

Research Paper

Parental Bonding, Equanimity, and Coping: A Correlational Study among Emerging Adulthood

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ABSTRACT

The study investigated the relation among parent bonding, equanimity and coping of the emerging adults. The study involved 152 subjects and they were assessed using the normal scales of parental bonding (care and overprotection), equanimity, and coping. Descriptors suggested that participants perceived parent bonding and coping at average level whereas equanimity had greater means in compare with others. Results of Shapiro-Wilk test showed that equanimity and coping were not normally distributed whereas parent bonding was normally distributed. Thus, Spearman's rank-order correlation was used to test the extent of association among parent bonding, equanimity, and coping. It found that no statistically significant correlation between parent bonding and equanimity, coping and means that the perceptions of the quality of parent bonds was not linked with equanimity and coping abilities in this group of subjects. It was implied from this research that there could be a complex relationship between a first encounter with a parent-child attachment and their successful adjustment in young adulthood, and this relationship could be moderated or mediated by other variables. Discussion was included about implications of the study for counselling, as well as implications for future research.

Keywords: *Parent Bonding, Equanimity, Coping, Emerging Adults, Spearman Correlation*

This research focuses on an examination of three crucial constructs of parental bonding, equanimity, and coping skills and the independence thereof in the emerging adulthood. The idea of context of culture must be emphasized since the mediating factor between that relationship is Family and in Indian context relationships between the members of family become central and parents' protectiveness generally in the form of ever guiding influence and it results in perceived high overprotectiveness (which as we already know is often mistaken for parental care, not authoritative). The family experiences of parenting at this time frame have been claimed to provide the emotional blueprint, but increasingly several pieces of evidence are showing emotional and coping functioning to be unrelated to early caregiving. Coping is defined as depending on individuals' perceptions toward stressors, emotional resources in Transactional Model of Stress and Coping by Lazarus & Folkman (Goh et al., 2010), as with secure parental relationship, and established

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emotional regulation (like equanimity), one is expected to have coping that is adaptive according to the research. Equanimity can also be argued to be as crucial a psychological construct (Roemer et al., 2015) as its translated meanings "calmness of the mind" and "impartiality toward internal experiences" can show, representing the ability to achieve psychological balance in spite of external stimuli and context. equanimity is aligned with current psychology trends focused on non-judgmental flexible awareness of feelings and it predicts more social success and higher resiliency and fewer negative affect (Wongpakaran et al., 2021) With equanimity the person is feelings, but be detached and aware of them while keeping in control.

After the transition stage to adulthood one can essentially be considered undergoing the most fundamental and significant stage in development. This phase has been described as emerging adulthood (Arnett, 2000) and can span roughly from 18 to 25 years of age, and it can be characterized by transitions between identity and role statuses, by fluctuation in life choices, by a search for self-identity, and by a relatively loose self-rule; most of the time they experience a gradual move away from dependence from parents towards independence in the emotional, occupational, and social domains. As emerging adults navigate through the complex issues in the academic, relational, and career domains their capacity to handle with effective coping skills and emotional stability (equanimity) contributes to their overall well-being.

Attachment is defined according to Attachment theory (Bretherton, 1992) as the emotional bond that develops between a parent and a child and which can be regarded as the primary attachment figure, and Parental Bonding Instrument (PBI) developed by Parker in (1979) which operationalizes parental relationships on the dimensions of Care (warmth, affection, and empathy from the parent) and Overprotection (parental control and interference in the child's autonomy), and secure parental bonding characterized by the combination of high care and low overprotection is related to appropriate emotional regulation, psychological resilience, and adaptive coping patterns across the lifespan; Conversely, affectionless control characterized by low care and overprotection (very tight control, intrusiveness) leads to various anxiety disorders, dependencies, maladaptive responses to stressors etc (Enns et al., 2000).

