



Examining the Impact of Perceived Stress on Resilience and Coping Styles

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Abstract: This study explores relationship among perceived stress, resilience, & coping styles between individuals, with a focus on how these factors influence psychological well-being. The research utilizes three validated scales. The scale measures the level of perceived stress in the participants' lives, while the Brief COPE Inventory evaluates the coping strategies employed in response to stressors. The BRS measures resilience, reflecting a person's capacity to pull through from worry and hardship. A total of 111 participants aged 18 and above were involved in the study. Data exploration showed noteworthy correlations between high alleged tension & negative handling tactics, whereas resilience was found to reasonable the influence of stress on mental consequences. The study suggests that resilience may serve as a defensive influence, buffering the negative effects of stress, and highlights the importance of adaptive coping mechanisms in managing perceived tension. These outcomes have practical consequences for psychological fitness interventions, emphasizing enhancement of resilience and adaptive coping strategies to reduce stress-related issues.

Keywords: *Perceived stress, resilience, coping styles, PSS, Brief COPE Inventory, Brief Resilience Scale, avoidant coping.*

1. Introduction

Stress is an unescapable life skill that develops when a person is unable to handle the external physiological and mental suffering of daily life. Apparent worry is defined as how a person comprehends the level of tension he or she is exposed to in a period. It is related to a feeling of

ambiguity & unsteadiness approximately lifespan & being subject to on self-assurance in one's ability to manage problems.

An individual's impression of the amount of pressure they are feeling at a given time or during a specific period is known as perceived stress. The procedure & conclusion of efficaciously adjusting to challenging or confusing lifecycle skills, especially over behavioral, expressive, & psychological elasticity & adaptation to internal & external difficulties, is resilience. The ideas and actions used to deal with stressors from within and without are referred to as coping. Coping entails deliberate and purposeful acts intended to lessen or endure stress, as opposed to defense mechanisms, which are subconscious or unconscious reactions. A person's varying responses to stressors are referred to as "coping styles" which are a collection of comparatively consistent characteristics that characterize how a person behaves under pressure. These are consistent throughout time and under all circumstances.

Problem-focused handling tactic is transformation or remove basis of strain. this type of coping mechanism if a person has roughly control done the state is initiating worry. The goal of ***emotion-focused techniques*** is stress management. Pain is perceived as threatening by those who have a negative perspective on the pain and their capacity to manage it, which results in more passive emotion-focused coping. These coping mechanisms are intended to offer consolation or assurance and concentrate on attending to emotional needs. Healthy emotion-focused coping strategies can help people think more clearly, lessen the effects of stress, and get ready to change. ***Avoidant coping strategies*** are often considered maladaptive because they involve ignoring or dodging stressors instead of addressing them. This type of coping is unhealthy, as it temporarily alleviates stress but ultimately exacerbates the issue. Procrastination, a common avoidant strategy, provides short-term relief but leads to increased stress later due to looming deadlines. Avoidance does not solve the underlying problems and can make them worse over time. ***Adaptive Coping Mechanisms*** help individuals alter the situation or their stress response. E.g. contain deep inhalation, reflection, workout, journaling, talking to friends, positive thinking, bathing, reading, and aromatherapy.

These strategies support long-term well-being by promoting healthier emotional and psychological responses to stress. Maladaptive strategies are undesirable responses to stress, often rooted in trauma or emotional neglect. These behaviors, though they may provide temporary relief,

ultimately cause emotional and physical harm. Common examples include excessive drinking, drug use, anger, self-harm, binge eating, negative thinking, and social isolation.

2. Review of Literature

Gürsoy et al. (2022), study assessed the level of psychological resilience and explored the psychological and clinical factors influencing resilience among individuals with migraine. A total of 100 migraine patients and 100 healthy controls participated in the research. For migraine patients, evaluations included the number of painful days over the past three months, the duration of the illness, and the relationships between clinical assessment scales. consequences exhibited statistically significant links among psychological elasticity & well-being.

Fonseca et al. (2021), study investigated how resilience and perceived stress contribute to dysfunctional coping among EMTs. A total of 502 EMTs completed a questionnaire assessing these variables. Participants generally reported high levels of resilience, low levels of strain, & presence of dysfunctional handling approaches. Mid the resilience dimensions, self-acceptance and life acceptance, along with stress, were found to influence dysfunctional coping. Stress had the strongest regression coefficient. When stress was considered, the impact of self- and life acceptance on dysfunctional coping was no longer significant, indicating a full mediation effect.

