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Stress and Coping Strategies

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Abstract
This study investigates the relationship between perceived stress and coping strategies in young adults, with a specific focus on how individual characteristics, such as personality traits and previous experiences, impact the effectiveness of these coping strategies. A total of 100 participants, evenly split between males and females, aged 18 to 25, were involved in the study. Stress levels were measured using the Perceived Stress Scale (PSS), while a revised Coping Scale was employed to evaluate participants' cognitive, emotional, and behavioral approaches to stress management. The goal of this research was to deepen the understanding of the factors that influence how people cope with stress and how personal traits shape their coping responses.

Keywords: Coping Scale, the Perceived Stress Scale, coping strategies The study will include 100 participants, with an equal split of 50 males and 50 females, all fluent in English and aged between 18 and 25 years. Participation is entirely voluntary, and each participant will provide informed consent.

I. INTRODUCTION

Theories of Stress

1. General Adaptation Syndrome (GAS) - Proposed by Hans Selye in 1936, the General Adaptation Syndrome describes how the body responds to stress in three stages: Alarm, Resistance, and Exhaustion. In the Alarm phase, a “fight or flight” response is triggered, releasing stress hormones like adrenaline and cortisol. If stress continues, the body moves into the Resistance stage, attempting to adapt but slowly depleting its resources. Prolonged stress leads to the Exhaustion stage, where coping abilities are overwhelmed, increasing the risk of burnout and health issues. Selye's theory underscores the damaging effects of chronic stress on physical well-being.

2. Transactional Model of Stress and Coping - Developed by Lazarus and Folkman in the 1980s, this model focuses on cognitive appraisal in response to stress. It suggests that stress is shaped not just by the event itself but by how the individual perceives and interprets it. First, in the primary appraisal, the person evaluates whether the situation is irrelevant, positive, or stressful. If deemed stressful, secondary appraisal follows, where the individual assesses their coping resources and options. Based on this, they may use problem-focused coping to tackle the stressor directly or emotion-focused coping to manage their emotional response. This model emphasizes that stress responses are subjective and highlights the importance of personal interpretation and coping strategies in dealing with stress.

3. Diathesis-Stress Model - This psychological model explains mental health disorders as resulting from the interaction between a predisposition (diathesis) and external stressors. The diathesis, or vulnerability,

can be genetic, biological, or psychological, making an individual more likely to develop a disorder. However, this predisposition alone doesn't 3 cause the disorder; it requires exposure to stressors or life challenges to trigger the condition. When a person with such a vulnerability faces significant stress, it can lead to the onset of a mental health disorder. This model clarifies why some people develop disorders in response to stress while others do not, stressing the role of both inherited risk factors and life experiences in the development of mental health issues.

Coping Mechanisms

Coping mechanisms are essential strategies people use to handle stress and adversity, which significantly affect their mental and emotional health. Over the years, research on coping mechanisms has underscored their importance for psychological well-being. In the 1960s, Richard Lazarus and Susan Folkman introduced the Transactional Model of Stress and Coping, focusing on the role of cognitive appraisal in handling stress. In the 1980s, Stevan Hobfoll contributed the Conservation of Resources (COR) theory, which emphasizes how individuals manage and protect their resources to reduce stress. These theories have deepened our understanding of how effective coping strategies support resilience and health.

Theories on Coping Mechanisms

1. Conservation of Resources (COR) Theory - Developed by Stevan Hobfoll in 1989, this theory examines how people cope with stress by safeguarding and preserving valuable resources. According to COR theory, stress arises from the threat of resource loss, actual loss, or a lack of sufficient gain after resources are invested. Resources, including tangible assets, personal qualities, life conditions, and energy, are central to effective coping. The theory suggests that people actively work to acquire, retain, and protect these resources as a means of managing stress. Successful coping strategies aim to conserve resources, while resource depletion can increase stress and impact well-being. COR theory highlights the role of resource management in understanding coping processes and stress responses.

2. Self-Efficacy Theory - Introduced by Albert Bandura in the 1970s, this theory focuses on the importance of individuals' belief in their own ability to manage challenges and reach goals. Self-efficacy, or confidence in one's capacity to handle tasks and stressors, significantly impacts how people approach stress. Those with high self-efficacy are more resilient and likely to use proactive coping strategies, viewing challenges as manageable rather than overwhelming. In contrast, low self-efficacy may lead to avoidance, reduced effort, and feelings of helplessness. Bandura's theory underscores the value of perceived personal control in stress management, suggesting that fostering self-efficacy can improve coping effectiveness and support mental health.

3. Social Support Theory - Developed by Sheldon Cohen and Thomas Wills in the 1980s, this theory emphasizes the vital role of social networks in stress management. According to this theory, social support—which includes emotional support (e.g., empathy and understanding), instrumental support (e.g., practical help), and informational support (e.g., advice and guidance)—buffers against the adverse effects of stress. Strong, supportive relationships can reduce stress perception, enhance coping skills, and improve both mental and physical health. By offering resources, reassurance, and practical aid, social support helps individuals navigate difficult situations more effectively and diminishes the impact of stress on their well-being.

Understanding the Link Between Stress and Coping Mechanisms

Stress and coping mechanisms are deeply interconnected, with research showing that different coping strategies can significantly impact mental and physical health. Richard Lazarus, a foundational figure in stress research, introduced the Transactional Model of Stress, which frames stress as a dynamic process involving the evaluation of stressors and available coping resources. Lazarus emphasized that coping mechanisms are the techniques individuals employ to manage the pressures brought about by stressful situations. His concepts of "problem-focused" and "emotion- focused" coping illustrate that people may either tackle the source of stress directly or work on managing their emotional reactions to it.

Susan Folkman, who collaborated with Lazarus, further enriched this perspective on coping. Together, they found that effective coping involves both addressing the stressful situation and regulating one's emotional response to it. Problem-focused coping includes actions such as finding solutions or making plans, while emotion-focused coping involves methods like seeking support or practicing relaxation.