Having both control and love is reassuring, and often produces a bond of dependence that may eventually be replaced by autonomy; therefore, maturation is a kind of internalization or inner growth. While the emotional connection with parents lays the foundation of a person's early emotional system, their ability to maintain balance and resilience becomes one's own psychological resource in adulthood; The present research, by evaluating the degree of autonomy of equanimity and coping mechanisms in parental bonding, is a step toward understanding the inter-relations of developmental autonomy and emotional functioning during the period of transition to adulthood, which indicates that resilience and inner harmony are not simply products of an individual's initial parenting experience, but are developed through ongoing learning and the process of self-regulation, mindfulness and experience; It suggests that for emerging adults an internal emotional system is a very critical resource for development toward autonomous functioning while also being influenced by their family of origin; this implies that psychological interventions will do best to focus on individual development through continuous strengthening of personal emotional resources, mindfulness, and self-efficacy rather than an exclusive reliance on parenting models. Considering how strong familial influences still are during this stage in

India can enable a deeper understanding toward promoting psychological well-being among emerging adults undergoing the transition to independence.

There is convergence from several perspectives: Attachment (Bretherton, 1992) has highlighted the role of secure parental bonding for the development of internal working models impacting emotional regulation and relational styles. The Transactional Model of Stress and Coping by Lazarus & Folkman highlight the impact of appraisals and coping resources on outcomes, and suggests that parenting may impact this indirectly through shaping of personality and emotions. Mindfulness and Acceptance-Based models (Zhang et al., 2018) conceptualize equanimity as a form of mindful and non-judgmental interaction with experience, contributing to emotional regulation and flexible responding. Self-Determination Theory (Deci & Ryan, 2000) emphasizes the role of autonomy and competence for psychological health, and points to an increase in the relative importance of autonomy from adolescence to adulthood. Developmental Autonomy Theory (Steinberg & Silverberg, 1986) addresses the movement from reliance on parents for emotional regulation and self-control to personal agency. These frameworks show that while parental bond provides the foundation, it is the individual's emerging competence of self-regulation and emotional control through coping and equanimity, that develops and becomes an achievement, in process of autonomy.

Objectives

- To evaluate the perceived level of parental bonding (care and overprotection) in an emerging adult population.
- To assess the levels of equanimity and coping methods in an emerging adult sample.
- To use parental bonding as a predictor variable for equanimity and coping.
- To determine whether mental balance and coping during the period of emerging adulthood are developmentally independent of parental bonding.

Hypothesis

- **H1:** There will not be any significant correlation between parental bonding, equanimity among coping among emerging adults.
- **H2:** There will be significant correlation between parental bonding, equanimity and coping among emerging adults.
- **H3:** Equanimity and coping will be independent from parental bonding.

METHOD

Sampling Technique

The participants were chosen by a non-probability purposive sampling method that was used to select those who met the inclusion criteria. The method was appropriate for the exploratory nature of the research, which concentrated on the developmental period of emerging adulthood individuals. Inclusion Criteria People between the ages of 18 and 25 years. Students who are currently enrolled in a higher education institution (college or university). Willingness to participate and give informed consent. Exclusion Criteria Persons under 18 and over 25 years of age. Individuals with psychiatric diagnoses and those receiving clinical treatment for emotional disorders. Questionnaire completion that is less than half done or inconsistent.

Participants

The sample included 152 emerging adults aged 18 to 25 years living in the urban and semi-urban areas of Bangalore, India. The participants were mainly college students and postgraduates from various academic disciplines.