Ding et al. (2021), study aimed to examine how various coping methods influenced 492 undergraduate Chinese college students during the COVID-19 pandemic, focusing on the mediating role of perceived stress. The results revealed that perceived stress significantly mediated the relationship between different coping styles and psychological distress. Three coping styles—problem-focused, adaptive emotion-focused, and maladaptive emotion-focused—were all found to have significant associations with psychological distress. Specifically, maladaptive emotion-focused coping predicted higher levels of perceived stress, which in turn led to greater psychological distress through a partial mediation model.

Cabrera et al. (2021), the study explored the relationship amongst apparent worry & emotive conditions amongst nurses who providing patient attention throughout the COVID-19 plague, focusing on the facilitating part of elasticity. A total of 214 Spanish nurses completed self-report measures assessing perceived stress, resilience, well-being, anxiety, and depression. The results indicated that the nurses experienced reasonable heights of apparent tension, momentous mental suffering, & great levels of elasticity. Elasticity was institute to be pointedly and harmfully

associated perceived stress, anxiety, and depression. Further analysis demonstrated that elasticity acted as a defensive aspect, modifying direct things of tension on depression, anxiety, & overall psychological distress.

Fishman et al. (2012) explored the relationship between resilience, perceived stress, and stress reaction among junior college students. Two standard surveys, the Student-Life Stress Inventory (SSI) and the Resiliency Scale (RS), were used to assess these variables among 115 junior college students. Females and males were similar in perceived stress and resilience, but females had significantly higher resilience related to stress reaction. The resilience factor of equanimity significantly mediated the relationship between perceived stress and stress reaction. Increasing a student's resilience could thus improve student health, resulting in better concentration, fewer sick days, and improved grades.

3. Methodology

3.1 Aim

The aim is to study perceived stress, resilience and coping styles among adults.

3.2 Research Objective

- a) To investigate association among perceived stress, resilience, & coping styles in adults.
- b) To examine correlation among perceived stress & resilience among adults.
- c) To analyze association among perceived stress & different coping styles employed by adults.
- d) To discover relationship among resilience & coping styles in adults.

3.3 Hypothesis

- a) There is a relationship between perceived stress & resilience among adults.
- b) There is a relationship between perceived stress and coping styles among adults.

3.4 Variables

Independent variable: Perceived stress

Dependent Variable: Resilience and coping styles

3.5 Sampling Method

The sample comprised of individuals who are youthful grown-ups i.e., aged 18 and beyond a long time of age, who were screened utilizing Perceived Stress Scale, Resilience and Coping

style scale. The study was done on 111 adults. The test was collected in both online and offline modes, by circulating a Google form and a survey individually.

3.6 Measures

3.6.1 Perceived stress scale (PSS-10) developed by Sheldon Cohen, Tom Kamarck, & Robin Mermelstein in 1983, is a widely used mental instrument intended to quantify the degree to which folks observe situations in their lives as stressful. Grounded in the transactional model of stress, the PSS-10 measures how erratic, uncontrollable. The scale consists of 10 items, each rated on a 5-point Likert scale ranging from 0 (Never) to 4 (Very Often), with four positively stated items requiring reverse scoring. The total score, obtained by summing the item responses, reflects the individual's perceived stress level, with complex notches indicating bigger apparent worry.

3.6.2 Brief Resilience Scale (BRS): It was industrialized by Smith et al. in 2008, a brief self-report instrument designed to assess a person's capacity to overcome ongoing anxiety. In keeping with the original definition of flexibility, the BRS expressly assesses talent to "bounce back" from adversity, in contrast to other elasticity measures that concentrate on protective characteristics or attributes. There are six questions on the scale, and the answers must be counted in the opposite direction. The replies are averaged to determine the final total, which varies from 1 to 5. Advanced scores suggest greater resilience.

