



Difference between the Coping Mechanisms of Psychology and Non-Psychology Students

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ABSTRACT

This study investigated the differences in coping mechanisms between psychology and non-psychology students, as well as between male and female students, using the Brief COPE Inventory. Data were collected from 200 students (100 psychology and 100 non-psychology) aged 18-25, assessing problem-focused, emotion-focused, and avoidant-focused coping strategies. Results revealed no significant differences in problem-focused coping ($t = 0.501$, $p > .05$) or emotion-focused coping ($t = 0.116$, $p > .05$) between psychology ($M = 21.32$, $M = 28.83$) and non-psychology students ($M = 21.66$, $M = 28.92$). A trend was observed in avoidant-focused coping, where non-psychology students scored higher ($M = 16.01$) than psychology students ($M = 15.01$), though this was not statistically significant ($t = 1.812$, $p = .071$). Gender differences were also non-significant across all coping styles, with no significant differences

found in problem-focused ($t = 0.442, p > .05$), emotion-focused ($t = 0.052, p > .05$), or avoidant-focused coping ($t = 1.740, p = .083$). These findings suggest that neither academic background nor gender significantly influences coping mechanisms, supporting the need for universal mental health interventions for students. Further research is recommended to explore the observed trends in avoidant coping.

Key Words: *Coping Mechanisms, Psychology, Non-psychology, Problem-focused, Emotion-focused, Avoidant-focused coping.*

INTRODUCTION

Coping is a crucial psychological process that individuals employ to manage stress and navigate life's challenges, involving a variety of behavioural and cognitive techniques aimed at reducing negative emotions and maintaining mental well-being. According to the American Psychological Association (2023), coping strategies can be categorized into two main types: adaptive and maladaptive. Adaptive coping strategies, such as problem-solving, seeking social support, engaging in physical activity, and practicing mindfulness, are instrumental in promoting long-term health and resilience. For instance, problem-solving involves identifying specific stressors and developing actionable solutions, while seeking social support entails reaching out to friends or family for assistance during difficult times. Engaging in physical activity can enhance mood and build resilience, while mindfulness techniques, including meditation and deep breathing, improve emotional regulation and overall psychological health. On the other hand, maladaptive coping strategies, which may provide temporary relief but can worsen stress in the long run, include avoidance, denial, substance abuse, and self-harm. Avoidance leads individuals to ignore stressors, resulting in unresolved issues, while denial hinders effective coping by preventing acceptance of reality. Substance abuse may temporarily

escape stress but risks addiction and further emotional turmoil, and self-harm is a troubling response to emotional distress that can exacerbate mental health issues.

The current study aimed to explore the differences in coping strategies between psychology students and non-psychology students, offering insights into how specialized psychology education influences coping mechanisms and overall mental health. By understanding these differences, the research can highlight effective coping techniques that contributes to resilience and well-being, ultimately aiding educational institutions in better supporting students through tailored interventions based on their unique coping styles. This investigation not only sheds light on the impact of academic focus on mental health but also emphasizes the importance of equipping students with adaptive coping skills to thrive in their personal and academic lives. The choice of coping strategies is influenced by various factors, including personality traits, cultural background, and previous experiences. For instance, individuals with trauma histories may resort to maladaptive strategies due to learned behaviours.

The existing literature highlights various coping mechanisms across different student populations, focusing on factors such as field of study, cultural background, and the impacts of COVID-19. Studies show that students benefit from a range of adaptive strategies, including resilience-building, cognitive coping, and emotional regulation, with approaches tailored to individual needs proving most effective. Research by Li (2024) and Jiang et al. (2024) emphasizes cognitive and psychological interventions that enhance mental well-being and academic performance. Conversely, studies on healthcare and social work students (Powell & Mayfield, 2024; Maresca et al., 2022) underscore the high burnout rates and reliance on both problem-focused and emotional coping strategies. The impact of resilience is seen across various studies (Sari & Komarudin, 2024; Emerson et al., 2022), with findings suggesting it mitigates stress and promotes overall mental health. Other research highlights the importance

of adaptive coping mechanisms like self-care, social support, and physical activity (Graves et al., 2021; Kim & McKenzie, 2014) while cautioning against maladaptive strategies such as avoidance and substance use, particularly under high-stress conditions. This study builds on these insights by examining the coping strategies of psychology versus non-psychology students, contributing to understanding the role of specialized education on coping efficacy.