The work of other psychologists, such as Albert Bandura and Aaron Beck, has also added to our understanding of how stress and coping interact. Bandura's concept of self-efficacy suggests that individuals who believe in their abilities are more likely to engage in proactive coping and view stressors as manageable challenges. Meanwhile, Beck's cognitive theory highlights that negative thought patterns can worsen stress and reduce the effectiveness of coping.

II. LITERATURE REVIEW

Kumar and Bhukar (2012) examined stress levels and coping strategies among Physical Education and Engineering students, with a sample of 60 participants (15 males and 15 females per field, aged 21 ± 3). Using questionnaires by Daniel et al. (1979) and George and Everly, as applied by Heyward (1991), they found that female students faced more stress than males in both fields. However, male students generally exhibited better coping strategies, except for females in Physical Education, who coped more effectively than both genders in Engineering. The study concluded that Physical Education students displayed stronger coping abilities compared to their Engineering counterparts.

Devi (October 2011) emphasized the growing stress stemming from societal changes and lifestyle demands. While often viewed as harmful, stress can sometimes inspire passion and creativity. Her study discussed stress as a pervasive, silent issue that contributes to health problems, marital struggles, and work-related challenges. In high-pressure environments, like IT, stress is particularly intense. Devi surveyed 200 IT professionals in Hyderabad and identified effective coping strategies, including stress management programs, physical activities, lifestyle adjustments, counseling, supportive work environments, and spiritual practices.

Redhwan et al. (2009) explored stress causes and coping strategies among Medical Science and Biomedicine students in Malaysia. Through a focus group of 39 students (predominantly female, aged 21-26), participants defined stress primarily as a "mental state" and identified financial issues, sleep deprivation, and family challenges as primary stressors. Common coping techniques included counseling, meditation, talking through problems, sleep, and social engagement. The study provides insight into key stressors and coping methods among university students.

Ochanda (2024) investigates the intense stress experienced by university students, linked to transitional and academic pressures. Ineffective coping strategies are associated with negative mental health outcomes, including suicidal ideation and higher dropout rates. Ochanda emphasized both adaptive (e.g., problem-focused, emotion-focused, meaning-focused, and social focused) and maladaptive coping methods,

underscoring the importance of understanding these strategies to help universities develop psychological support programs.

Zarin et al. (2024) developed a new stress index for Malaysian teachers, addressing limitations in prior tools. The study identified four core coping strategies: appraisal coping, adaptive behavioral coping, social coping, and maladaptive coping. Interviews with 14 teachers validated these strategies, with social support and meditation emerging as common methods. Further validation of the index with expert input is planned to ensure its reliability and validity.

Wirawan (2023) examined the pandemic's role in increasing anxiety and fear, leading to a condition known as corona phobia. Contributing factors include catastrophizing and the social amplification of perceived risks. The study found that individuals with less effective coping strategies are more vulnerable to corona phobia, highlighting the need for adaptive coping methods to manage pandemic-induced anxiety.

Maharani and Utami (2023) analyzed the effect of stress-coping mechanisms on impulsive online shopping. They found that stress, self-reward behavior, and low self-control contribute to impulsive buying, though stress itself does not directly cause this behavior. Instead, coping strategies mediate the relationship, emphasizing the importance of understanding these dynamics for better marketing strategies and improved employee performance.

Austin (2005) assessed stress symptoms and coping mechanisms in teachers, identifying significant links between coping methods and stress levels. Negative coping included avoidance, 6 taking responsibility for stress, and uncontrolled aggression, while exercise was the only positive strategy noted. The study, limited to two schools, suggests further research to broaden applicability and recommends exploring additional tools like Stein et al.'s (2003) activity-based Stress Management Questionnaire for potentially better coping strategies.

Hampel (2006) explored age and gender impacts on perceived interpersonal stress, coping with such stressors, and psychological adjustment among early and middle adolescents. The study examined how perceived stress and coping styles correlate with adjustment outcomes.

Naquin (1996) conducted a study on college students' smoking behaviors, stress levels, and coping styles, using a sample of 1,330 students across four universities. The study found that current smokers reported higher stress than non-smokers and used more emotion-focused coping, while former smokers were less likely to use avoidance coping. This study supports the need for smoking prevention and cessation initiatives for college students.

Kumanova (2013) investigated the connection between perceived stress and proactive coping, finding that those who employ proactive strategies (like planning and positive reinterpretation) experience lower stress levels, while reliance on emotion-focused strategies such as denial or venting correlates with higher stress.

Ha (1998) studied the relationships between perceived stress, coping styles, and stress responses among 320 student nurses. Significant correlations were found between perceived stress and emotional responses, emotion-focused coping, and stress response, underscoring the need for stress management programs tailored to these factors.

Bourne et al. (2003) reviewed cognitive psychology research on the effects of acute and chronic stress on performance, noting that stress can lead to operator errors. The review highlights unresolved questions in how stress impacts cognitive processes, emphasizing a need for further research.

Sarason (1979) implemented a stress management program for Police Academy trainees, which improved trainees' performance in simulated tasks compared to a control group. This suggests that targeted stress management interventions can be effective for law enforcement, which faces high stress levels and asso-

ciated health risks.

Lovallo (2017) examined stress hormone regulation, particularly cortisol, and its dual roles in homeostasis and stress response. Stress hormones are activated by events threatening well-being, and although elevated in response to stress, these hormones are also vital for normal physiological functions.

Crum (2017) explored how shifting perceptions of stress can alter cognitive, physiological, and emotional responses, suggesting that changing mindsets about stress itself—rather than just specific situations—can lead to improved coping and better stress management.

III. METHODOLOGY

Research Design: This study utilizes a quantitative descriptive research approach to explore the relationship between perceived stress levels and coping strategies in young adults. It specifically examines how personal characteristics, such as personality traits and previous experiences, may influence these relationships.

Objectives:

- To assess the levels of perceived stress in young adults.
- To describe the various coping strategies used by young adults when faced with stress.

