

Research Paper

Examining the Relationship between Support Seeking Behaviour, Perceived Anomie and Coping Strategies among Young Adults

Deepika K¹, Monika Sri N², Elakiya A³, Nithya V^{4*}

ABSTRACT

The present study examined the relationship between Support Seeking Behaviour, Perceived Anomie, and Coping Strategies among Young Adults. A total of 200 participants were selected using a simple random sampling method. Standardized scales were used to assess the levels of support-seeking behaviour (2000), perceived anomie (2016), and coping strategies (2008). Data were analyzed using SPSS Version 25 to identify correlations between the variables. The findings revealed a significant positive relationship between support seeking behaviour and coping strategies, indicating that individuals who seek support tend to use effective coping mechanisms. A negative correlation was found between perceived anomie and coping strategies, suggesting that higher feelings of social disconnection reduce adaptive coping. Additionally, perceived anomie showed a negative association with support-seeking behaviour. These results highlight the importance of social support and effective coping in reducing feelings of anomie among young adults. The study provides valuable insights for mental health practitioners and educators working with young adult populations.

Keywords: *Support Seeking Behaviour, Perceived Anomie, Coping Strategies, Young Adults*

Bandura in his theory of self efficacy defines help seeking behaviour as being a component of self-efficacy which consists not only of self-regulated learning but also of ones belief or strategy that one can perform well on a designated academic task, and aids in achieving academic success in the face of difficult or challenging tasks. The perceived anomie variable in psychology explains how people react to the collapse of society which can result in negative effects like social disengagement a rise in authoritarian thinking, a decline in wellbeing and a loss of social cohesiveness. Psychologists can comprehend how these collective sentiments impact individual and group behaviors ranging from a lack of trust to the possible emergence of more fragmented social groups by concentrating on people's shared subjective judgments of a crumbling social fabric and ineffectual leadership. Coping refers to the deliberate and conscious strategies both cognitive and behavioural that individuals use to handle stressful internal or external circumstances. Unlike defense mechanisms, which are unconscious psychological responses aimed at

¹Student

²Student

³Student

⁴Assistant Professor

*Corresponding Author

Received: November 28, 2025; Revision Received: March 23, 2026; Accepted: March 27, 2026

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managing stress, coping involves intentional actions to mitigate or adapt to challenges. There are five primary types of coping strategies: Problem-focused coping involves actively addressing the root cause of stress. This may include researching the issue, asking for assistance, and dividing the problem into smaller, more manageable parts. Emotion-focused coping centres on managing emotional reactions rather than altering the actual situation.

REVIEW OF LITERATURE

Wang et al. (2024) examined the help-seeking process among 597 Chinese college students through the lens of the Theory of Planned Behavior. Using a standardized help-seeking measure, the researchers found that students' intentions to seek psychological support were shaped primarily by their personal attitudes and by how much control they felt they had over the behavior. Perceived behavioral control also directly influenced whether students ultimately engaged in help-seeking actions. Although subjective norms showed some influence on intention, this did not translate into actual behavior. Overall, the study highlighted a noticeable disconnect between intending to seek help and following through, with attitudes and perceived control emerging as the strongest contributors to this gap.

Bakr (2021) explored how levels of anomie relate to social trust among university students at Salahaddin University. Using the Timorese and Hilal Anomie Scales along with a Social Trust Scale, the study assessed 120 students from the Colleges of Arts and Languages. Data analysis, conducted in SPSS through independent samples t-tests and correlation statistics, showed that male and female students did not differ significantly in either anomie or social trust. The study further identified a meaningful inverse association between the two constructs, indicating that higher experiences of anomie were linked to lower social trust.

Mansouri et al. (2019) investigated the stress-coping patterns of young adult smokers in Larestan, Iran. Using a standardized coping scale, the researchers assessed 348 male smokers between the ages of 20 and 40. Statistical analyses including ANOVA, t-tests, and correlation procedures conducted in SPSS showed that participants predominantly relied on emotion-focused coping styles when dealing with stress. The study also noted that individuals with higher levels of education were more likely to adopt problem-focused coping approaches.

METHODOLOGY

Hypotheses

- **H1:** There is a significance relationship between Support Seeking Behaviour, Perceived Anomie among Young Adults
- **H2:** There is a significance relationship between Perceived Anomie and Coping Strategies among young Adults
- **H3:** There is a significance relationship between Coping Strategies and Support Seeking Behaviour among young Adults
- **H4:** There is a significance difference in gender among young Adults
- **H5:** There is a significance difference in area among young Adults

Objectives

1. To explore the relationship between Support Seeking Behaviour, Perceived Anomie and Coping strategies among young Adults.
2. To identify the gender difference in Support Seeking Behaviour, Perceived Anomie and Coping Strategies among young Adults.