METHOD

The research employed a comparative cross-sectional design to examine the coping mechanisms utilized by psychology and non-psychology students when faced with stress. By focusing on these distinct groups, the study sought to determine if psychology students, who may possess greater theoretical knowledge about mental health, employ different or potentially more adaptive coping strategies than their peers. The study's objective was to fill a research gap by identifying how specific psychological training influences the development and implementation of coping mechanisms. Such findings could offer valuable insights for tailoring mental health services and support systems in educational settings, helping institutions better understand and respond to the unique stressors each group faces.

The sample for this study comprised 200 students aged 18-25, selected from the Delhi NCR region. To ensure the integrity of the comparison, participants were evenly divided between psychology and non-psychology students, with an emphasis on balancing gender representation within each group. Students with prior exposure to psychological education outside their current academic program were excluded to maintain the distinctness between psychology and non-psychology participants. Additional eligibility criteria included living in the Delhi NCR region, meeting the age requirements, and possessing the cognitive ability to understand and consent to the study. Individuals with cognitive impairments that could hinder

comprehension of the study's requirements were excluded. Participants were recruited using social media platforms and by engaging with college campuses to encourage participation from a broad spectrum of backgrounds.

Data collection was done through both online and offline modes to enhance accessibility and participation. An online Google Form was created and distributed, while offline data collection was facilitated through in-person meetings on campuses. All participants received a thorough briefing on the study's purpose, procedures, and the confidentiality measures in place to protect their data. Informed consent was secured from each participant before proceeding, and demographic details, including age, gender, and field of study, were recorded to aid in the analysis.

The primary instrument used was the Brief COPE inventory, a widely recognized self-reporting measure developed by Carver (1997) to assess various coping strategies. This tool comprises 28 items divided into 14 two-item subscales, each representing different coping styles, such as self-distraction, active coping, denial, and humour, among others. Participants rate each item on a Likert scale, with total scores ranging from 2 (minimum) to 8 (maximum) for each subscale, providing a clear profile of an individual's preferred coping strategies. Higher scores indicate stronger engagement in specific coping mechanisms, with no reverse scoring required. The instrument has demonstrated reliable psychometric properties, with internal consistency (alpha) coefficients ranging from 0.25 to 1.00 and intraclass correlation coefficients (ICC) between 0.05 and 1.00, supporting its use in diverse populations.

Data were statistically analysed using the Statistical Package for Social Sciences (SPSS) version 16.0. Descriptive statistics, including mean and standard deviation, provided an initial understanding of the central tendencies and variability within each group. For inferential analysis, t-tests were conducted to compare the coping strategies across psychology and non-

psychology students, as well as between male and female participants, as specified in the study's hypotheses. This approach aimed to identify any statistically significant differences in coping styles between the two groups and assess whether field of study and gender influenced coping mechanisms. The results from this analysis will offer insights into how coping strategies vary between students with psychological training and those without, as well as between genders, potentially guiding future interventions tailored to the unique needs of student populations.

RESULTS

This study assessed coping styles among psychology and non-psychology students, as well as gender differences, involving 200 undergraduate participants aged 18-25. The analysis compared three coping styles: problem-focused coping, emotion-focused coping, and avoidant-focused coping (see Table 1).

Differences Between Variables

	Stream	N	Mean	Std. Deviation	t-test
Problem Focused Coping	Non-psychology	100	21.66	4.79	.501
	Psychology	100	21.32	4.80	
Emotion Focused Coping	Non-psychology	100	28.92	5.84	.116
	Psychology	100	28.83	5.06	
Avoidant Focused Coping	Non-psychology	100	16.01	3.96	1.812
	Psychology	100	15.01	3.83	

The **Table 1**, The data compares three different coping styles—problem-focused coping, emotion-focused coping, and avoidant-focused coping—between two groups: psychology and non-psychology students, each with 100 participants

Problem-Focused Coping: The mean score for problem-focused coping was slightly higher for non-psychology students ($M = 21.66$, $SD = 4.79$) compared to psychology students ($M = 21.32$, $SD = 4.80$), with a t-test result of 0.501. This indicates no statistically significant difference between the groups ($p > 0.05$).

