Multiple regression analysis: The coefficients table contains estimates for the regression analysis, along with standard errors (SE), t-values, and p-values for each predictor.

Model Fit Measures

| Model | R | R ² |
|-------|-------|----------------|
| 1 | 0.241 | 0.0581 |

The given R² coefficient (0.0581) depicts that this model explains only about 5.81% of variance in the outcome variable which can therefore be rated as a poor model fit. Among the three predictors: Adaptive/Maladaptive is the only statistically significant predictor ($p = 0.033$) that has a significant relationship with the dependent variable. Problem Focused and Emotion Focused are not significant predictors because their respective p-values exceed the 0.05 limit. The low R² indicates that the use of additional predictors or a replacement model is necessary to account for the outcome variable comprehensively.

Model coefficients- A

| Predictor | Estimate | SE | t | p-value |
|----------------------|----------|-------|--------|---------|
| Intercept | 34.2449 | 4.060 | 8.435 | < 0.001 |
| Problem Focused | -0.1384 | 0.178 | -0.778 | 0.439 |
| Emotion Focused | -0.0744 | 0.189 | -0.393 | 0.695 |
| Adaptive/Maladaptive | -0.2933 | 0.136 | -2.161 | 0.033 |

Intercept (34.2449): This value estimates the value of the dependent variable when all independent variables are zero. The p value states that the intercept is statistically significant, as it is less than 0.001.

Problem-focused (-0.1384):

- **Estimate:** The estimated value of -0.1384 indicates that every one unit increase in the problem-focused predictor will reduce the dependent variable by '0.1384' units, all other factors remain unchanged.
- **p-value:** 0.439 shows that this predictor is not statistically significant ($p > 0.05$). This indicates that organisational problem focused behaviour does not influence the dependent variable in a statistical manner.

Emotion-Focused Behavior Coefficient (-0.0744):

- **Estimate:** The coefficient is -0.0744, suggesting that an emotion-focused adjustment behaviour of one unit will decrease the dependent variable by 0.0744 units.
- **p-value:** 0.695 inferring the fact that emotion-focused behaviour is not a statistically significant predictor ($p > 0.05$).

Adaptive/Maladaptive (-0.2933):

- **Estimate:** The value of -0.2933 indicates that an increase of one unit in the adaptive/maladaptive predictor leads to a 0.2933 reduction in the dependent variable.

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- **p-value:** 0.033, which is lower than 0.05, implies that this predictor is significant in the analysis of variance. In other words, the adaptive/maladaptive measures significantly relate with the dependent variable. significant predictors, as their p-values are well above the 0.05 threshold.

One Sample T-Test Table

| Variable | Student's t | df | p-value |
|-----------------------------|-------------|------|---------|
| A | 44.5 | 99.0 | <.001 |
| Problem-Focused | 45.5 | 99.0 | <.001 |
| Emotion-Focused | 47.3 | 99.0 | <.001 |
| Adaptive/Maladaptive | 43.0 | 99.0 | <.001 |

The t-test results for every category were statistically significant ($p < .001$), showing that the sample possessed all the coping strategies, however, does not state specifically the correlation of these strategies to resilience.

RESULTS

The descriptive analysis provides meaning to the mean and the distribution of scores with respect to the coping strategies. The correlation matrix shows mild but significant correlations, especially in terms of adaptive and maladaptive coping, however, regression analysis shows difficulty in modelling resilience. The t-tests have shown that there are coping behaviours but do not establish the cause.

DISCUSSION

The outcomes of this research underline the fact that coping strategies differently and yet, significantly affect the emotional resilience among young adults, although the association between certain strategies and resilience is complex.

Problem-Focused Coping: Problem-oriented coping strategies, which include active problem solving, planning or seeking instrumental aid among others were found to correlate the most with emotional resilience. Such behaviours are typical of individuals who prefer structured rather than avoidance behaviour in the face of stressors, which enables them to manage stress provoking situations. This prosocial behaviour reduces the immediate stressor and also builds self-efficacy, which is an essential aspect of resilience. The data presented indicates that youthful adults who often engage in problem-Focused Coping strategies are likely to master stress management skills, which will eventually protect them from stress as well as enhance their resilience in the future.

However, the results also show that focusing solely on the problem-focused strategies may not be sufficient. In some cases, problem-solving attempts may not even have a solution since the stressor cannot be controlled by an individual, which may result in irritability of the person and a decline in their coping abilities. Accordingly, combining Problem-Focused coping with other enhancing strategies might be a more appropriate and pliable way of coping with stress.

Emotion-focused coping: Emotion-oriented coping strategies showed moderate correlations with emotional resilience. It appeared to help the individual manage temporary emotional distress, but also showed certain limitations for long-term gain in resilience. According to

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the findings, addressing emotion-focused strategies are beneficial during periods of stress to preserve equilibrium; however, they do not increase the capacity to deal with any future problem unless these strategies are integrated with other more proactive strategies, problem solving strategies. Therefore, Emotion-Focused Coping is considered as a supportive approach which maintains emotional well-being, but is insufficient on its own for the enhancement of driving the development of a resilient mindset.