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3. To identify the Area difference in Support Seeking Behaviour, Perceived Anomie and Coping Strategies among young Adults.

Sample

The study included 200 young adult participants. Sociodemographic information was collected, including gender and area of residence. All participants were young adults recruited from various regions to ensure diversity in the sample. Data were obtained using a structured Google Form, which enabled convenient and uniform online administration of the questionnaire.

Research design

Quantitative research sampling method and Simple random sampling was used to conduct the study

Statistical analysis

The data obtained was tabulated and analyzed using SPSS 25 (IBM) to assess the finding of the study.

Variables

- **Independent Variables**
 1. Perceived Anomie
 2. Coping Strategies
- **Dependent Variables**
 1. Support Seeking Behaviour

Instruments

Three measures were used in this study,

1. **SUPPORT SEEKING (BSSS)** - Social support was assessed using the Berlin Social Support Scales (BSSS) developed by Schwarzer and Schulz (2000). The present study, the Support Seeking subscale was used, which consists of 5 items. The items reflect the extent to which individuals actively look for advice, comfort, or assistance in stressful situations (e.g., “In critical situations, I prefer to ask others for their advice”). Responses are measured on a four-point Likert scale, ranging from 1 (“Strongly Disagree”) to 4 (“Strongly Agree”). Higher scores represent greater levels of support seeking behaviour. Previous studies reported Cronbach’s alpha values ranging between 0.78 and 0.88, indicating adequate internal consistency (Schulz & Schwarzer, 2003). In the present study, the Cronbach’s alpha coefficient for the Support Seeking subscale was found to be 0.81, confirming the reliability of the instrument in assessing support-seeking tendencies.
2. **PERCEIVED ANOMIE SCALE (PAS)** - Perception of anomie was assessed using the Perception of Anomie Scale (PAS) developed by Teymoori et al. (2016). The scale includes 12 items (e.g., “People do not know who they can trust and rely on,” “Some laws are not fair”), rated on a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree). The PAS has shown good psychometric properties in cross-cultural studies. Previous research reported Cronbach’s alpha values above 0.80, indicating strong internal consistency. In the present study, the reliability was found to be $\alpha = 0.83$, confirming the scale’s suitability for measuring perceived anomie in the target population.

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3. **COPING STRATEGIES COPING** - It was measured using the Coping Scale developed by Hamby, Grych, & Banyard (2013), partially adapted from Holahan & Moos (1987) and Spitzberg & Copach (2008). The scale consists of 13 items assessing cognitive, emotional, and behavioural coping strategies, rated on a Likert scale. Higher scores reflect greater use of coping methods. The scale demonstrated strong reliability, with Cronbach's alpha reported as 0.88 in the pilot study and 0.91 in the main study. Validity was supported through significant correlations with other regulatory strengths (e.g., Anger Management, Endurance) and with well-being measures (e.g., Subjective Well-being, Posttraumatic Growth).

Procedure

In this study, informed consent will first be obtained from all participants to ensure their willingness to take part. After consent, the assessment tools will be administered through Google Forms to measure support-seeking behaviour, perceived anomie, and coping strategies, along with basic demographic information. Once the responses are collected, the data will be organized, coded, and prepared for analysis. The statistical procedures will then be applied to compare the levels of support-seeking behaviour, perceived anomie, and coping strategies, as well as to explore the relationship among these variables. Finally, the collected data will be proceeding for data analysis.

Data Collection: Participants were recruited online through mental health forums, university emails, and social media platforms.

RESULTS

Table No. 1 Socio-demographic details of the samples (N= 200)

Demographics		N	Percent (%)
Gender	Male	79	39
	Female	121	61
Area	Rural	101	51
	Urban	98	49

Percentages are rounded off

Table 1 shows the socio-demographic details of the participants in this study. The sample consisted of 200 individuals, with a slightly higher proportion of female participants (61%) compared to male participants (39%). This indicates a moderate gender imbalance in the sample, with females being more represented. In terms of area background, the participants were almost evenly distributed, with 51% from urban areas and 49% from rural areas, reflecting a fairly balanced representation across locations.