Sample:

This study will include 100 participants (50 males and 50 females), aged between 18 and 25 years. All participants will be fluent in English and will provide informed consent. The sample will be drawn from a general young adult population, ensuring diversity in terms of personality traits and personal histories. Participation is voluntary, with no financial compensation.

Inclusion Criteria:

- Individuals aged 18-25.
- Fluent in English.
- Voluntary participation with informed consent.

Exclusion Criteria:

- Participants outside the age range of 18-25.
- Non-English speakers.

Tools Description

Coping Scale (Holahan et al., 1987)

This scale assesses cognitive, emotional, and behavioral strategies for managing stress. Several items, focusing on cognitive and emotional coping strategies, were adapted from Holahan and Moos's widely-used Coping Strategies Scale (items 2, 3, and 4), while other cognitive and emotional items are original (items 1, 5, 6, and 8). Remaining items were adapted from Sritzkerg and Conach's (2008) coping framework, initially designed for stalking-related responses, and modified to focus on general coping methods. Items were simplified to be accessible for a community sample with varying levels of reading and education. The Coping Scale demonstrated strong reliability, with internal consistency scores of 0.88 and 0.91 for pilot and main samples. Validity was supported by significant correlations with regulatory strengths such as Anger Management ($r = .57$) and Endurance ($r = .63$), as well as with well-being indicators like Subjective Well-being ($r = .53$) and Posttraumatic Growth ($r = .65$).

Perceived Stress Scale (PSS) (Cohen et al., 1983) This widely-used scale measures perceived stress levels and reflects how individuals experience stress in various situations over the past month. Each question assesses the frequency of specific feelings or thoughts. While some items may appear similar, each is

distinct and should be considered independently. The PSS has demonstrated strong validity, correlating well with other measures of stress and mental health outcomes like anxiety and depression. It also shows high internal consistency (Cronbach's alpha ranging from 0.78 to 0.91) and good test-retest reliability, making it a reliable tool for assessing stress across diverse groups.

Participant Recruitment:

Participants will be recruited through convenience sampling from online platforms and university mailing lists to ensure a diverse sample from the target age group (18-25 years). This method will help to capture a wide range of demographic variables, which will enhance the generalizability of the findings regarding stress levels and coping strategies.

Informed Consent:

Before participating, individuals will be presented with an informed consent form that outlines the study's purpose, the voluntary nature of their involvement, and an explanation of the questionnaires used. The form will emphasize the confidentiality of their responses and their right to withdraw from the study at any point without any consequences. Only those who provide explicit consent will move forward with the study.

Survey Administration:

Once consent is obtained, participants will complete three questionnaires: the **Perceived Stress Scale (PSS)**, the **Coping Scale**, and the **Personality Traits Questionnaire**. These surveys will be administered via an online platform (such as Google Forms). Participants will be sent an email containing a link to the survey, allowing them to complete it at their convenience, thus ensuring flexibility and ease of access.

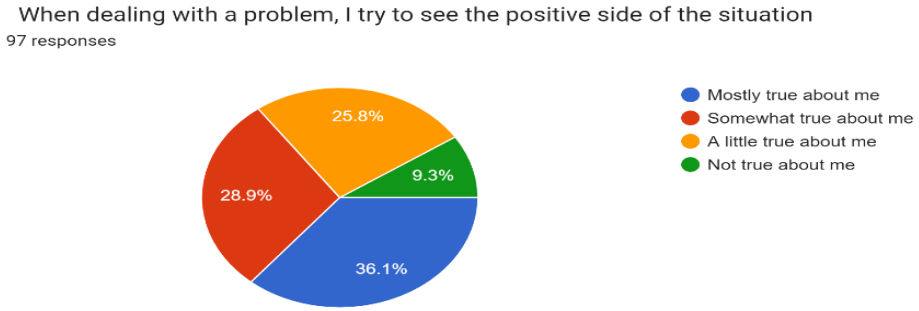
Data Management:

All responses will be stored securely, and no identifying information will be collected from participants. The data will be anonymized to protect participants' privacy, and it will be stored in a password-protected system. Only aggregated, anonymous data will be used for analysis, ensuring that personal information is kept confidential.

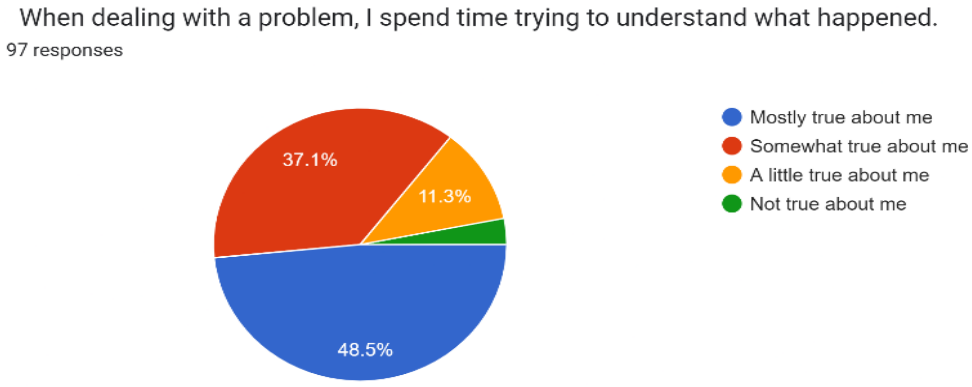
Data Analysis:

Descriptive statistics will be employed to summarize the data, providing frequency distributions, means, and standard deviations for perceived stress levels and coping strategies. Correlation analysis will examine the relationship between stress levels and the coping methods used. Additionally, regression analysis will assess how personality traits such as neuroticism and conscientiousness may affect the effectiveness of the coping strategies. These statistical techniques will allow for a detailed understanding of the relationships between the variables under study.