Emotion-Focused Coping: In emotion-focused coping, non-psychology students scored marginally higher ($M = 28.92$, $SD = 5.84$) than psychology students ($M = 28.83$, $SD = 5.06$), with a t-test result of 0.116, also showing no significant difference ($p > 0.05$).

Avoidant-Focused Coping: For avoidant-focused coping, non-psychology students had a higher mean score ($M = 16.01$, $SD = 3.96$) compared to psychology students ($M = 15.01$, $SD = 3.83$). The t-test result of 1.812 suggests a trend toward significance, indicating that non-psychology students may rely more on avoidant strategies, although this did not reach conventional significance ($p > 0.05$).

Gender Differences

	Stream	N	Mean	Std. Deviation	t-test
Problem Focused Coping	Male	100	21.64	4.71	.442
	Female	100	21.34	4.88	
Emotion Focused Coping	Male	100	28.95	5.24	.052
	Female	100	28.91	5.69	
Avoidant Focused	Male	100	15.93	4.00	1.740
	Female	100	14.99	3.63	

Table 2 presents the comparison of coping styles between male and female students, each group containing 100 participants.

Problem-Focused Coping: Males had a mean score of 21.64 (SD = 4.71), while females scored 21.34 (SD = 4.88). The t-test result of 0.442 indicates no significant difference between genders ($p > 0.05$).

Emotion-Focused Coping: For emotion-focused coping, males scored 28.95 (SD = 5.24) compared to females at 28.91 (SD = 5.69), with a t-test value of 0.052, again showing no significant difference ($p > 0.05$).

Avoidant-Focused Coping: Males had a mean score of 15.93 (SD = 4.00), while females scored 14.99 (SD = 3.63). The t-test value of 1.740 suggests a slight difference favoring males, but it remains statistically non-significant ($p > 0.05$).

Overall, neither hypothesis regarding significant differences in coping styles between student groups or genders was supported by the findings. Although trends were observed, particularly in avoidant-focused coping, the lack of statistical significance suggests that academic background and gender may not substantially influence coping strategies. Further research could provide deeper insights into these trends.

DISCUSSION

This study explored differences in coping strategies between psychology and non-psychology students, as well as between males and females, focusing on problem-focused, emotion-focused, and avoidant-focused coping mechanisms. However, the t-test results did not support the hypotheses of significant differences across these groups.

Regarding coping styles between psychology and non-psychology students, the expected distinct patterns among psychology students were not evident. For problem-focused coping,

non-psychology students had a mean score of 21.66, while psychology students scored 21.32, yielding a t-test result of 0.501, indicating no significant difference. Similarly, in emotion-focused coping, non-psychology students scored 28.92 and psychology students scored 28.83, with a t-test value of 0.116, suggesting that both groups manage emotional distress comparably. Although non-psychology students scored slightly higher in avoidant-focused coping (16.01) compared to psychology students (15.01), the t-test result of 1.812 did not provide strong evidence of a significant difference, indicating that further exploration is warranted due to the potential negative outcomes associated with avoidant strategies.

The study also examined gender differences in coping styles, finding no significant influence of gender on coping strategies. Males had a mean score of 21.64 for problem-focused coping compared to 21.34 for females (t-test result of 0.442), indicating similar engagement in problem-solving. In emotion-focused coping, males scored 28.95 and females 28.91 (t-test value of 0.052), further challenging traditional stereotypes that suggest women rely more on emotional coping. Males showed a slightly higher mean score in avoidant-focused coping (15.93) compared to females (14.99), but this difference was not statistically significant (t-test result of 1.740). Overall, these findings suggest that both genders and academic groups utilize similar coping strategies, challenging traditional views on stress management and highlighting the need for further research to understand the complexities of coping mechanisms across diverse populations.

CONCLUSION

In conclusion, this study reveals that neither academic discipline nor gender significantly influences coping mechanisms. Psychology students and non-psychology students employed similar coping strategies, indicating that academic training does not alter real-life coping

behaviours. Additionally, both genders demonstrated comparable coping styles, challenging traditional stereotypes. These findings highlight the importance of considering broader factors, such as individual personality traits and cultural backgrounds, in understanding coping behaviours. Future research should explore these additional influences to further clarify how people manage stress and challenges.

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