3.6.3 Brief Cope Inventory (BCI): It was created by Charles S. Carver in 1997 and its functions as a condensed form of the original COPE Inventory (Carver, Scheier, & Weintraub, 1989), designed to lessen participant burden in clinical and research contexts without sacrificing the thoroughness of coping evaluation. It is made up of 28 items that capacity 14 different managing methods, each of which is represented by two items. problem-focused coping, which includes proactive coping, preparation, and the utilization of helpful resources. Emotion-focused coping strategies include comedy, religion, constructive framing, approval, & demonstrative maintenance. Avoidant distraction, denial, material abuse, behavioral disconnection, venting, & self-blame are all examples coping mechanisms.

3.7 Procedure

The topic was selected after understanding related topics, & then the research aim, objective, and hypothesis were formulated. After obtaining approval from the university on the synopsis, the questionnaire for data collection was designed, and then the ethical approval was obtained from the supervisor. A Google form was also designed for online data collection. The

form was then circulated on various social media platforms, and a total of 111 responses were received. After screening for perceived stress, a total of 111 data points were collected, which consisted of females and males. The offline data collection was done through the random and convenience method and only consisted of 111 responses, of which 56 were male participants and 55 were female participants.

The tool used for screening for perceived stress was the PSS-10 Questionnaire, were considered appropriate for the study. After the data collected was transferred onto an Excel sheet, it was run through the SPSS software for data analysis. Pearson's association carried out to evaluate the affiliation and influence of professed tension on resilience & coping styles in people. Based on the results obtained, it was found that apparent worry has a substantial affiliation with resilience and coping styles.

3.8 Statistical Analysis

A correlation Investigation was shown to inspect impact and connection among perceived stress, resilience, and coping styles.

4. Result

The determination of the work was to explore how adults' coping mechanisms, resilience, and perceived stress relate to one another. 111 participants, both male and female, were 18 years of age or older (mean age = 23.8), making up the final sample

Table 1: *Correlation between Coping Styles, Perceived Stress and Resilience*

	Avoidant Coping	Emotional Coping (emo)	Problem-Focused Coping (prob)	Perceived Stress (stress)	Resilience (res)
Avoidant Coping	1				
Emotional Coping	0.6368	1			
Problem-Focused Coping	0.0312	0.4335	1		
Perceived Stress	0.3416	0.3408	-0.1090	1	
Resilience	-0.4990	-0.3041	0.3062	-0.3830	1

Note: This table displays the computed Pearson correlation coefficient (r) along with sums, means, and sums of squares for the three variables—perceived stress, resilience, and coping methods. An enquiry was passed to investigate the relations between people's different coping strategies, resilience, and perceived stress. To evaluate the strength and direction of these relationships among the 111 study participants, Pearson's correlation coefficients (r) were calculated.

According to the findings, there is a somewhat good linking ($r = 0.6368$) between avoidant managing & emotional managing, demonstrating people who regularly employ avoidant coping strategies also probably use emotional surviving strategies.

There was a moderately favorable connection between Problem-Focused Coping and Emotional Coping ($r = 0.4335$), but a weak correlation with Avoidant Coping ($r = 0.0312$). This suggests that while problem-focused coping techniques mostly function independently of avoidant coping techniques, they are somewhat associated with emotional coping.

Adults experiencing high levels of stress tend to use emotional and avoidant coping strategies. A moderately positive correlation was found between perceived stress and avoidant coping ($r = 0.3416$) and emotional coping ($r = 0.3408$). Nonetheless, a minor negative association ($r = -0.1090$) was found between perceived stress and problem-focused coping, indicating that higher levels of stress marginally decrease the adoption with problem-focused coping techniques. A somewhat negative connection was originate concerning resilience & both avoidant coping ($r = -0.4990$) and emotional coping ($r = -0.3041$), indicating that those who are more resilient are less likely to employ these coping strategies. The findings indicate that resilience has a protective function in promoting adaptive coping techniques and mitigating the effects of stress. It was absolutely connected with Problem-Focused techniques ($r = 0.3062$) & harmfully correlated with Perceived Stress ($r = -0.3830$).

5. Discussion of Results

The study examined perceived stress, resilience, and three coping strategies: avoidant, emotion-focused, and problem-focused. Understanding these relationships is key because stress management affects psychological health and problem-solving abilities.