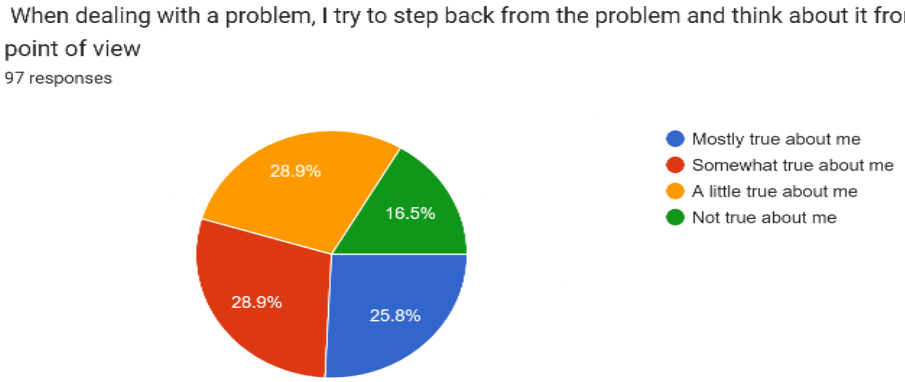
IV. RESULTS



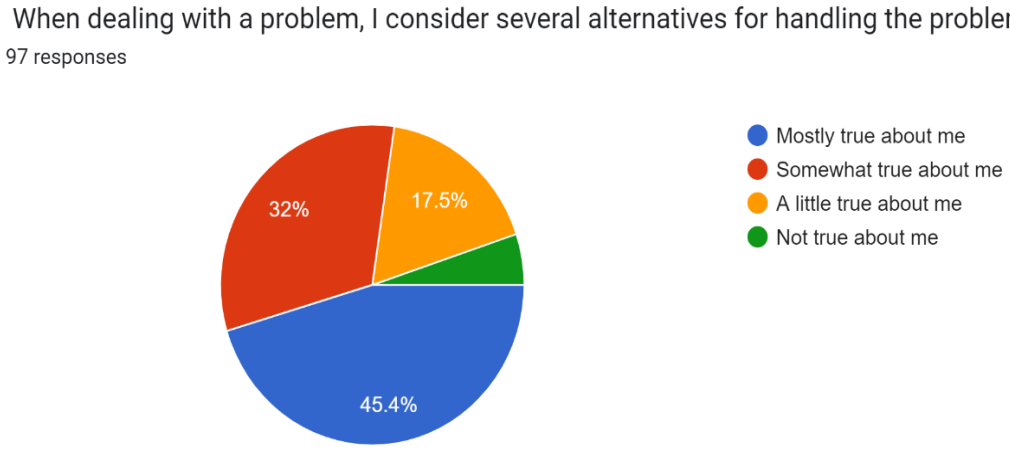
Emotional coping (36% mostly true, 28.9% somewhat true) shows an optimistic approach, reflecting low perceived stress.



Cognitive coping (48.5% mostly true, 37.1% somewhat true) suggests a tendency to reflect on the issue, indicating moderate to low perceived stress.

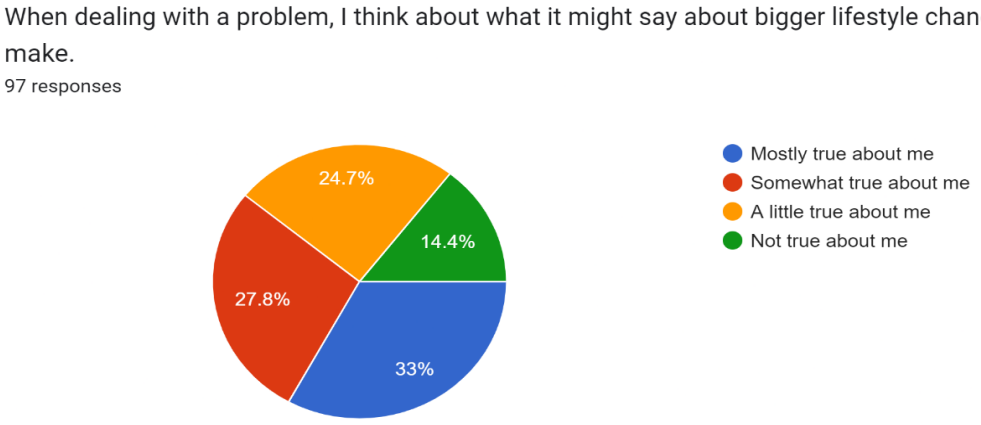


Cognitive coping (25.8% mostly true, 28.9% somewhat true) indicates moderate cognitive flexibility, suggesting moderate stress levels.

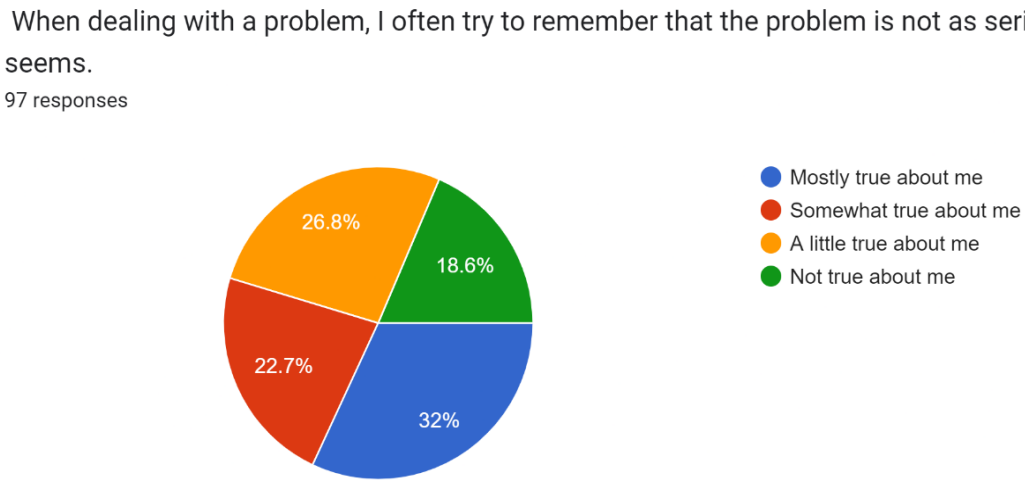


Cognitive coping (45.4% mostly true, 32% somewhat true) demonstrates effective problem-solving, suggesting low to moderate perceived stress.