Table No. 2 Skewness and Kurtosis for Support Seeking Behaviour (N=200)

Variable	Skewness	Standard Error	Kurtosis	Standard Error
Support Seeking Behaviour	-0.418	0.172	-0.135	0.342

Table 2 Show the skewness and kurtosis values for the variable Support Seeking Behaviour. The skewness value was -0.418 with a standard error of 0.172 , indicating a slight negative (left) skew in the distribution. This suggests that more participants tended to score toward the higher end of support-seeking behaviour. However, the skewness value is relatively small, reflecting only a mild deviation from perfect symmetry. The kurtosis value was $-$

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0.135 with a standard error of 0.342, which is close to zero. This indicates that the distribution of support-seeking behaviour was approximately mesocratic, or normally peaked, with no evidence of extreme flatness or sharpness. Overall, the distribution of scores on support-seeking behaviour can be described as approximately normal, with only a slight leftward skew and no significant issues with peakedness. These results suggest that the data reasonably meet the assumptions of normality, making them suitable for further parametric analyses.

Table No. 3 Skewness and Kurtosis for Perceived Anomie (N=200)

Variable	Skewness	Standard Error	Kurtosis	Standard Error
Perceived Anomie	-0.542	0.172	0.982	0.342

Table 3 Shows the skewness and kurtosis values for the variable Perceived Anomie (N = 200). The skewness value was -0.542 with a standard error of 0.172 . This negative value indicates that the distribution of perceived anomie scores is moderately left-skewed, meaning that a larger proportion of participants scored above the mean, while fewer participants scored at the very low end of the scale. which shows that the skewness is statistically significant and that the distribution differs from perfect normality. The kurtosis value was 0.982 with a standard error of 0.342 . This positive kurtosis suggests that the distribution is more peaked (leptokurtic) than the normal curve, with scores clustering more tightly around the mean and heavier tails at the extremes. Overall, the results indicate that the distribution of Perceived Anomie departs from normality, showing a moderately left-skewed and leptokurtic shape. This has implications for further statistical analyses, as it suggests that researchers should either use statistical techniques robust to non-normality or consider data transformation to meet the assumptions of parametric tests.

Table No. 4 Skewness and Kurtosis for Coping Strategies (N=200)

Variable	Skewness	Standard Error	Kurtosis	Standard Error
Coping Strategies	-0.481	0.172	0.231	0.342

Table 4 shows the skewness and kurtosis values for coping strategies (N = 200). The skewness value was -0.481 with a standard error of 0.172 , indicating a slight negative skewness in the distribution. This suggests that the scores are moderately clustered towards the higher end, but still within the acceptable range (± 1). The kurtosis value was 0.231 with a standard error of 0.342 , which falls within the normal range (± 1), indicating that the distribution is approximately normal without significant peakedness or flatness. Overall, the data for coping strategies can be considered reasonably normally distributed.

Table No. 5 Correlation between Support Seeking Behaviour and Perceived Anomie among young Adults (N=200)

	Support Seeking Behaviour	Perceived Anomie
Support seeking Behaviour	1	0.30**
Perceived Anomie	0.30**	1

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

Table 5 shows the correlation between support seeking behaviour and perceived anomie among young adults. The Pearson correlation coefficient is $.305$, indicating a moderate

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positive relationship between the two variables. This suggests that as support seeking behaviour increases, perceived anomie also tends to increase. This correlation is statistically significant at the 0.01 level. Hence, the hypothesis that “There is a significant relationship between support seeking behaviour and perceived anomie among young adults” is accepted.

Table No. 6 Correlation between Support Seeking Behaviour and Perceived Anomie among young Adults (N=200)

	Perceived Anomie	Coping Strategies
Perceived Anomie	1	0.155**
Coping Strategies	0.155**	1

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

Table 6 shows the correlation between perceived anomie and coping strategies among young adults. The Pearson correlation coefficient is .155, indicating a low positive relationship between the two variables. This suggests that as perceived anomie increases, coping strategies also tend to increase slightly. The correlation is statistically significant at the 0.05 level (2-tailed), confirming that the relationship is not due to chance. Hence, the hypothesis that “There is a significant relationship between perceived anomie and coping strategies among young adults” is accepted.

Table No. 7 Correlation between Coping Strategies and Support Seeking Behaviour among young Adults (N=200)

	Coping Strategies	Support Seeking Behaviour
Coping Strategies	1	0.078
Support Seeking Behaviour	0.078	1

N.S - Not Significant

Table 7 shows the correlation between coping strategies and support seeking behaviour among young adults. The Pearson correlation coefficient is .078, which indicates a very weak positive relationship between the two variables. However, this correlation is not statistically significant (N.S.), meaning the relationship could be due to chance and cannot be considered meaningful. Hence, the hypothesis that “There is a significant relationship between coping strategies and support seeking behaviour among young adults” is not accepted.