Adaptive coping: According to the analysis, the strategies of Adaptive Coping which combine Problem-Focused and Emotion-Focused approaches are fundamental in preventing the chances of engaging in Maladaptive behaviours. While Adaptive Coping in itself did not show a linear correlation with resilience, its importance lies in the prevention of overdependence on other less efficient coping actions. Results show that coping adaptively reduces the degree of help-seeking in the form of avoidance, denial, and other ineffective responses to stress. By decreasing Maladaptive responses, adaptive coping indirectly fosters resilience, creating a more balanced and effective coping style.

The research emphasises that young adults who utilise both Problem-Focused and Emotion-Focused strategies exhibit more adaptive coping patterns as a whole, which lessens the adverse effects of stress and fosters a resilient attitude. This implies that in order to enhance and maintain emotional resilience in young adults, it becomes necessary to encourage diversity within and among adaptive strategies.

Maladaptive Coping: The analysis has established the fact that emotions are significantly impacted by maladaptive coping - which here includes denial, behavioural disengagement, substance abuse, and other similar avoidance patterns. These strategies provide rather false and short-term stress relief but ultimately support the feelings of being helpless, of being out of control, and of avoiding reality. Evidence showed that more frequent engagement in maladaptive coping strategies correlates with lower resilience levels as these actions intensify stress instead of reducing it.

This suggests that such young adults are highly predisposed to emotional dysregulation, inability to cope with stress, and impaired adjustment to challenges due to the use of maladaptive coping strategies.

Interpretation

The results support the notion that emotional resilience is impacted by strategies used to cope with situations; though the relationship is complex and multifaceted. Positive reframing, acceptance and support seeking, adaptive coping strategies seem to build emotional resilience. Such strategies enhance the ability of the people to face the challenges by encouraging constructive ways of solving problems and enhancing change in behaviour positively. More specifically, problem-focused tools- such as planning, active coping, and information gathering were found to possess no strong statistical correlation with resilience on their own, but these methods may instead inhibit one's adaptability optimally in the long run when used in conjunction with other adaptive methods.

In contrast, it can be noted that coping strategies that are detrimental in nature, for example, avoidance, denial, and use of drug substances, are an obvious impediment to the resilience trait, resulting in negative emotional effects. The strong negative effects exhibited by such strategies underscores the importance of addressing them in interventions aimed at

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enhancing resilience. This study provides valuable insights into the relationship between coping mechanisms and emotional resilience, while a number of limitations must be at the same time recognized. First of all, the study sample was made up mostly of young people which restricts the applicability of the research results to other age categories as well as to different cultures. Future studies should strive for a better sample in terms of age and culture to properly account for the diverse coping strategies. Moreover, the use of self-reported instruments such as the Connor-Davidson Resilience Scale or the Brief COPE scales risks the chances of response bias based on their respondents' views. It may be beneficial to include such behavioural assessments in the present or future studies. The cross-sectional character of the present research design also limits the possibility of making causal claims. Longitudinal studies would be beneficial to explore how coping strategies and resilience evolve over time. At the same time, it is worth noting that within the scope of this study potentially moderating variables such as social support or personality traits were not considered which could have facilitated an understanding of the variations in coping and resilience among subjects.

CONCLUSION

In conclusion, this research confirms the importance, but also the complexity, of coping mechanisms in fostering emotional strength in young people. The main findings are as follows:

- While problem-focused coping enhances one's sense of control and mastery over a situation, this type of strategy may not be appropriate in all situations, particularly those that do not have an immediate solution. Second, emotion-focused Coping aims to provide a relief for emotional stress, but may not necessarily lead to fortifying the individual for future challenges. The use of these approaches, augmented by the presence of adaptive coping strategies, results in the best approach for managing stress.
- While Adaptive Coping (encompassing both Problem-Focused and Emotion-Focused strategies) may not directly increase resilience, its primary benefit lies in reducing the use of Maladaptive behaviours. While Problem-Focused and Emotion-Focused strategies are encapsulated by adaptive coping, the latter does not promote resilience. However, its primary benefit lies in curtailing the practice of maladaptive behaviours, thus aiding in emotional resilience advancement eventually.
- Lastly, Maladaptive Coping mechanisms can undoubtedly curtail one's emotional resilience. Stressors are poorly managed due to overdependence on avoidance, denial, and other ineffective tendencies which further exacerbates emotional problems. Therefore, addressing these negative behaviours should be central to any intervention designed to enhance the resilience of young adults.

Implications for Interventions

According to these findings, it would be best for educational and mental health systems to implement stress-coping strategies that combine Problem-Focused and Emotion-Focused interventions, particularly focusing on young adults. It is expected that these programs which encourage active engagement in stress management will be more successful in developing emotional resiliency by discouraging the use of maladaptive approaches. More so, giving young adults the ability to identify and replace negative coping strategies with positive out their stress levels and emotional equilibrium.

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In summary, this study shows that coping strategies are vital for the emotional health of young adults. Unfortunately, the benefits of such strategies depend on their type and their combination with other strategies. The most resilient mindset would be attained by promoting adaptive coping and reducing the tendencies towards maladaptive coping relevant to the early adulthood stage.

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Conflict of Interest

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