Many studies have been conducted on coping in the field of psychology. Coping, according to Lazarus and Folkman (1984), “is the dynamic cognitive and behavioral attempts to handle certain

demands that are deemed to be burdensome or beyond a person's capacity". Another important concept related to coping and stress is resilience. Masten (2001) described resilience as "ordinary magic," highlighting that resilience is a common human capacity to recover from adversity, maintain functioning, and even grow through difficult experiences.

Consequences are constant with previous study. For instance, Holahan and Moos (1987) found that individuals who frequently used avoidant coping strategies were more likely to experience increased psychological distress over time. Similarly, research by Penley, Tomaka, and Wiebe (2002) highlighted that avoidant coping is associated with poorer physical and mental health outcomes. Our findings further affirm that avoidant coping strategies undermine the development of resilience and effective stress management.

Regarding emotion-focused coping, although some aspects (such as seeking support) can be helpful, other emotion-focused strategies like rumination, self-blame, and emotional disengagement can be maladaptive (Folkman & Moskowitz, 2004). The moderate negative correlation found in this study suggests that emotion-focused coping, as used by participants, tended to hinder resilience rather than promote it.

These results align with the transactional model of stress proposed by Lazarus (1993), which emphasizes that the way individuals appraise and cope with stressors plays a crucial role in their stress experiences. Those who lack effective coping strategies may perceive their environment as more threatening and overwhelming, resulting in higher stress levels. Given these findings, interventions that aim to teach individuals more adaptive coping strategies could be beneficial. Training individuals to engage in problem-solving, cognitive restructuring, and effective emotional regulation could enhance resilience and protect against the harmful effects of stress.

In conclusion, it delivers valued visions into how coping styles effect the affiliation among perceived stress & resilience. Emphasizing problem-focused tactics & decreasing belief on avoidant & maladaptive emotion-focused schemes could show a vital part to promoting mental fitness & relief.

6. Conclusion

In conclusion, it examined the relationships between apparent tension, resilience, & several coping strategies, particularly problem-focused, emotive-focused, & avoidant coping. The study used recognized assessment instruments to measure these psychological characteristics accurately.

Using (PSS-10; Cohen, Kamarck, & Mermelstein, 1983), which calculates people's perceptions of stress they encounter in their lives, perceived stress levels were assessed. The Brief Resilience Scale (Smith et al., 2008), a brief tool designed to gauge an individual's capacity for recovery from stressful situations, was used to measure resilience. The Brief COPE Inventory (Carver, 1997), a commonly used instrument for determining how people cope with stress, was used to measure coping patterns.

These findings carry important implications for mental health interventions, counseling practices, and stress management programs. They underscore the importance of promoting adaptive coping strategies, particularly problem-focused approaches, among individuals facing significant stressors. Interventions aimed at fostering skills such as effective planning, active coping, and seeking instrumental support could be instrumental in enhancing resilience and reducing perceived stress.

By developing these skills, individuals may be better equipped to manage the challenges of daily life, leading to improved emotional well-being. Furthermore, the findings suggest that therapeutic interventions should target the reduction of avoidant behaviors and maladaptive emotion-focused strategies like self-blame, denial, and withdrawal. Programs emphasizing cognitive-behavioral techniques to challenge negative appraisals, mindfulness practices to regulate emotions could be particularly beneficial. Educational institutions, workplaces, could incorporate structured resilience-building workshops that focus on enhancing problem-solving abilities, emotional regulation, and adaptive stress responses to better support individuals in managing life's adversities.

One significant limitation is restricting the capability to draw fundamental implications. It remains uncertain whether coping styles directly influence resilience and stress levels over time or whether existing levels of resilience shape the selection of coping strategies. other restriction is the confidence in self-report methods, which are susceptible to biases such as social desirability and subjective interpretation. Contestants portrayed themselves in a more favorable light or misjudged their coping effectiveness. Additionally, the features of the trial, including factors like socioeconomic status, & cultural background, may limit the extent to which the findings can be generalized to broader populations.

In conclusion, this study underscores the pivotal role that coping strategies play in influencing perceived stress and resilience. Encouraging the adoption of problem-focused coping methods and

reducing reliance on avoidant and maladaptive emotional strategies can significantly enhance mental health and emotional strength. Addressing these areas through targeted interventions, educational initiatives, and community programs may equip individuals with the psychological tools needed to navigate life's stressors more effectively.

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