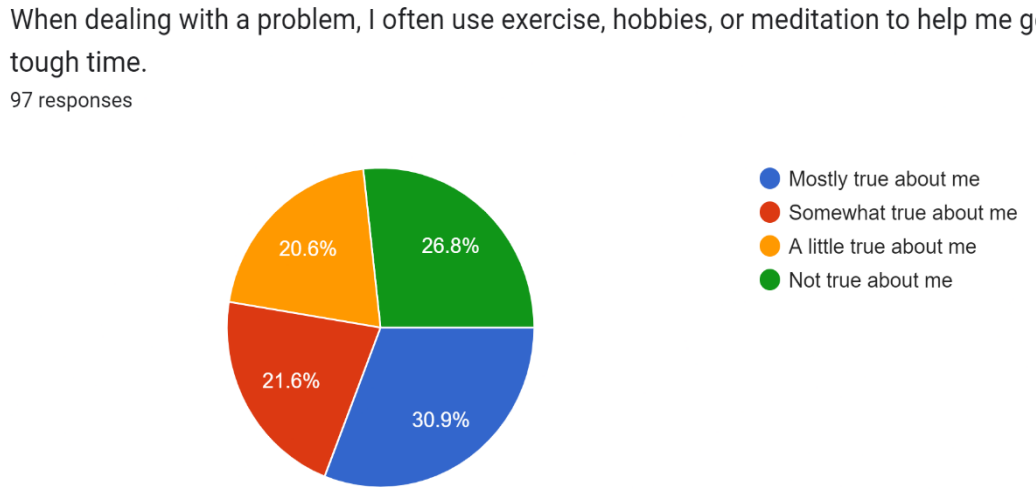
This is emotional coping (24.7% mostly true, 25.8% somewhat true), indicating the use of humor to reduce stress, suggesting low perceived stress.



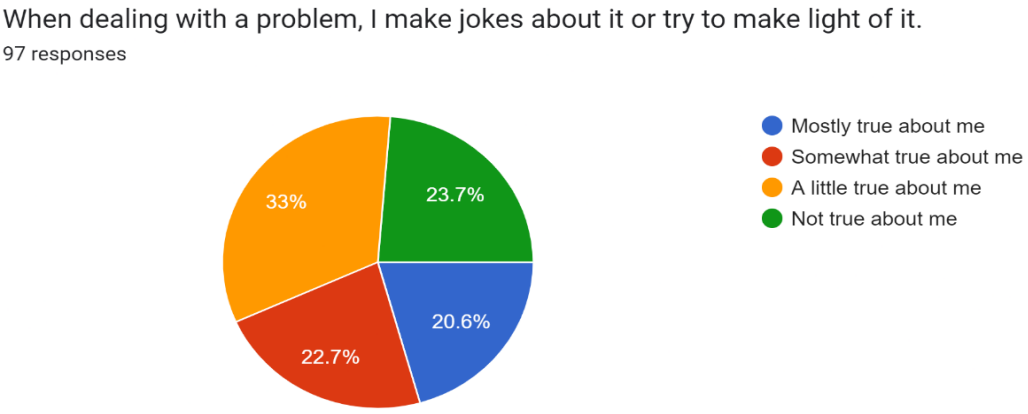
Cognitive coping (33% mostly true, 27.8% somewhat true) reflects consideration of long-term changes, indicating moderate perceived stress.



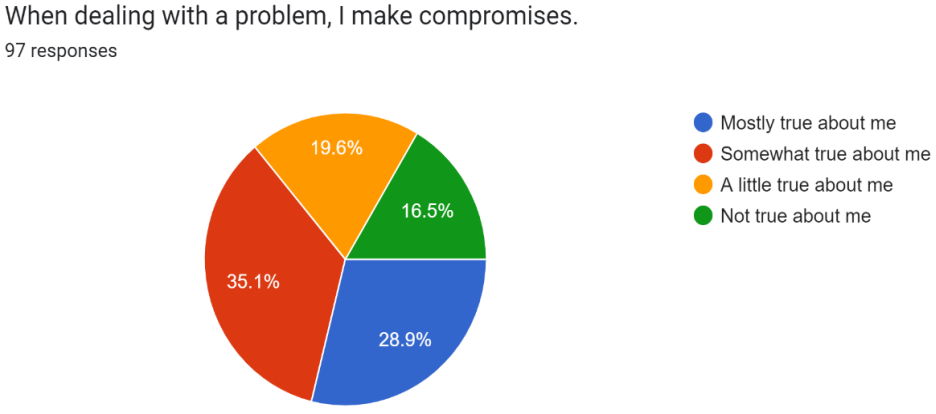
Emotional coping (32% mostly true, 22.7% somewhat true) indicates efforts to minimize the issue, suggesting low perceived stress.



This is behavioral coping (30.9% mostly true, 21.6% somewhat true), showing active coping through healthy activities, indicating moderate perceived stress.

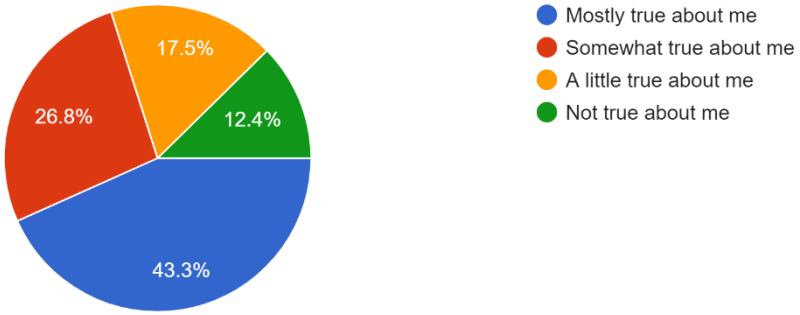


Emotional coping (20.6% mostly true, 22.7% somewhat true) shows the use of humor, suggesting low to moderate perceived stress.