Measures / Instrumentation

The variables of interest were measured using three psychological standard instruments. Parental Bonding Instrument (PBI; Parker et al., 1979), The PBI evaluates the perceived quality of the parental bond during the first sixteen years of life. The instrument is composed of 12 items, which are divided into two dimensions: Care (6 items): Measured the aspects of love, affection, and empathy (e.g., “Spoke to me in a warm and friendly voice”). Overprotection (6 items): Control and intrusion items are measured (e.g., “Tried to control everything I did”). Every item is rated on a 4-point Likert scale that ranges from 0 (“Very unlike”) to 3 (“Very like”). High Care scores are indicative of parental behaviour that is loving, while high Overprotection scores indicate a parent's controlling tendencies. For this research, the instrument's reliability was at a good level: Cronbach's $\alpha = .87$ for Care and $.85$ for Overprotection. The measure has been cross-culturally validated for India, among others. Equanimity Scale (Desbordes et al., 2015), This is a self-reporting instrument, and it evaluates one's ability to be calm, balanced, and non-reactive during stressful or emotionally charged situations. The instrument consists of 16 statements that are rated on a 5-point Likert scale (1 = Strongly Disagree, 5 = Strongly Agree). High scores indicate that the person has high emotional stability and is non-reactive. The scale showed high reliability in this sample ($\alpha = .90$), and it is consistent with previous research on mindfulness-based and non-mindfulness populations.

Brief COPE Inventory (Carver, 1997), The Brief COPE identifies the various ways the individual deals with a situation through 12 items, which depict both the positive (e.g., active coping, planning, and positive reframing) and the negative (e.g., denial, self-blame) sides of coping strategies. The answers are given on a 4-point Likert scale, which varies from 1 “I haven't been doing this at all” to 4 “I've been doing this a lot”. In the present study, the instrument revealed good internal consistency ($\alpha = .88$). The scores were calculated to find out the total coping index value.

Procedure

The data were obtained through an online survey made with Google Forms. The participants were sent the link of the questionnaire via email and social media platforms. The form contained:

1. An informed consent statement.
2. Demographic data (age, gender, residence type, education).
3. The three standardised scales (PBI, Equanimity Scale, and Brief COPE).
4. The average time taken to complete the questionnaire was around 20 minutes. The confidentiality and anonymity of the respondents were rigorously upheld. The respondents were notified that they have the right to leave the study at any time without getting into trouble. The data were saved and structured with the help of Jamovi software for further statistical analysis.

Data Analysis

Descriptive Statistics

The researchers computed descriptive statistics such as mean, standard deviation, minimum, and maximum values for each variable (Parental Care, Overprotection, Equanimity, and

Coping). The findings illustrated that Overprotection ($M = 15.90$) was greater than Care ($M = 13.20$), thus showing that the perception of overprotective parenting had a higher weight. The scores for Equanimity and Coping were indicative of moderate emotional balance and adaptive responses of the participants.

Inferential Statistics

The study made use of Spearman's rank-order correlation to test the relationships among the three variables, since the data were not normally distributed. There were no statistically significant correlations identified, as shown by the results:

Parental Bonding and Equanimity, Parental Bonding and Coping, Equanimity and Coping
From this, it can be inferred that equanimity and coping are two separate emotional constructs that may not necessarily result from early parental bonding in emerging adulthood.

RESULTS

Table 1 Descriptive Statistics for Parent Bonding, Equanimity, and Coping

Variable	M	Mdn	SD	Min	Max
Parent Bonding	29.10	29.00	4.15	17	40
Equanimity	50.00	49.00	6.89	29	72
Coping	32.90	33.00	4.76	16	48

Note. $N = 152$. M = Mean; Mdn = Median; SD = Standard Deviation; Min = Minimum; Max = Maximum.

Table 1 shows the Parent bonding, equanimity, and coping descriptive data of 152 participants. The average score for parent bonding was 29.10 ($SD = 4.15$), which means that the level of parental bonding perceived in the sample was moderately high. The variable equanimity exhibited the highest average score ($M = 50.00$, $SD = 6.89$), inferring that the respondents mostly reported a state of balance and calm of the mind. The average score for coping was 32.90 ($SD = 4.76$), which is indicative of the middle level of coping capacity.

Table 2 Descriptive Statistics for Dimensions of Parent Bonding

	<i>M</i>	<i>Mdn</i>	<i>SD</i>	<i>Min</i>	<i>Max</i>
Care	13.20	13.00	4.00	6	24
Overprotection	15.90	16.00	3.93	6	24

Note. $N = 152$. M = Mean; Mdn = Median; SD = Standard Deviation; Min = Minimum; Max = Maximum.