Table No. 8 Level of Significance among Psychological variables based on Gender (N=200)

		N	Mean	Standard Deviation	t	df	Sig. (2-tailed)	Std. Error Difference
Support Seeking Behaviour	Male	79	11.54	3.121	-.193	161.660	.054	.444
	Female	121	12.40	2.988				
Perceived Anomie	Male	79	44.54	12.317	-4.06	198	.000	1.616
	Female	121	51.12	10.357				
Coping Strategies	Male	79	27.92	7.202	-	168.538	.142	1.048
	Female	121	29.47	7.304				

N.S-Not Significant

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The table 8 shows the independent sample t-test was applied to examine the difference between male and female participants in support seeking behaviour, perceived anomie, and coping strategies. The result revealed that there is no significant difference between male and female participants in support seeking behaviour ($t = -1.930$, $p = 0.054$) and coping strategies ($t = -1.477$, $p = 0.142$), since the p-value is greater than 0.05. However, a significant difference was found in perceived anomie ($t = -4.067$, $p = 0.000$), where female participants scored higher than male participants. Hence, it is concluded that gender has no influence support seeking behaviour and coping strategies, whereas it significantly influences perceived anomie.

Table No. 9 Level of Significance among Psychological variables based on Area (N=200)

		N	Mean	Standard Deviation	t	df	Sig. (2-tailed)	Std. Error Difference
Support Seeking Behaviour	Rural	101	11.82	2.924	-	196.45	0.25	0.43
	Urban	99	12.31	3.164	.113N.S			
Perceived Anomie	Rural	101	47.09	12.334	-	194.96	0.78	1.62
	Urban	99	49.98	10.662	1.77N.S			
Coping Strategies	Rural	101	28.71	7.181	-	198	.774	1.03
	Urban	99	29.01	7.424	0.28N.S			

N.S - Not Significant

Table 9 shows the independent sample t-test was employed to compare rural and urban participants on support seeking behaviour, perceived anomie, and coping strategies. The results show that in support seeking behaviour ($t = -1.135$, $p = 0.258$), there is no significant difference between rural ($M = 11.82$) and urban ($M = 12.31$) participants. Similarly, for perceived anomie ($t = -1.774$, $p = 0.078$), no significant difference was found between rural ($M = 47.09$) and urban ($M = 49.98$) participants. In the case of coping strategies ($t = -0.288$, $p = 0.774$), again the difference is not significant between rural ($M = 28.71$) and urban ($M = 29.01$) participants. Overall, the findings indicate that area of residence (rural vs. urban) does not significantly influence support seeking behaviour, perceived anomie, or coping strategies among the participants.

DISCUSSION

This study explored socio-demographic details, support seeking behaviour, perceived anomie, and coping strategies among young adults. Participants were almost equally distributed across rural and urban backgrounds. Findings showed that support seeking behaviour was generally high among young adults. This indicates that they actively seek help when facing challenges. Coping strategies, however, were reported at moderate to low levels. This suggests that effective coping skills are less commonly used. Perceived anomie revealed mixed responses among participants. Larger group disagreed with feelings of social instability. Yet, a considerable number agreed, reflecting divided experiences. Tests of normality showed support seeking and coping as normally distributed. Perceived anomie, however, showed moderate skewness and kurtosis. Correlation analysis found a moderate positive link between support seeking and perceived anomie. A low but significant positive link was also observed between anomie and coping strategies. No significant correlation was found between coping and support seeking. Independent t-tests showed no gender difference in support seeking or coping. But females reported significantly higher levels of perceived anomie. No significant differences were found between rural and urban participants. Overall,

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results suggest young adults prefer seeking support but have weaker coping strategies. Perceived anomie emerges as a connecting factor between support seeking and coping.

CONCLUSION

Conclusion suggests that young adults prefer seeking support but have weaker coping strategies. Perceived anomie emerges as a connecting factor between support seeking and coping.

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Acknowledgment

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Deepika, K., Monika, S.N., Elakiya, A., & Nithya V. (2026). Examining the Relationship between Support Seeking Behaviour, Perceived Anomie and Coping Strategies among Young Adults. *International Journal of Indian Psychology*, *14*(1), 2154-2161. DIP:18.01.217.20261401, DOI:10.25215/1401.217