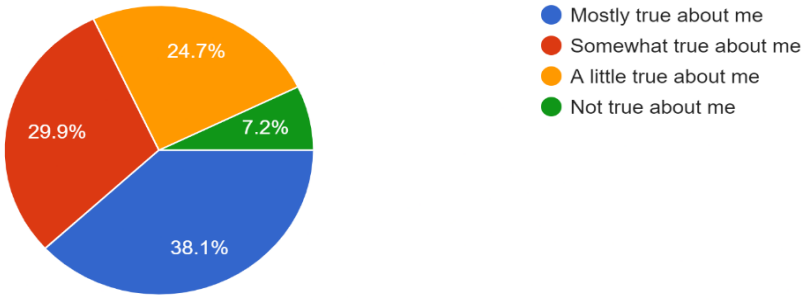
Behavioral coping (28.9% mostly true, 26.8% somewhat true) indicates flexibility in approach, suggesting moderate stress levels.

When dealing with a problem, I take steps to take better care of myself and my family for the future.
97 responses



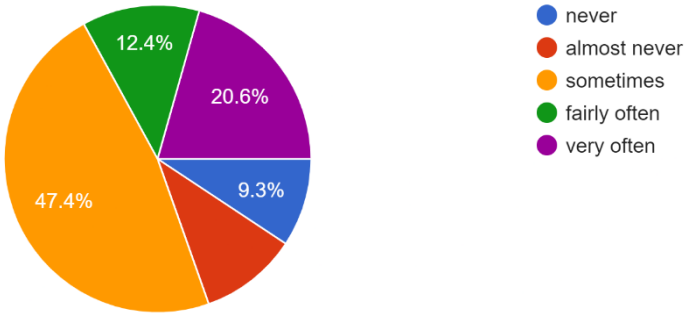
This shows behavioral coping (43.3% mostly true, 26.8% somewhat true), focusing on proactive self-care, suggesting low to moderate perceived stress.

When dealing with a problem, I work on making things better for the future by changing my habits, such as diet, exercise, budgeting, or staying in closer touch with people I care about.
97 responses



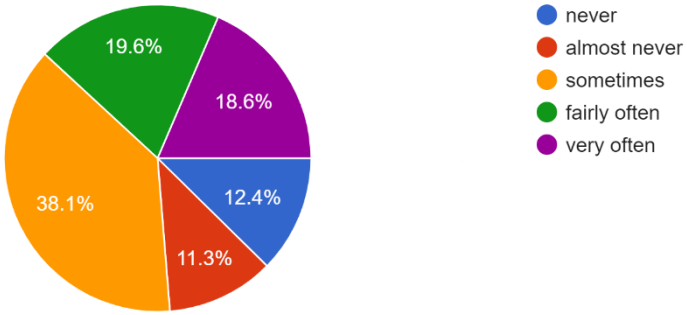
Behavioral coping (38.1% mostly true, 29.9% somewhat true) indicates healthy habit changes, pointing to moderate stress.

In the last month, how often have you been upset because of something that happened unexpectedly?
97 responses



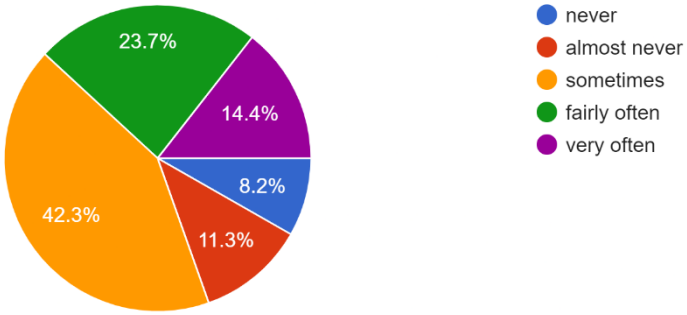
High perceived stress (47.4% sometimes, 20.6% very often) suggests moderate to high stress due to unexpected events.

In the last month, how often have you felt that you were unable to control the important things in your life?
97 responses



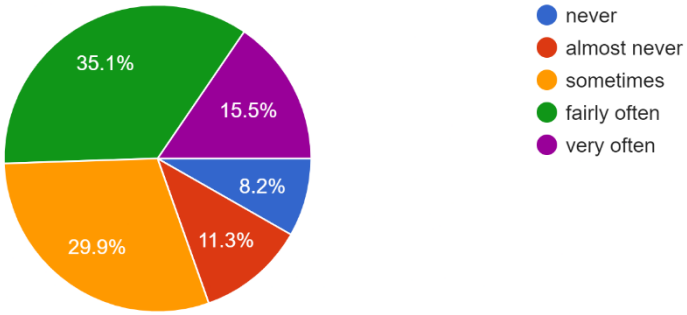
High perceived stress (38.1% sometimes, 19.6% fairly often) reflects a sense of losing control, indicating high perceived stress.

In the last month, how often have you felt nervous and stressed?
97 responses

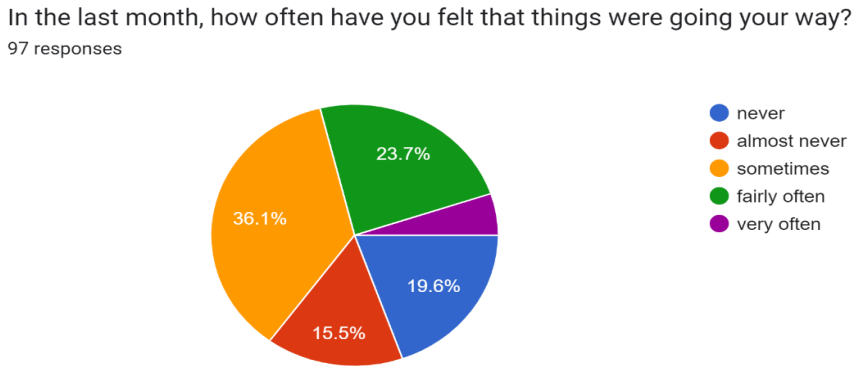


High perceived stress (42.3% sometimes, 23.7% fairly often) points to significant nervousness and stress, suggesting moderate to high perceived stress.