Table 2 presents the descriptive statistics describing equally the two measurements of parent bonding care and overprotection of 152 participants. The average value for care was 13.20 ($SD = 4.00$), which indicates that participants, as an average, perceived parental care to be of a moderate level. The average value for overprotection was a bit higher ($M = 15.90$, $SD = 3.93$), which indicates that the participants had experienced relatively more parental control or protectiveness than the rest. The score ranges (6 to 24 for both dimensions) show sufficient variability.

Table 3 Tests of Normality for Total Parent Bonding, Total Equanimity, and Total Coping (N = 152)

	W	p
Parent Bonding	0.990	.378
Equanimity	0.967	< .001
Coping	0.964	< .001

Note. Results from the Shapiro–Wilk test. $p < .05$ indicates significant deviation from normality.

Table 3 displays the outcome of the Shapiro–Wilk test that was used to check the distribution normality. The test for total parent bonding ($W = 0.990$, $p = .378$) revealed that it was a normally distributed variable since the p value was greater than .05. On the other hand, the total equanimity ($W = 0.967$, $p < .001$) and total coping ($W = 0.964$, $p < .001$) both changed significantly from normality, which means that their distributions were non-normal. Accordingly, these results allowed for the implementation of nonparametric methods, such as Spearman's rank-order correlation, to be used in further analyses involving these variables.

Table 4 Spearman's Rank-Order Correlation Matrix for Total Equanimity, Total Coping, and Total Parent Bonding (N = 152)

	1	2	3
Equanimity	—	−0.053	0.001
Coping		—	−0.109
Parent Bonding			—

Note. Values represent Spearman's rho (ρ). p values were 0.513 (1–2), 0.991 (1–3), and 0.182 (2–3). $N = 152$. $p < .05$, ** $p < .01$, *** $p < .001$.

Table 5 shows the results of a Spearman's rank-order correlation analysis that was carried out to investigate the relationships between variables. No statistically significant correlations were found between these variables according to the results. Total equanimity was not significantly correlated with total coping ($\rho = -0.053$, $p = 0.513$) or total parent bonding ($\rho = 0.001$, $p = 0.991$). Also, there was no significant relationship between total coping and total parent bonding ($\rho = -0.109$, $p = 0.182$).

DISCUSSION

This research was designed to illuminate the interplay between parental bonding, the capacity for equanimity, and the use of coping strategies in young adults, specifically those in the age range of 18 to 25 years. The original model hypothesised that parental bonding would have a strong impact on coping, and that equanimity would be the mediator of this relationship. However, the analysis did not reveal any significant relationships between the three variables. In effect, it suggests that in their sample, parental bonding was not an influencing factor for equanimity and coping, and equanimity was also not significantly associated with coping. Descriptive Interpretation of Parental Bonding gave more insight into the participants views of their parental relationships. The average score for Overprotection ($M = 15.90$, $SD = 3.93$) was higher than that for Care ($M = 13.20$, $SD = 4.00$), which shows that respondents overall considered their parents to be more controlling and protective than loving or even emotionally supportive. The dominance of an affectionate-constraint parenting style, which characterises the combination of warmth and high control, is evident from this pattern.

These patterns are in line with the cultural norms of Indian collectivist societies, where, according to Arnett (2000), parental involvement, decision-making, and monitoring are generally seen as ways of showing care and not as giving restrictions. So, the relatively high overprotection scores may be indicative of protective supervision rather than psychological overcontrol. Even if the style influences autonomy during the teenage years, its effect on coping and emotional regulation may fade when the individuals become adults and become more independent. Where significant associations are missing, as is the case here, it may be that equanimity and coping in a sense of undergoing emerging adulthood are two separate internal worlds of a person, which cannot be traced back to parental bonding or to early parental figures. The well-known research of Bowlby (1982), Parker et al. (1979), and Yap & Jorm (2015) confirm the effect of attachment and parental bonding as central factors for the development of emotional regulation and coping; however, the current paper claims that this influence might become weaker once the transition to adulthood has been made. This finding is in line with Arnett's (2000) emerging adulthood model, which, among other facets, focuses on identity and autonomy from parents. During this phase, individuals resort more to their own beliefs, introspection, and lived experience as means of emotional regulation and coping with stressors (Compas et al., 2001). Consequently, the present results may signify a developmental transition from external parental-dependent regulation in childhood to self-regulation and problem-solving in adulthood (Waters et al., 2009).