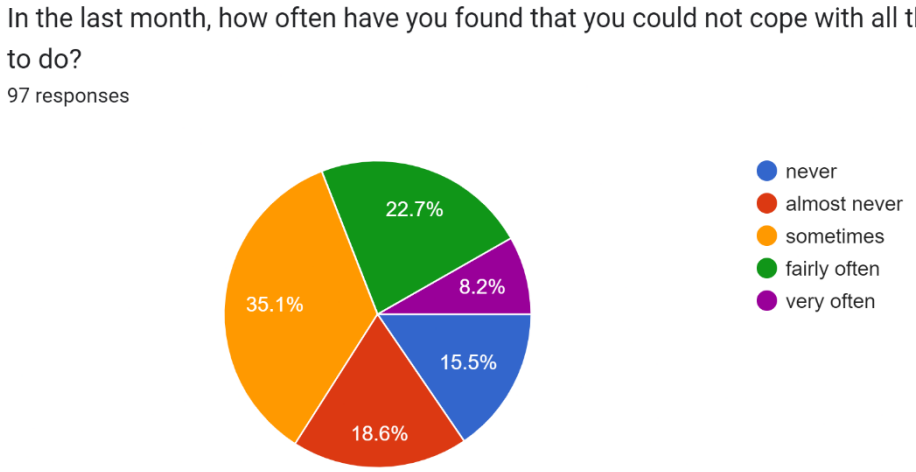
In the last month, how often have you felt confident about your ability to handle your personal problems?
97 responses



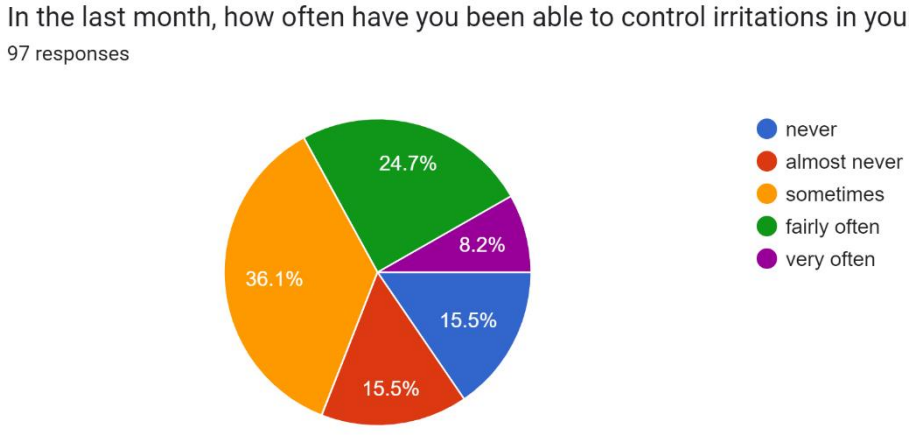
Low perceived stress (35.1% fairly often, 29.9% sometimes) suggests moderate stress levels, with confidence in handling personal issue



Low perceived stress (36.1% sometimes, 23.7% fairly often) reflects a generally positive outlook, suggesting moderate stress levels.

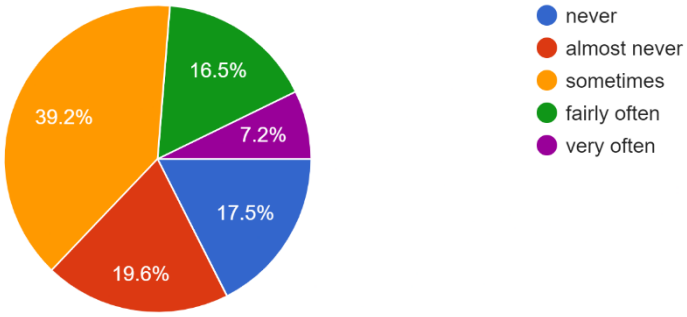


High perceived stress (35.1% sometimes, 22.7% fairly often) indicates difficulty managing responsibilities, suggesting high perceived stress.



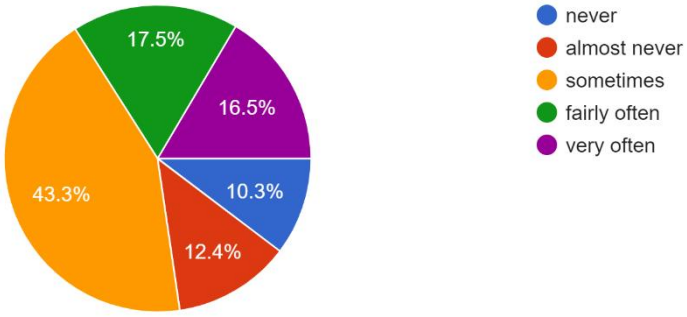
Low perceived stress (36.1% sometimes, 24.7% fairly often) suggests moderate stress with the ability to manage irritations.

In the last month, how often have you felt that you were on top of things?
97 responses



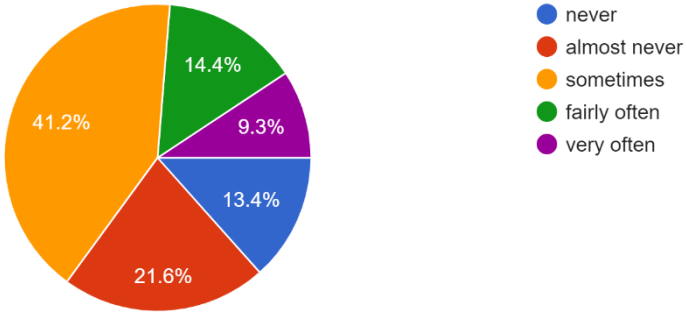
Low perceived stress (39.2% sometimes, 16.5% fairly often) suggests moderate stress with a sense of control.