Furthermore, several empirical works agree the argument that the concepts of equanimity and coping are not fixed traits that are predetermined by early caregiving but rather are flexible, experience-driven phenomena. As an example, Mann and Walker (2021) revealed that equanimity served as a mediator in the relation between perceived isolation and distress, and was not influenced by external social factors. Also, Wongpakaran et al. (2021) found that equanimity had a reduced effect on perceived stress and depressive symptoms, irrespective of personality vulnerabilities. These results lead to the conclusion that equanimity is an emotional harmony that one learns to develop within oneself, a characteristic strengthened with one's maturity, mindfulness, and adopting another person's view (MacAulay et al., 2024). Therefore, the absence of a significant connection between parental bonding and equanimity in the current study fits well with the argument that equanimity roots in the internal cognitive and affective regulation processes rather than in parental patterns. On a similar note, coping mechanisms are also a product of cognitive development and life experiences. The research conducted by (Carver et al., 1989) paved the way for the idea that coping styles are dependent on age and cognitive ability, thus becoming more flexible and cognitively mediated with adulthood. Thus, the young adults may present coping strategies that are situationally adaptive rather than resulting from early attachment experiences. A non-significant correlation between parental bonding and coping in this sample could be an indication of the adaptive diversification concept, where coping is impacted more by situational factors, personality traits, or cultural learning than by parental care or overprotection. This supports the view that coping in emerging adulthood reflects adaptive flexibility rather than developmental determinism (Guadalupe & DeShong, 2025).

These results are an extension of attachment and developmental theories, as they propose that the effect of parental bonding in early childhood might fade away with the increase of developmental autonomy. Although attachment theory (Bowlby, 1988) is based on the idea of long-lasting internal working models created in the early relationships, the most recent studies have one of the adult attachment patterns is changed through later relational and cognitive experiences (Fraley, 2019). Hence, the development of autonomy, identity, and self-efficacy during emerging adulthood may have an impact on the parental bond influence

through the mediums of coping and emotional balance. According to self-determination theory (Deci & Ryan, 2000), the study's results point to the fact that autonomy and competence, two of the essential psychological needs, would be the main contributors to the well-being and coping capabilities in adulthood, rather than relatedness to parents. This developmental process reflects the shift that has taken place towards internal regulation and psychological independence, which is typical for adult adaptation.

CONCLUSION

The past psychological history characterised by parental care and protection is still there, but may not directly influence the way young adults regulate their emotions or cope with the stresses of life. This is in line with the concept of developmental autonomy, where equanimity and coping are seen as self-derived emotional abilities and not as direct consequences of early parental relationships. The findings are consistent with the core of Self-Determination Theory (Deci & Ryan, 2000) that identifies autonomy, competence, and self-regulation as the main features of psychological growth. Moreover, the results are in line with Arnett's (2000) model of emerging adulthood, which characterises this period as a transition that is mainly about gaining independence and forming one's identity. From this perspective, the lack of correlation should not be interpreted as a lack of relationship, but rather as a developmental shift in emotional reliance from external (parental) to internal (self-regulatory) sources.

Limitations

The study subjects were mostly university students from a metropolitan Indian setting, which might cause the results to be less applicable to different cultural or rural populations. The information was obtained only once, and thus no developmental changes with causality can be inferred. The use of self-report questionnaires exclusively might have caused the presence of social desirability or recall bias. The authors concentrated on three constructs while leaving out other influential factors like the personality traits, life experiences, or peer support. Nonparametric tests that were used could have had limited sensitivity to detect even slight associations between the variables.

REFERENCES

- Arnett, J. (2000). Emerging Adulthood: A Theory of Development from the Late Teens Through the Twenties. *American Psychologist*, 55(5), 469–480.
- Bretherton, I. (1992). The origins of attachment theory: John Bowlby and Mary Ainsworth. *Developmental Psychology*, 28(5), 759–775. <https://doi.org/10.1037/0012-1649.28.5.759>
- Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56(2), 267–283. <https://doi.org/10.1037/0022-3514.56.2.267>
- Deci, E. L., & Ryan, R. M. (2000). The “What” and “Why” of goal pursuits: human needs and the Self-Determination of behavior. *Psychological Inquiry*, 11(4), 227–268. https://doi.org/10.1207/s15327965pli1104_01
- Fraley, R. C. (2019). Attachment in Adulthood: recent developments, emerging debates, and future directions. *Annual Review of Psychology*, 70(1), 401–422. <https://doi.org/10.1146/annurev-psych-010418-102813>
- Goh, Y. W., Sawang, S., & Oei, T. P. (2010). The Revised Transactional Model (RTM) of Occupational Stress and Coping: An Improved Process Approach. *The Australian and New Zealand Journal of Organisational Psychology*, 3, 13–20. <https://doi.org/10.1375/ajop.3.1.13>

- Guadalupe, C., & DeShong, H. L. (2025). Personality and coping: A systematic review of recent literature. *Personality and Individual Differences*, 239, 113119. <https://doi.org/10.1016/j.paid.2025.113119>
- MacAulay, R. K., Tallman, M., Maynard, T. R., & Timblin, H. (2024). Coping patterns associations with cognitive function in older adults. *Journal of the International Neuropsychological Society*, 30(8), 738–745. <https://doi.org/10.1017/s1355617724000377>
- Pongpitpitak, N., Wongpakaran, N., Wongpakaran, T., & Nuansri, W. (2022). Buffering Effect of Perseverance and Meditation on Depression among Medical Students Experiencing Negative Family Climate. *Healthcare*, 10(10), 1895. <https://doi.org/10.3390/healthcare10101895>
- Reynders, A., Kerkhof, A. J., Molenberghs, G., & Van Audenhove, C. (2015). Help-seeking, stigma and attitudes of people with and without a suicidal past. A comparison between a low and a high suicide rate country. *Journal of Affective Disorders*, 178, 5–11. <https://doi.org/10.1016/j.jad.2015.02.013>
- Roemer, L., Williston, S. K., & Rollins, L. G. (2015). Mindfulness and emotion regulation. *Current Opinion in Psychology*, 3, 52–57. <https://doi.org/10.1016/j.copsyc.2015.02.006>
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68–78. <https://doi.org/10.1037/0003-066x.55.1.68>
- Sroufe, L. A. (2005). Attachment and development: A prospective, longitudinal study from birth to adulthood. *Attachment & Human Development*, 7(4), 349–367. <https://doi.org/10.1080/14616730500365928>
- Waters, S. F., Virmani, E. A., Thompson, R. A., Meyer, S., Raikes, H. A., & Jochem, R. (2009). Emotion regulation and attachment: Unpacking two constructs and their association. *Journal of Psychopathology and Behavioral Assessment*, 32(1), 37–47. <https://doi.org/10.1007/s10862-009-9163-z>
- Wongpakaran, N., Wongpakaran, T., Wedding, D., Mirnics, Z., & Kövi, Z. (2021). Role of equanimity on the mediation model of neuroticism, perceived stress and depressive symptoms. *Healthcare*, 9(10), 1300. <https://doi.org/10.3390/healthcare9101300>
- Zhang, C., Leeming, E., Smith, P., Chung, P., Hagger, M. S., & Hayes, S. C. (2018). Acceptance and Commitment Therapy for Health Behavior Change: A Contextually-Driven Approach. *Frontiers in Psychology*, 8, 2350. <https://doi.org/10.3389/fpsyg.2017.02350>

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Conflict of Interest

The author(s) declared no conflict of interest.

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