In the last month, how often have you been angered because of things that happened that were outside of your control?
97 responses



High perceived stress (43.3% sometimes, 17.5% fairly often) indicates frustration due to external circumstances, suggesting high perceived stress.

In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?
97 responses



High perceived stress (41.2% sometimes, 14.4% fairly often) reflects feelings of overwhelm, indicating high perceived stress.

V. DISCUSSION

This study explores the relationship between stress levels and coping strategies in young adults, with a focus on how individual traits, such as personality and previous experiences, influence this relationship. The sample consisted of 100 participants, split evenly between 50 males and 50 females, all aged between 18 and 25. Stress levels were measured using the Perceived Stress Scale (PSS), while coping strategies were assessed using an adapted Coping Scale, which covers cognitive, emotional, and behavioral coping methods.

The analysis revealed significant interactions between perceived stress and the effectiveness of coping strategies, which were notably influenced by individual personality traits, such as neuroticism and conscientiousness. For instance, individuals reporting higher levels of stress tended to find emotion-focused coping strategies less effective, whereas those employing problem-focused coping strategies showed better outcomes in managing stress. This finding is consistent with the literature, which suggests that personality traits play a crucial role in determining the effectiveness of coping mechanisms (Devi, 2011; Kumanova, 2013). These results highlight the importance of tailoring stress management interventions to align with individuals' coping styles and personality traits, as doing so could enhance coping efficiency and overall well-being.

Coping strategies varied widely across participants, with cognitive coping techniques such as problem analysis and considering multiple solutions to problems being the most common. For example, 48.5% of participants reported that they "mostly" try to understand what happened when faced with a problem, while 45.4% said they "mostly" consider multiple alternatives for handling an issue. These behaviors indicate a tendency towards moderate levels of stress, with participants engaging in constructive thinking to resolve challenges. The emotional coping strategy of trying to see the positive side of a situation also showed significant usage, with 36% of participants indicating that this was "mostly true" for them. This finding aligns with the work of Redhwan et al. (2009), who found that emotional coping methods, including optimism, were common among university students facing stress.

Behavioral coping strategies also emerged as a significant part of the participants' stress management approach. For example, 32% of participants reported that they "mostly" wait for problems to resolve themselves, and 30.9% used exercise, hobbies, or meditation to cope with stress. These responses suggest that while cognitive and emotional strategies are prominent, behavioral methods, such as disengagement and self-care activities, are also crucial for managing stress. This aligns with previous research that highlights the role of physical activities and lifestyle changes in alleviating stress, particularly in high-pressure environments like universities (Devi, 2011; Ochanda, 2024).

Interestingly, participants' responses to items reflecting high-stress situations, such as feeling unable to control important aspects of their life or being overwhelmed by mounting difficulties, revealed higher levels of perceived stress. For example, 47.4% of participants indicated that they were "sometimes" upset by unexpected events, and 41.2% reported that they sometimes felt that challenges were piling up to the point of being insurmountable. These findings are consistent with the literature, where high levels of stress are linked to feelings of helplessness and a loss of control, often exacerbated by external pressures (Sarason, 1979; Kumanova, 2013).

A critical aspect of the study's findings is the role of personality traits in shaping coping outcomes. The results suggest that individuals with higher levels of neuroticism tend to use emotion-focused coping methods more frequently but may struggle to manage stress effectively. Conversely, those with higher levels of conscientiousness, who are more likely to engage in problem-focused strategies, tend to report

better stress management outcomes. This reflects the conclusions of studies such as those by Kumar and Bhukar (2012), which found that individuals with certain personality traits—such as higher conscientiousness—tend to cope more effectively with stress, particularly in academic settings. In contrast, individuals high in neuroticism are often more prone to stress and may rely on less adaptive coping strategies, further emphasizing the need for individualized coping interventions.

The study's results also underscore the complex relationship between coping strategies and stress levels. While problem-focused coping strategies generally lead to better stress management, emotion-focused strategies, though useful in some contexts, can be less effective when stress levels are high. This finding is supported by research that links problem-focused coping with more adaptive outcomes in managing chronic stress (Kumanova, 2013). The tendency for participants to adopt a combination of coping strategies—such as using humor, engaging in physical activities, or seeking social support—suggests that coping is not a one-size-fits-all solution but rather a dynamic process shaped by the interplay of individual traits, situational factors, and the severity of stress.

However, the study also has limitations that should be addressed in future research. One of the primary limitations is the reliance on self-reported data, which may be influenced by biases such as social desirability or inaccurate self-assessment. To mitigate this, future studies could incorporate objective measures of stress, such as physiological markers, alongside self-reports to obtain a more comprehensive understanding of stress and coping. Additionally, the sample size, while adequate for preliminary analysis, could be expanded to include participants from different age groups and backgrounds to enhance the generalizability of the findings. The study also did not examine the role of social support in coping with stress, which could be a significant factor in moderating the relationship between stress and coping effectiveness. Future research could explore how different types of social support—such as emotional, informational, and instrumental support—affect coping outcomes, as suggested by previous studies (Zarin et al., 2024).

Another limitation of the study is the cross-sectional design, which does not allow for causal inferences. Future research could adopt a longitudinal design to track changes in stress levels and coping strategies over time, providing a deeper understanding of how these variables evolve and influence each other. Additionally, exploring the role of emotional regulation in stress and coping could offer further insights into how individuals manage stress effectively. Emotional regulation strategies, such as reappraisal or suppression, may significantly impact the efficacy of coping mechanisms and should be explored in future studies to build a more nuanced understanding of stress management.

In conclusion, the study reveals that stress levels and coping strategies are closely linked, with individual traits, such as personality and past experiences, playing a significant role in determining coping outcomes. The results suggest that interventions tailored to individual coping preferences and personality traits can enhance the effectiveness of stress management strategies. Future research could build on these findings by exploring additional factors such as emotional regulation, social support, and the long-term effects of coping strategies on mental health outcomes

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